

Ein Cynllun Strategol Our Strategic Plan **2017 - 2020**



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Public Health
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Cymru iachach, hapusach a thecach | A healthier, happier and fairer Wales

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Executive Summary

Our strategic plan

This strategic plan explains how we intend to achieve our vision of a **'healthier, happier and fairer Wales'** over the next three years. It demonstrates how we will focus our efforts, through the delivery of our seven priorities, on **making the maximum difference to the health and well-being of our present and future generations.**

The focus of our work will be on the delivery of our priorities, which we set out below:

Our Strategic Priorities

1. Working collaboratively and providing system leadership to improve our population's health

The conditions in which we are born, grow, work and age can promote or detract from our health. To make improvements in our health we need to address these issues working with our partners and in genuine partnership with communities. We will do this through working with partnerships, such as Cymru Well Wales, and by delivering action in a number of setting (e.g. schools and workplaces) and on the leading health harming behaviours (e.g. tobacco and physical inactivity).

2. Working across sectors to improve the future health and well-being of our children

The early years (pre-birth to seven) is a critical part of childhood and key factor in determining future health and well-being. The work we have done examining adverse childhood experiences, which are stressful events that occur in childhood, shows links between them and adopting health harming behaviours in the future. We will lead work with our partners to prevent and mitigating these experiences, along with a focus on improving outcomes in the first 1000 days.

3. Developing and supporting primary and community care services to improve the public's health

Primary care is usually the first point of contact we have with the health system. We have a key role to play supporting the development of new models that best support and our based in our communities and meets the needs of the public. This will require the development of new ways of supporting people with a greater focus on prevention and reducing inequalities.

4. Supporting the NHS to improve outcomes for people using services

We have a key role to play supporting the NHS to improve outcomes for people using services, particularly around reducing harm and improving the quality of care in Wales. This will involve specific work to reduce healthcare associated infections, prescribing and medicines management and providing specialist national support through 1000 Lives Improvement

5. Influencing policy to protect and improve health and reduce inequalities

We have a key role to play in the development, implementation and evaluation of policy and research, which is vital to improving health and wellbeing. We will inform and support policy development, deliver and develop high quality research and work towards becoming a recognised international centre of excellence for investment in health, well-being and sustainable development.

6. Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver

We will continue to develop and transform the services that we deliver, such as screening and microbiology, to ensure that they are of the highest quality, safe and as effective as possible. This will involve the introduction of new technology and improvements in service delivery aimed at making real and tangible improvements to the people of Wales.

7. Developing the organisation to be the best it can be

We want to make Public Health Wales the best it can be so that we can achieve our vision for a 'healthy, happier and fairer Wales' through the delivery of our priorities. We also want to make it a great place to work that attracts great people, grows the skills of our staff and is a diverse and healthy place to work.

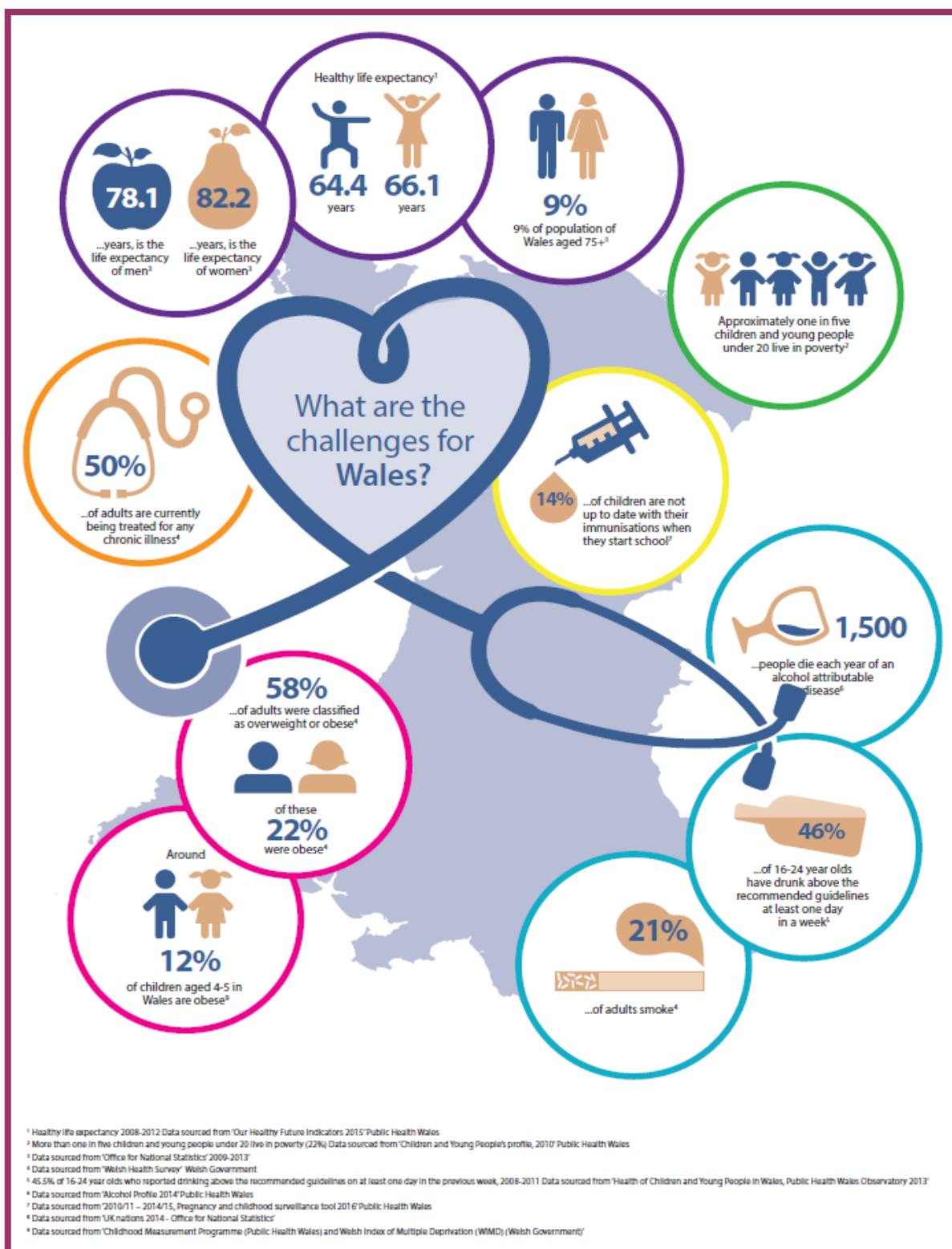
The challenges we face

We have made great strides in improving the health of the population in recent years. We are living longer, fewer of us are dying from infections and chronic diseases and we have better health services. However, we still face significant challenges in how we reduce the poverty and health inequalities that exist in some parts of Wales.

The diagram below shows the gains that have been made in recent years, along with the significant challenges that remain. This picture of health in Wales will only become more complex in coming years if what we do in the future is the same as we have done in the past.

Our opportunities to make a difference

We do not underestimate these challenges, but we believe that we have significant opportunities to deliver tangible improvements for the people of Wales at a pace and scale not previously seen. We must look to utilise and maximise our collective assets, through a systems approach, embrace the principles of sustainability and prudent healthcare and the unique opportunities presented by the Well-being of Future Generations Act (Wales) 2015.



This builds on the work we have undertaken over the last two years to adopted new and innovative approaches to ensure that we are successful in reducing health inequalities. As a result, we must focus resources and commitment to reducing absolute and relative inequalities in Wales in a way that significantly moves us as a country to focus on **fairness** and, as a consequence, establishing a **healthier** and **happier** Wales.

The Well-being of Future Generations Act (Wales) gives us exciting opportunities to work across boundaries and with people and partners that we have not previously worked closely with. It will enable us to introduce a fundamental shift in the way we work. As part of this approach, it is essential we listen to and empower people and build on the assets in our communities so we ensure they have an equal part in decisions.

We will do this by embracing the five ways of working set out in the Act. These are:



Long term Prevention Integration Collaboration Involvement

This will require us to work in different ways. We will embrace opportunities for **collaboration**. We will **involve** the public and our partners in what and how we do things, working in more **integrated** ways and focusing on delivering **preventative action** that leads to **long term improvements**.

We have included within this plan our well-being objectives, which show the contribution we will make to deliver the goals of the Well-being of Future Generations Act (Wales). These objectives have been informed by and are complementary of our priorities. We set out in the detail of the plan how each align and what we will be doing to deliver them over the next few years.

A longer term strategy

During 2017, we intend to begin a process to develop a new longer term strategy for Public Health Wales. The Well-being of Future Generations Act will provide the foundation for this, and we will continue to place the five ways of working at the heart of how we undertake our work.

We will involve our staff, partners and the public in the development of this work and will publish a new strategic plan, including our Wellbeing Objectives, in March 2018.

Strategy Map 2017



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Part 1

The difference we can
make for our present and
future generations



1.1 Introduction

We are entering the final year of our original three year strategic plan developed in 2015. As with previous years, during the development of this refreshed plan we have challenged ourselves to ensure that we are delivering action that will have the maximum impact for the people of Wales. This has required us to look back at the priorities we agreed and plans we put in place, as well as to look forward, scanning the horizon for strategic challenges and opportunities facing Wales over the next five to ten years.

We have agreed that the priorities we set in 2015 are right for the final year and that focusing our action and resources on these areas will deliver real benefits to the people of Wales. However, in reviewing our priorities we have recognised the need to sharpen the focus of some of the actions. This has resulted in us refining, in some cases, the strategic objectives that sit under each priority. This is informed by our experiences in delivering the first two years of this plan and also by wider environmental, social and legislative factors, particularly the Well-being of Future Generations (Wales) Act 2015.

The development of our strategic plan has been informed by the health of our population – our ‘state of the nation’ (see section 1.4), which sets out the health gains we have made in recent years but also highlights the challenges that remain, particularly in relation to health inequalities. A number of national strategic policy drivers have informed this plan, which are set out in section 1.5. Our approach, however, has been to use the Well-being of Future Generations (Wales) Act 2015 as our underpinning and guiding framework. You will see throughout the content of this plan how we have embraced the opportunity it presents through the development of our first set of well-being objectives. Further we have embedded well-being into each of our strategic objectives (see Part 3).

We know that we cannot deliver the ambitious and transformational objectives within this plan on our own. We have therefore highlighted key partners to our success in the development and delivery of our actions.

Our plan is presented in five parts:

Part 1

The difference we can make for our present and future generations - this sets out the strategic context for our plan, and priorities, including key policy and legislative drivers and the ‘state of the nation’.

Part 2	How we will make a difference - This sets out the role Public Health Wales will play and includes our current strategy.
Part 3	Our strategic priorities - Here we cover our six externally - facing strategic priorities in detail. We outline what success will look like at the end of three years, annual milestones to measure success and the actions we will take each year.
Part 4	Our ways of working - This details our internal strategic priority – <i>Developing the organisation to be the best it can be</i> . It also covers our financial plan, workforce, and our approach to quality, governance and innovation.
Part 5	Appendices

1.2 The difference we can make

We have set out in this Strategic Plan, and the versions published over the last two years, how we will make a difference to the health and well-being of our present and future generations. This plan, and the priorities and actions outlined within it, will serve as our compass. It sets out, at a high level, the action we will undertake and how we will direct our resources to achieve the maximum impact.

Our 'state of the nation' in section 1.4 presents, and reflects, the complex picture of health in Wales. It demonstrates the gains we have made but also highlights the significant challenges we continue to face. In particular, it shows improvements have not been realised in relation to health inequalities and that differences remain in healthy life expectancy between our most and least deprived communities. We also face challenges in how to better support our growing population to stay healthy and independent and how to best prevent and manage long term conditions.

While these challenges should not be underestimated, we believe that significant opportunities exist to deliver tangible improvements for the people of Wales at a pace and scale not previously seen. The Well-being of Future Generations (Wales) Act 2015 creates the legislative platform and sets the foundations for how we will work to deliver this plan and develop our longer term strategy for 2018 onwards. The Parliamentary Review of Health and Social Care in Wales also provides an opportunity to consider the future challenges facing us in Wales and to help shape our health services for the future.

This will require us to work in different ways in order to embrace the opportunity for **collaboration**, **involving** the public and our partners in what and how we do things; working in more **integrated** ways and focusing on delivering **preventative action** that leads to **long term** improvements. To do this, we will work across boundaries and with organisations that we have not previously worked closely with and we'll do this in a more dynamic and flexible way.

Public Health Wales has a vital role to play, through our **system leadership**, in tackling and addressing the key public health challenges facing Wales. We will lead action and mobilise partners, through the delivery of this plan, to achieve measurable improvements in a number of key public health priority areas.

This will involve delivering, at pace, around key areas identified within this plan, such as:

- Collaborative partnerships, such as Cymru Well Wales, aimed at galvanising action to achieve measurable improvements in key health outcomes, including: improving outcomes in the first 1000 days, preventing and mitigating the impact of adverse childhood experiences and employability
- Supporting health in all policies and the adoption of an evidence and informed based approach to improving public health through, such as with *Making a Difference* and our work on adverse childhood experiences
- Playing a key role in contributing to the achievement of reductions in HCAs and other key outcomes
- Maximising opportunities for collaborative leadership through partnerships with agencies across the public sector, including police and housing
- Implementing new and improved screening services, while also ensuring we continue to drive performance improvements
- Delivering strategic leadership across NHS Wales in relation to safeguarding people

We will further develop our leadership role during 2017 through the refresh process we will be undertaking with Welsh Government and the development of our new long term strategy for 2018 onwards.

How we will do this is set out within our strategic priorities, including how we will develop the organisation to be the best it can be. It will require us to challenge our internal ways of working, and in some cases redesign, our systems and processes to place the principles and goals of the Well-being of Future Generations (Wales) Act 2015 at the heart of 'what we do and how we work'.

We aim to ensure that all of the work taken forward within our priorities is underpinned by the prudent principles, which were embedded as key drivers in the development of our priorities and underpin the specific strategic objectives detailed within this plan.

The intention is to place **equal emphasis on both mental and physical health in the delivery of our priorities**, as it is understood that health, well-being and a reduction in health inequalities can only be achieved by focusing on both physical and mental well-being. Throughout this plan **where we refer to health and well-being this always includes both physical and mental health**.

We contribute to the ten year mental health strategy, '*Together for Mental Health*' through actions under a number of our priorities, which our set out in this plan. Specific areas of work are identified in our [Delivery Plan](#) for the period covering 2016-2019.

1.3 Embedding a future generations approach

We have included within this plan our first set of well-being objectives (see section 1.7). The development of these has been shaped by embedding a future generations approach into '**what we do and how we do it**'.

This is reflected in the strategic objectives we have developed to deliver each of our priorities. As part of the development, we have mapped these against the seven well-being goals (see section 2.2). This shows that in many areas the action we are undertaking will deliver real and tangible benefits, such as our work on adverse childhood experiences and the first 1000 days.

We have assessed the contribution each of our strategic objectives makes to each of the well-being goals. You will see this reflected both in the mapping on page 30 and also through the presentation of our strategic objectives in Part 3. An example of how we have done this is provided below.

Strategic Objective 1A

2 3 4 5

By the end of 2019/20 we will have led, in partnership with the Welsh Local Government Association, strategic approaches to aligning action across sectors to improve population outcomes in agreed priority areas and reduce inequalities in healthy life expectancy now and for future generations.

The border colouring and numbered/coloured squares in the top right of the box correspond to the well-being goals that the strategic objective will contribute towards over the next three years.

You will also see how through the delivery of our **developing the organisation** priority we are working to embed the five ways of working within Public Health Wales. This has been informed by a baseline assessment of our readiness undertaken in 2016. We will take forward key aspects of this through the delivery of our objectives under this priority, particularly over the next 12 months.

An example of how we plan to do this is through the development of our new Strategic Plan for 2018. We are placing the five ways of working and a focus on maximising our contribution to the seven well-being goals at the heart of how the strategy and our new priorities will be both developed and delivered. Further information on this can be found in Part 2.

1.4 State of the nation

1.4.1 Introduction

This section of our plan provides an overview of the current 'state of the nation' in relation to the health and well-being of the people of Wales. It outlines the main areas of health need and informs and underpins the priorities we have set, and action we will undertake, over the next three years. It presents, and reflects, the complex picture of health in Wales. It demonstrates the gains we have made but also highlights the significant challenges we continue to face. In particular, it shows improvements have not been realised in relation to health inequalities and differences in healthy life expectancy between our most and least deprived communities.

The Public Health Outcomes Framework for Wales, which was published during 2016, provides us with a framework for defining and monitoring the state of our nation's health and its wider determinants. The Public Health Outcomes Framework underpins the national indicators of the Well-being of Future Generations (Wales) Act 2015 that measure whether Wales is achieving the seven well-being goals set out in the Act. It includes a set of overarching indicators with the rest organised into three domains:

- A.** Living conditions that support and contribute to health now and for the future
- B.** Ways of living that improve health
- C.** Health throughout the life-course

1.4.2 Overarching outcomes

In Wales, life expectancy at birth has continued to **increase**. Life expectancy now stands at **78.3 years in males and 82.3 years in females**. The gap in life expectancy between males and females has narrowed, but the overall rate of increase in life expectancy in Wales has been slower than in England. Within Wales, the gap in life expectancy between the most and least deprived areas is 8.8 years (for males).

Extending life is important, but so too is the amount of life spent in good health. Between 2001-05 and 2010-14 healthy life expectancy in Wales has **increased** from **62.8 to 65.3 years in males and from 64.7 to 66.7 years in females**.

Figure 1 shows the more recent improvements that have been made and also the inequality gaps for these measures. They have remained stubbornly high with **people in our most deprived areas experiencing on average almost 20 fewer years of healthy life** than their counterparts in the least deprived areas.

Figure 1.1: Life expectancy and healthy life expectancy



1.4.3 Living conditions that support and contribute to health now and for the future

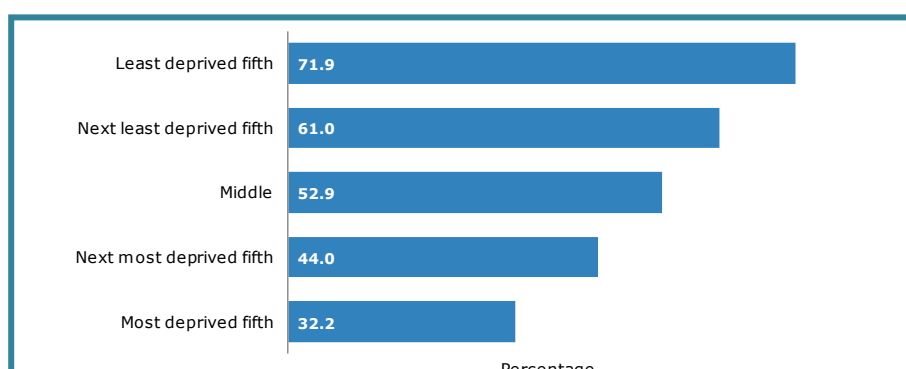
Health depends on many factors. The wider, or social determinants of health, include the conditions in which people are born, grow, live, work and age that can promote or detract from their health and well-being.

Over a quarter of children aged 0-18 years are living in poverty (as measured by the income deprivation indicator within the Welsh Index of Multiple Deprivation). **This varies from 15% in Monmouthshire to 34% in neighbouring Blaenau Gwent.** Evidence shows that children living in poverty do less well at school and earn less as adults thus

perpetuating a cycle of poverty. Reducing child poverty lies at the heart of tackling inequalities in Wales.

Education is also a key determinant of health. Figure 1.2 shows the percentage of people aged 15 with skills and qualifications at level 2. This consists of 5 A*-C GCSEs or equivalents including Maths and English. It shows **over 70% of young people in the least deprived areas achieving level 2 compared with just over 30% in the most deprived areas.**

Figure 1.2: School leavers with skills and qualifications (level 2), 2014

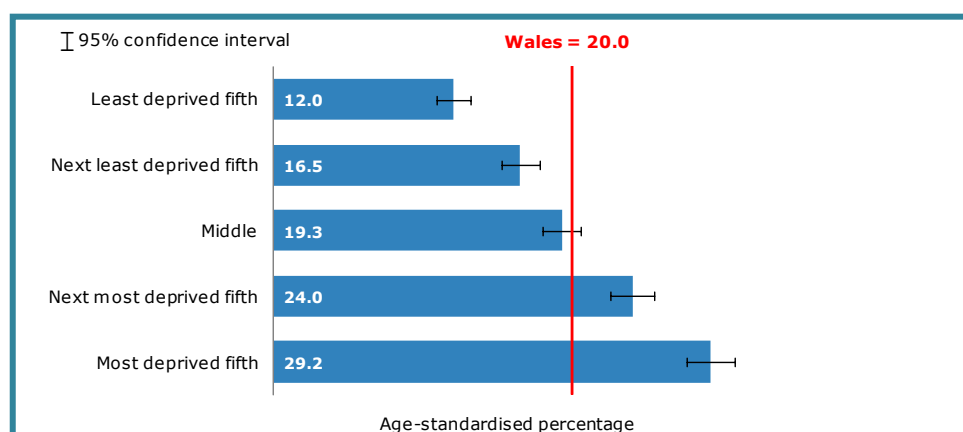


1.4.4 Ways of living that improve health

The way we live has a profound effect on our health. Often the term 'health choices' is used to describe behaviour. However, it is important to recognise that ways of living are not only informed by personal choice. Creating environments that make healthy choices easier to make is a crucial part of improving the state of our nation.

Smoking is the primary cause of preventable illness and premature death. Among adults, the percentage who smoke continues to fall. The most recent data at national level shows that for the **first time fewer than 20% of adults smoke.** However the extent of variation across Wales is very large with **almost 30% smoking in the most deprived areas of Wales compared with 12% in the least deprived areas** (figure 1.3).

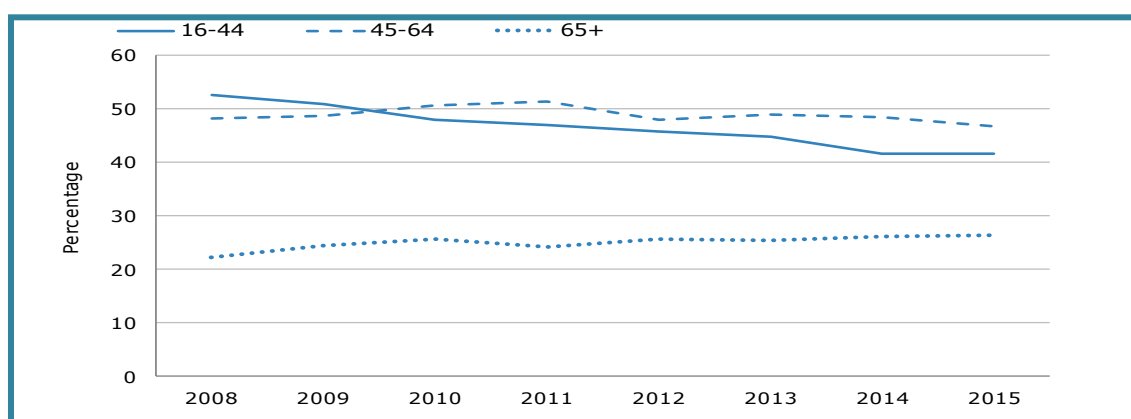
Figure 1.3: Adults who smoke, 2014-2015



A good diet forms an important element of a healthy lifestyle. The daily consumption of fruit and vegetables helps to reduce the risk of chronic disease such as heart disease and some cancers. It can also contribute to the maintenance of healthy weight. The percentage of people who report eating at least five portions of fruit or vegetables on the previous day is heading in the wrong direction, **declining from 36% in 2003/4 to 32% in 2015**. Among adults, 37% consumed at least five portions on the previous day in the least deprived areas of Wales compared with just 26% in the most deprived areas.

Alcohol use and its consequences also remain a major public health challenge in Wales. The misuse of alcohol either through heavy (binge) drinking or regular drinking above guidelines is linked with a number of health problems. Figure 1.4 shows trends in self-reported drinking above guidelines among adults in Wales. It shows how younger adults are leading the way in reducing above guideline drinking.

Figure 1.4: Adults drinking above guidelines, 2008-2015



1.4.5 Health throughout the life-course

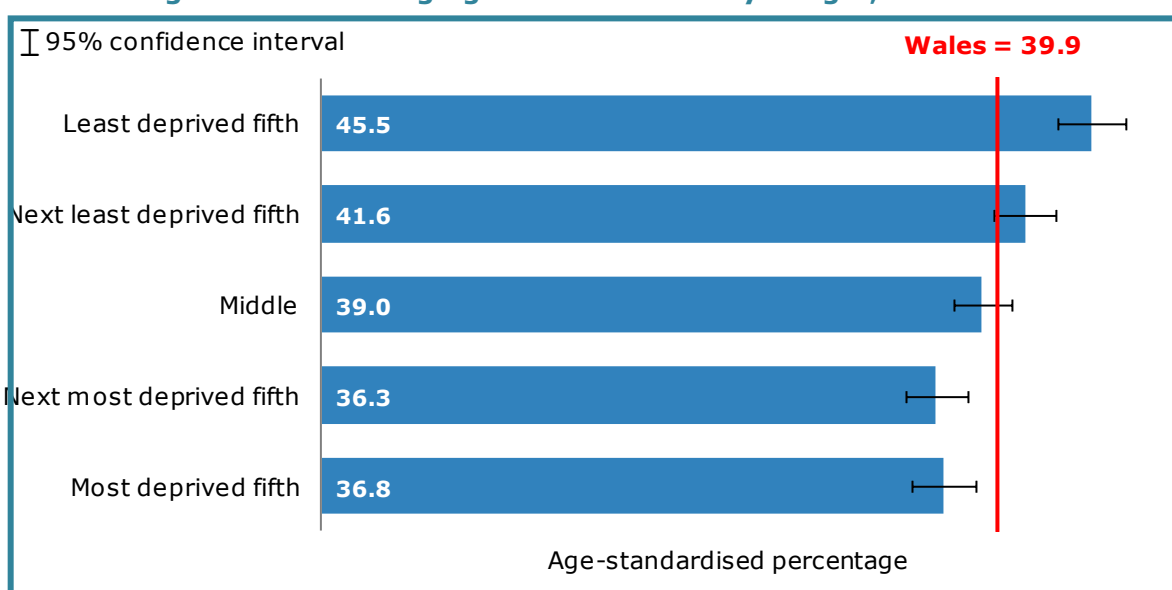
The number of new cancer cases continues to rise in Wales at an average rate of almost 1.5% per year. This is due to a combination of an ageing population, increasing gaps in socioeconomic inequalities and certain lifestyle factors. Breast, prostate, lung and bowel cancers remain the most common, and along with melanoma, showed the largest increase over the past 10 years. Survival from all types of cancers combined has steadily improved. Whilst the gap in one-year survival between the least and most deprived areas of Wales has decreased, five-year survival has increased slightly. Around 4 in 10 cases of cancer are potentially preventable.

The percentage of **reception year children (age 4-5 years) who are of healthy weight is higher in the least deprived areas (79%) than in the most deprived areas (72%)**. Children who are not a healthy weight – who are overweight or obese – are at risk of being overweight as

adults. The health consequences of this in adulthood can include type 2 diabetes, heart disease, some cancers, liver disease and problems with mobility. The consequences are not just physical – children who are obese experience more social and emotional problems than children of a healthy weight.

According to self-reported data from the Welsh Health Survey, **only around 40% of working age adults (16-64 years) in Wales are of healthy weight**. Figure 1.5 shows the breakdown by deprivation, which is 10% higher in least deprived areas.

Figure 1.5: Working age adults of healthy weight, 2014-2015



The proportion of the population of Wales aged 65 years and over is higher than in the rest of the UK and is set to rise rapidly over the next 20 years.

Figure 1.6: Older people in good health, 2003/04-2015

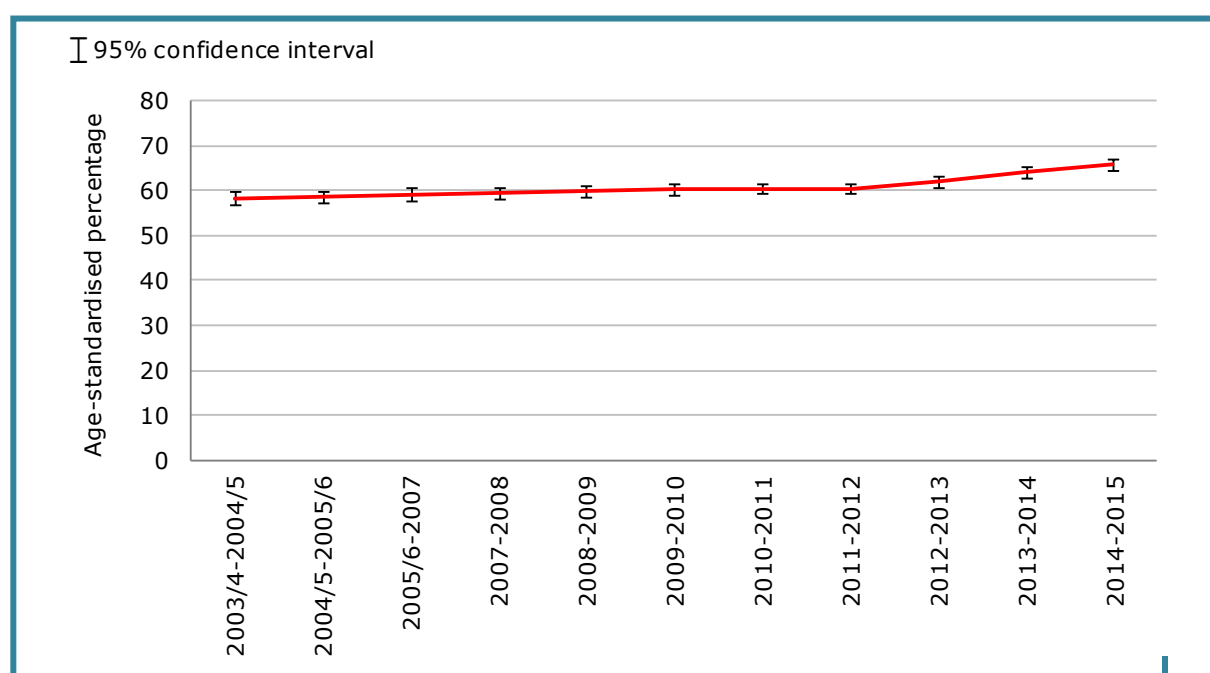
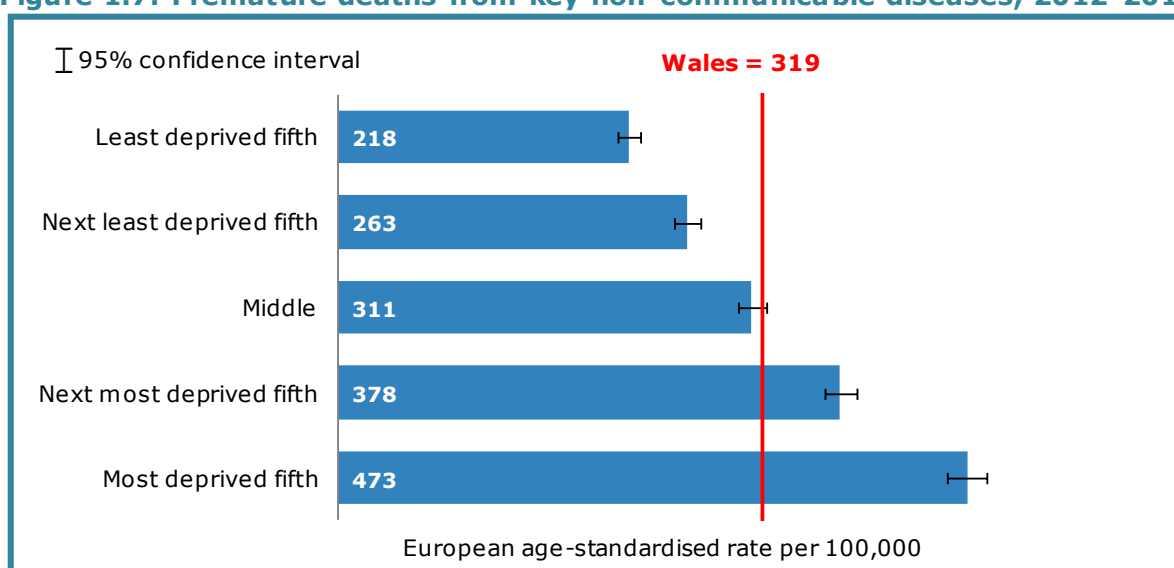


Figure 1.6 shows how the percentage of people in Wales aged 65+ reporting that they are in good, very good or excellent health has increased. However, **whilst 75% report good health in the least deprived areas only 53% of persons aged 65+ in the most deprived areas reported good, very good or excellent health.**

Considerable progress has been made in reducing premature deaths from key non-communicable diseases (heart disease, cancer, diabetes and respiratory disease) in Wales with the age standardised rate in 30-70 year olds falling from 385 per 100,000 in the period 2005-07 to 320 per 100,000 by 2012-14. Once again however, a stark picture is painted in relation to health inequalities as shown in Figure 1.7 below.

Figure 1.7: Premature deaths from key non-communicable diseases, 2012-2014



1.5 Legislative and policy drivers



The **Well-being of Future Generations (Wales) Act 2015** is a pivotal piece of legislation that aims to improve the social, economic, environmental and cultural well-being of Wales. The Act provides us with a legislative framework and driver for adopting a more radical and transformational approach to the way we work as an organisation and with partners.

The Act provides a framework that acts as a key 'link' to other legislation in Wales, including the:

- Public Health Bill Wales – see below
- Equality Act
- Planning (Wales) Act
- Active Travel (Wales) Act
- Social Services and Well-being (Wales) Act

- Housing (Wales) Act
- Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act

It will provide an opportunity to introduce a fundamental shift in approach to the development of plans and delivery of action with the increased focus that it will place on:

- Long-term thinking
- An integrated approach
- Preventative action
- Collaboration
- Engagement

As part of the refresh of this plan, we have undertaken work to assess ourselves against the goals and governance principles set out in the Act. This will provide us with a road map for how we plan our work and carry out our business in the future.



The **Public Health (Wales) Bill** will help to ensure that the health and well-being of the population is considered and underpins the shared responsibility that all public bodies in Wales have for the health of the nation. The Public Health (Wales) Bill will add to the legislative framework for improving health and well-being, protecting health and reducing inequalities in Wales.

It proposes placing a statutory duty for public bodies in Wales to undertake health impact assessment in specific circumstances, which provides an opportunity to strengthen the commitment to health in all policies demonstrated within the Well-being of Future Generations (Wales) Act 2015.



Taking Wales Forward (2016-2021) sets out the priority areas for the Welsh Government over the next five years. It outlines how the Government will deliver more and better jobs through a stronger and fairer economy, improve and reform public services; and build a united, connected and sustainable Wales. Key public health priority areas include: giving children the best start in life (including reducing adverse childhood experiences); mental health and well-being; strengthening community assets; the environment and improving our healthcare services.



The **Parliamentary Review of Health and Social Care in Wales** will identify important issues and challenges facing our health services over the coming years including:

- NHS finance
- Workforce and recruitment
- Meeting rising demand for healthcare and public

It will also examine options for the way forward and make recommendations about what the health service of the future will look like. It will be a key driver in the development of our new strategy and priorities for 2018 onwards.



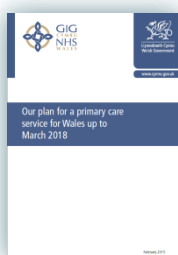
Prudent healthcare is central to good public health practice and what we aim to deliver, with our partners, over the next three years. The prudent healthcare principles were embedded as key drivers in the development of our priorities and underpin the specific strategic objectives detailed within this plan.



The **National Health Service (NHS) Wales Delivery Plans** set out nationally agreed actions and define performance measures and outcomes aimed at improving services, with particular attention to prevention and early diagnosis; integrated and efficient care; better information; and more targeted research. They have been developed for a range of specific areas, including liver disease and antimicrobial resistance, and the action Public Health Wales will undertake is set out within our strategic objectives and summarised in appendix 3.



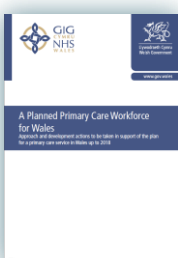
Together for Children and Young People is a major Welsh Government programme that seeks to address the mental health and mental well-being of all children and young people in Wales. The scope of this work is universal- to give all children the opportunity to have optimum mental health- but also targeted so that those who need support can receive appropriate attention, care and, if necessary, treatment at the right time, from the right service. This includes consideration of all the tiers of mental health services including the specialist Child and Adolescent Mental Health Service. As such, this programme fits seamlessly with Public Health Wales' strategic ambitions and priorities, particularly our multi- agency systems approach and aim of achieving significant improvements in the health of our children in their early years.



Our Plan for a Primary Care Service in Wales sets out how we will develop a more 'social' model of health that promotes physical, mental and social well-being, rather than just the absence of ill health. It aims to draw in all relevant organisations, services and people to ensure the root causes of poor health are addressed. This includes the NHS, social services, housing, education, transport, environment and leisure services, the voluntary sector, independent sector, carers and people (Welsh Government, 2014).

There are five priority areas for action in the plan, which have helped shape our approach to primary care (see section 11):

- Planning care locally
- Improving access and quality
- Equitable access
- A skilled local workforce
- Strong leadership



A Planned Primary Care Workforce for Wales: Approach and development actions to be taken in support of the plan for a primary care service in Wales up to 2018 describes the actions needed to develop the primary care workforce in order for them to take the plan forward. This includes specific actions for Public Health Wales.



Making a Difference: Investing in Sustainable Health and Well-being for the People of Wales sets out research evidence and expert opinion in support of preventing ill health and reducing inequalities to achieve a sustainable economy, thriving society and optimum health and well-being for the present and future generations in Wales. The report, which was developed by Public Health Wales, was informed by research evidence; professional guidance and expertise; Welsh priorities; and the current policy and health context in Wales. It has helped shape the refreshing of this plan and will be a key driver in the development of our new Strategic Plan for 2018.

1.6 Our priorities and deliverables

The table below provides an overview of our seven strategic priorities and the key deliverables we will achieve for each over the next three years:

Priority: Working collaboratively and providing system leadership to improve our population's health

What we will deliver over the next three years:

- There are shared priorities for action agreed across Cymru Well Wales partners.
- The number of schools, pre-school settings and workplaces achieving the highest level of attainment against the national benchmarks has increased.
- The proportion of smokers who access help to quit is increasing year on year.
- We have increased the proportion of pregnant smokers who access help to quit smoking during pregnancy and pregnant women who receive help to limit excess weight gain during pregnancy.

Priority: Working across sectors to improve the future health and well-being of our children

What we will deliver over the next three years:

- More children are having their developmental milestones assessed systematically and are receiving appropriate evidence-based interventions.
- There is widespread engagement in the First 1000 days Collaborative Programme from across Wales.
- Successful multi-sector and cross-Welsh Government collaboration which is tackling some of the most intractable problems in early years in Wales, including the effects of Adverse Childhood Experiences.

Priority: Developing and supporting primary and community care services to improve the public's health

How we will support, and work with, the NHS over the next three years:

- Delivery of our shared and agreed contribution to the transformation of the primary and community care system and we are delivering effective support to clusters.
- Local plans include clear and aligned evidence based commitments to population health improvement and the reduction of health inequalities.
- Clusters action plans are responsive to community needs and based on local data.

Priority: Supporting the NHS to improve outcomes for people using services

How we will support, and work with, the NHS over the next three years:

- Waiting time appointments for outpatient appointments will have reduced and patient experience will have improved through the Outpatient Improvement Programme.

- There is an increase in the numbers of patients who have their cancer detected in less than 31 days and there is an increase in the number of patients who survive their cancer 1 year after treatment.
- Measureable improvements in C. difficile disease, Antimicrobial Resistance
- Improvement capacity and capability in the NHS workforce has increased with over 50% bronze Improving Quality Together (IQT).
- An Adverse Childhood Experiences informed NHS Wales Safeguarding Network which shares learning, best practice and supports the implementation of more impactful interventions.

Priority: Influencing policy to protect and improve health and reduce inequalities

What we will deliver over the next three years:

- Supporting the development of Health Impact Assessment capacity across Wales and providing expert support on Health Impact Assessment policy.
- Embedded the Well-being of Future Generations (Wales) Act 2015 “ways of working” into our planning and practice, and are delivering our well-being objectives jointly with our partner organizations.
- Recognised national and international leader in the delivery of robust, high quality research across multiple public health disciplines.
- Active contributor to the delivery of Wales’ global health strategy.

Priority: Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver

What we will deliver over the next three years:

- Delivering a more effective response to the detection, prevention and management of infectious diseases and non communicable hazards.
- All Wales managed microbiology service network that is ISO 15189 and ISO (FWE) (2012) accredited.
- Routinely meeting or exceeding national standards in service performance.
- Full implementation of testing for Human Papilloma Virus as the primary screening test in Cervical Screening Wales.

Priority: Developing the organisation

What we will deliver over the next three years:

- Consistent business intelligence services underpinned by effective customer relationship management processes.
- Successful reconfiguration of our office estate.
- Integrated plans with our partners, particularly around system priorities, as part of implementing the Well-being of Future Generations (Wales) Act 2015.
- Performance and financial management system with a clear focus on outcomes and quality.
- Effective governance arrangements that ensure a focus on long term

decision making and effective partnership working, including with the public.

- Risk management system which will give the Board substantial assurance around its risk management arrangements.

1.7 Our well-being statement and draft well-being objectives

We have produced our first well-being statement ([add link](#)) and set out well-being objective, which are set out below, as part of the development of this plan. We identified areas of our work which exemplify the sustainable development principles and where we can maximise the contribution towards the well-being goals. They reflect where we are as an organisation in a 'point in time' and reflect only the beginning of the journey we are undertaking to embrace the Act. These objectives will be delivered through our strategic plan and the actions we set out over the subsequent pages.

Public Health Wales will work with others to:

1	Build capacity and support system change, to protect and improve health and reduce inequalities
2	Give our children the best start in life including opportunities to grow, play and learn in a healthy and safe environment
3	Support the NHS to deliver high quality, equitable and sustainable services that meet the needs of citizens at every stage of their life
4	Minimise public health risks from current and emerging diseases, environmental hazards and emergencies
5	Influence policy, planning and design to create sustainable, culturally thriving and cohesive communities, to tackle the wider determinants of health and to break the cycle of poverty and disadvantage
6	Maximise the potential of our natural and cultural resources to promote physical and mental health and well-being and contribute to a low carbon, environmentally resilient Wales
7	Strengthen our role in global health and sustainable development, realising the benefits of international engagement

1.8 Developing our new strategy for 2018 onwards

1.8.1 Our longer term strategic approach

We set our existing strategy and priorities during 2015 (see section 2.1), following a series of engagement events with our staff and partners. While we have undertaken a review of this during the subsequent two years, the overall strategy and priorities have remained largely unchanged. As we enter the final year of our original three year plan, we intend to undertake a comprehensive process to support the development of a new longer term strategy for Public Health Wales, which will be underpinned by a number of priorities.

The Well-being of Future Generations (Wales) Act 2015 provides the foundations on which we will undertake this work and we will challenge ourselves to look at least ten years ahead. This will help shape our new Strategic Plan for 2018 – 2021 and will include a number of strategic priorities.

We will place the five ways of working at the heart of this work. This will involve:



Long term

Setting of a ten year strategy for Public Health Wales that supports the delivery of our priorities and the well-being goals.



Prevention

How we, and our partners, ensure a focus on prevention is placed at the heart of what we do.



Integration

How we develop shared priorities and objectives working across Public Health Wales and with our partners to utilise our full resources.



Collaboration

How we collaborate across organisational boundaries, and within our own organisation, to develop and deliver our strategic priorities and well-being objectives.



Involvement

How we involve people in the development of our new strategy and priorities.

We will commence this work in early 2017 and will publish a new Strategic Plan, including our Well-being Objectives, in March 2018. This work will be informed by strong evidence and research on where we can have the greatest impact.

— Part 2 —

How we will make a difference



2.1 Our Strategy

2.1.1 Our vision

Our **vision** is to achieve **a healthier, happier and fairer Wales.**

2.1.2 Our mission

In support of our vision, Public Health Wales exists to **protect and improve health and well-being and reduce health inequalities for people in Wales.**

2.1.3 Our ways of working

We will deliver this by embracing and embedding the five ways of working set out within the Well-being of Future Generations (Wales) Act 2015:

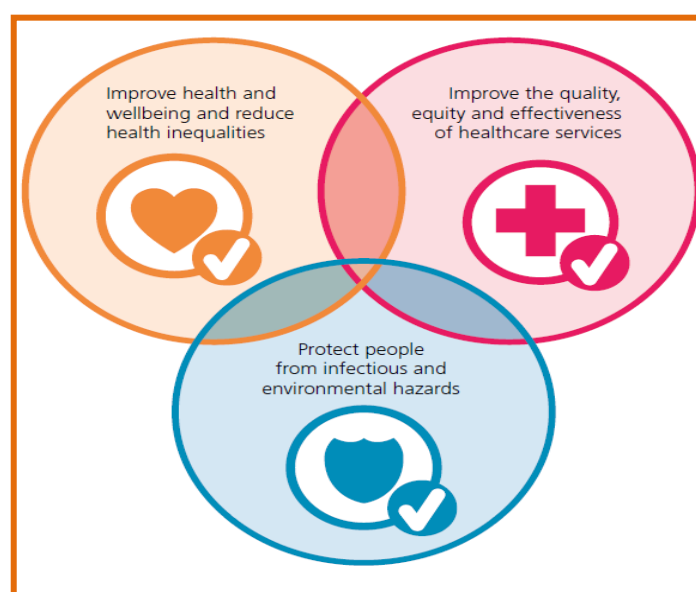


Long term Prevention Integration Collaboration Involvement

Our outcomes

We are determined to achieve better health and well-being outcomes for our population so that, by the end of the next three years, we will:

Figure 2.1: Our Outcomes



2.1.4 Our values

- **Working Together** with our communities, service users, colleagues and peers
- **Trust and Respect** in all we do
- **Making a Difference** to sustainable health and well-being for the people of Wales

2.1.5 Our strategic priorities

We agreed a more focused number of strategic priorities for the period of this plan. This will enable us to maximise our impact and align our resources to achieve our outcomes. During 2015, we agreed three shared strategic priorities with the wider NHS:

- Working across sectors to improve the future health and well-being of our children.
- Developing and supporting primary and community care services to improve the public's health.
- Supporting the NHS to improve outcomes for people using services.

In addition to the three shared priorities above, we have also determined three further strategic priorities that are specific to Public Health Wales:

- Working collaboratively and providing system leadership to improve our population's health.
- Influencing policy to protect and improve health and reduce inequalities.
- Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver.

All our strategic priorities will be enabled by the way we develop the organisation to be the best it can be – a further pivotal part of our plan for the next three years and our seventh strategic priority.

2.1.6 Our strategic objectives

For each of our strategic priorities we have set strategic objectives showing what we intend to deliver on the priority by the end of 2019/20. These are described in detail in the subsequent sections of this plan. In refreshing our plan, we have refined and sharpened the focus for some of the strategic objectives under our priorities. An overview of these changes is included as appendix 5. For each strategic priority, we have outlined why this is important and what we are trying to achieve. For each underpinning strategic objective we have articulated what success will look like at the end of three years. We have also set out the milestones for achieving that success at the end of years one and two and the high level actions we will take each year to achieve these milestones.

2.2 Alignment between Well-being Goals and our Priorities and Strategic Objectives

We have assessed our priorities and strategic objectives against the well-being goals. This shows that in many areas the action we will undertake over the next three years will deliver real and tangible benefits within these areas. An overview of this is provided in the table below:

The seven Well-being Goals for Wales						
A Prosperous Wales (1)	A Resilient Wales (2)	A Healthier Wales (3)	A More Equal Wales (4)	A Wales of Cohesive Communities (5)	A Wales of Vibrant Culture and Thriving Welsh Language (6)	A Globally-responsible Wales (7)
1	2	3	4	5	6	7
Working collaboratively and providing system leadership to improve our population's health						
We will have led, in partnership with the Welsh Local Government Association, strategic approaches to aligning action across sectors to improve population outcomes in agreed priority areas and reduce inequalities in healthy life expectancy now and for future generations.						
We will be delivering action to increase the proportion of schools, pre-school settings, workplaces, communities and NHS settings which take effective action to promote health.						
We will have led and enabled collective action on the leading health harming behaviours and key protective factors (tobacco, obesity and nutrition; physical inactivity; substance use and mental well-being)						
We will have influenced system-wide action through a focus on common outcomes and intelligence						
There will be a modernised approach to the delivery of health information for the public to support an informed and prudent public						
Working across sectors to improve the future health and well-being of our children						
We will have mobilised system-wide action to improve outcomes in the early years, with a focus on the first 1000 days						
We will have led and mobilised action across Wales to prevent and mitigate the impact of Adverse Childhood Experiences						
Developing and supporting primary and community care services to improve the public's health						
We will have worked with health boards and other partners to support a sustainable primary and community care system fit for future generations						

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The well-being agendas are aligned between public health teams, primary care clusters and public service boards							
Supporting the NHS to improve outcomes for people using services							
We will have enabled the NHS to work across the whole system to support quality improvements underpinned by the principles of prudent healthcare							
We will have worked with NHS Wales to use patient safety as a driver for higher quality health care							
We will have reduced healthcare associated infection rates in NHS Wales and provide strategic leadership and deliver responsive and flexible support with the aim of increasing immunisation uptake rates in Wales							
We will have led improvements in prescribing and medicines management in NHS Wales, delivering equitable, safe and preventative care for patients							
We will have increased quality improvement capacity and capability within NHS Wales and its partner organisations							
We will deliver strategic leadership across NHS Wales on safeguarding people and collaborate with regional partnerships in line with key legislative drivers.							
Influencing policy to protect and improve health and reduce inequalities							
We will be able to inform and support policy development and cross-sectoral working locally and nationally linking in research and learning from international good practice, and will have embedded the Well-being of Future Generations (Wales) Act 2015 within the organisation as a “way of working”.							
We will have research and evaluation embedded in Public Health Wales, through developing and supporting research capacity, generating new knowledge, strengthened collaborative relationships and improved communication to ensure new knowledge is transferred into policy and practice.							
We will have stronger international impact, links and role in global health; effective cross-organisational and cross-NHS engagement; and leading expertise in investment for health, well-being and sustainable development nationally and internationally.							
Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver							
We will have a fully integrated Public Health Services Directorate							
We will have developed an integrated Health Protection Service (combining microbiology and health protection) that will deliver a more efficient and effective response to public health threats							
We will have developed a high quality, all-Wales microbiology network, based on a three-region model managed by Public Health Wales							
We will have ensured that all our screening programmes are using the best available technology to maximise clinical outcomes with embedded service user engagement, and continue to meet or exceed national clinical and timeliness standards							

2.3 Progress to date

The following section provides an overview of our key achievements to during 2016/17:

Working collaboratively and providing system leadership to improve our population's health

- Agreed multi-agency collaborative First 1000 days programme, including agreed outcomes.
- Implemented of the smoking in pregnancy improvement programme in all health board areas.
- Developed of a plan for health intelligence support to well-being of future generations local well-being assessments.
- Developed agreement over common approach to Making Every Contact Count across public health system that supports local delivery.

Working across sectors to improve the future health and well-being of our children

- Worked with Welsh Government to identify and align policy options to improve early years outcomes.
- Supported the embedding of Adverse Childhood Experiences approach into the work being developed by the Torfaen and Wrexham 1000 days pathfinder programmes.
- Delivery of JustB / Byw Bywyd youth smoking prevention programme.
- Led work around developing and implementing approaches around child and adolescent mental health.

Developing and supporting primary and community care services to improve the public's health

- Established the Primary & Community Care Development and Innovation Hub Programme Board and agreed interim work programme.
- Commissioned and commenced delivery of cluster leadership programme.
- Delivered skills development workshops on health needs assessment.
- Piloted dedicated cluster website, Primary Care One.
- Supported the evaluation of pacesetter projects and sharing of best practice.

Supporting the NHS to improve outcomes for people using services

- Provided evidence-based immunisation guidance, training, education and public information to support health boards, Trusts and general practices.
- Supported each health board and trust (excluding Welsh Ambulance Service Trust) to report sepsis metrics to Welsh Government.
- Developed and standardised tools for Acute Kidney Injury including the Wee Wheel and Kidney Safe bracelet.
- Supported approximately 30,000 NHS staff and contractors to complete Improving Quality Together (IQT) bronze and over 1,800 to train in IQT silver.

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- Supported Cwm Taf health board to pilot an early cancer diagnosis for the vague symptom pathway.
- Launched the All Wales Foetal Movements Guideline and the Growth Assessment Programme to help health boards reduce stillbirth.

Influencing policy to protect and improve health and reduce inequalities

- Publication and engagement on Adverse Childhood Experiences and 'Making a Difference'.
- Established the *Health and Sustainability Hub*.
- Developed Health Impact Assessments in different planning sectors.
- Implemented agreed joint action plans with criminal justice and housing.

Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver

- Completed cervical cytology Laboratory Information Management System implementation.
- Commenced implementation of Antimicrobial Resistance Delivery Plan
- Produced delivery plan for introducing infectious disease genomics service.
- Supported local authorities and health boards in the control of individual cases / outbreaks of communicable disease and environmental incidents.
- Implemented an enhanced model for surveillance and analytical support within Health Protection.
- Launch of 2016/17 flu campaign.
- Developed new vaccine uptake reports to support cluster working and implement quarterly surveillance reports.
- Introduced 24/7 microbiology service in North Wales.
- Developed a health protection policy and planning toolkit.

Developing the organisation

- Developed a 'Quality and Impact Framework'
- Completed Phase one of Our Space Programme with the relocation of staff to No. 2 Capital Quarter (41 tonnes of waste to landfill avoided, 133 tonnes of CO₂ saved and nearly 90% of the 2,600 items used in the refit were re-used).
- Reviewed and implemented actions to improve our risk management arrangements, including the introduction of the Board Assurance Framework and Corporate Risk Register.
- Implemented revised planning processes to support the development of robust plans in 2016/17, ensuring alignment with the Future Generations and Well-being Act.
- Implemented the informatics governance arrangements as detailed in the e-Strategy.
- Developed a new Communication and Engagement Strategy.

2.4 Profile of Public Health Wales

2.4.1 Where we have come from

For the first time, the establishment of Public Health Wales in 2009 created an independent NHS body with a clear and specific public health focus, and a remit to act across all the domains of public health practice.

This is key to the effective delivery of comprehensive public health services at the scale and pace necessary in Wales. The value of such an approach is demonstrated through a number of benefits that include:

- The ability to adopt an integrated approach to public health issues in Wales.
- The effective, efficient and flexible deployment of specialist public health skills and resources.
- Deployment of resources locally, nationally, operationally and strategically.
- Facilitation and sharing of knowledge and expertise with UK and international bodies.
- Close working with, and support to, NHS Wales coordination and ongoing support for public health professionals in line with UK guidelines.

Since 2009, we have grown and developed considerably, taking on new functions and services. This has seen us increase staff by 44%. The addition of new skills, expertise and ways of working has made us stronger.

From this stronger base we have been working to align all our functions and services to the key public health challenges. This has involved significant redesign of our organisation to better support us in delivering our priorities.

We have also invested in strengthening and developing the organisation including:

- Formally reviewing existing programmes and services to ensure they are delivering real health benefits and value for money e.g. *Transforming Health Improvement in Wales*.
- Undertaking a number of service-specific modernisations and developments.
- Investing in our services and supporting infrastructure.
- Restructuring the organisation and reorganising our resources internally to better deliver our strategy.

2.4.2 Our statutory functions

Public Health Wales has four statutory functions. These are to:

- Provide and manage a range of public health, health protection, healthcare improvement, health advisory, child protection and microbiological laboratory services and services relating to the surveillance, prevention and control of communicable diseases;
- Develop and maintain arrangements for making information about matters related to the protection and improvement of health in Wales available to the public; to undertake and commission research into such matters and to contribute to the provision and development of training in such matters;
- Undertake the systematic collection, analysis and dissemination of information about the health of the people of Wales in particular including cancer incidence, mortality and survival; and prevalence of congenital anomalies; and
- Provide, manage, monitor, evaluate and conduct research into screening of health conditions and screening of health related matters.

2.4.3 Our organisational structure

If we are to succeed in delivering our strategy we need a fit-for-purpose organisational structure that facilitates our culture and execution of our mission.

With a radically new, three-year strategic focus, we reviewed the structure of the organisation to improve our effectiveness in relation to the delivery of this plan. The new arrangements, which we implemented during 2015, provided us with an exciting opportunity to better align our organisational structure to our strategy, which will enable more effective delivery and implementation of our work.

An overview of our directorates and key functions is provided below.

Directorate	Key Functions
Health and Well-being	Health improvement
	Multi agency engagement
	Primary, community and integrated care
	Health intelligence and knowledge management
	Local public health teams
Public Health Services	Microbiology
	Screening
	Health protection
	Professional oversight and leadership for all medical staff

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	Professional oversight and leadership for non medical public health registered professionals
Policy, Research and International Development	Policy development
	Research and development
	Academic liaison
	International development
NHS Quality Improvement and Patient Safety	NHS strategic leadership for quality
	1000 Lives Improvement
	Prudent healthcare
Quality, Nursing and Allied Health Professionals	Quality and standards
	Professional Leadership and Oversight for all Nursing and all non-medical regulated healthcare professionals and Health Care Support Workers (or equivalent roles)
	Clinical and information governance
	Risk management
	Complaints and claims
	Service-user engagement
	Safeguarding
	Mental health executive co-ordination and oversight
Operations and Finance	Finance
	Communications and stakeholder engagement
	Estates and health & safety
	Planning and performance
	Information management technology
	Strategic programmes
People and Organisational Development	Human resources
	Organisational development and change management
	Health and safety
	Staff engagement
	Welsh language and equality

2.4.4 Transformation to better enable delivery

During 2016/17, we have undertaken a number of key strategic reviews of our services and functions. These have been undertaken for a number of reasons, including the significant expansion undertaken since we were established and the desire to ensure a commitment to continuous improvement.

The reviews we have completed include:

- External review of our screening service

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- External quality peer review of our health intelligence division and of health intelligence functions across the organisation
- Internal review of our dental public health function
- Wales Audit Office review of the collaborative arrangements for managing Local Public Health Teams

The finding of these reviews will help shape the effective future delivery of our services. We will be implementing the recommendations of these during 2017/18 and using the approaches and findings to help shape the future direction of Public Health Wales.

2.4.5 Working with our NHS partners

We have undertaken significant work with health boards during 2015 and 2016 to develop and strengthen our collective arrangements, particularly in relation to service delivery. This is reflected in the development of a Memorandum of Understanding (MOU), which aims to articulate the specific arrangements and management of services between Public Health Wales and health boards.

The MOU provides a summary of services provided by both parties, including reference to specific service level agreements (where applicable). It includes detail on the services that we provide to, and commission from, health boards. It underpins these arrangements with a clear process for the escalation of issues and dispute resolution.

The MOU for 2017/18 will include detail on the following functions Public Health Wales delivers in support of health boards:

- Primary and Community Care
- Health Intelligence
- Key Health Improvement Programmes
- Screening Services
- Microbiology Services
- Health Protection
- 1000 Lives Improvement
- Policy, Research and International Development

Our IMTP should be seen as complimentary and aligned with the specifications set out within the MOU. The IMTP highlights key areas of focus Public Health Wales will provide leadership and support to health boards on, including:

- Reducing HCAs
- Transforming primary care
- Modernising microbiology services
- Supporting improvements in unscheduled care

Part 3

Our Strategic Priorities



3.1 Strategic Priority 1

Working collaboratively and providing system leadership to improve our population's health

3.1.1 Why a priority?

The wider determinants of health include the conditions in which people are born, grow, live, work and age that can promote or detract from their health and well-being. The 'Making a Difference' report highlights the importance of addressing the wider economic, social and environmental determinants of health. In order to make sustainable improvements in health, we need to address these wider determinants in an evidence-based way. No one agency alone can make a difference but if we work together to harness our activity and resources we are better able to maximise our collective impact. This requires coordinated effort across sectors and agencies including policy makers, national and local services, the voluntary sector and an effective, genuine partnership with communities and groups.

3.1.2 Drivers for change

Well-being of Future Generations (Wales) Act 2015 places obligations on Public Health Wales, other public bodies, the third sector and business, to take joint action to protect and improve the health of future generations. Collaboration is one of the five ways of working fundamental to achieving the ambitions set out in the Act 2015.

New models for systems thinking and social movements - There is a long tradition of multi-agency and partnership working in Wales. Increasingly, however, we have recognised that our collective efforts are not delivering the change in outcomes at a population level that we seek. Working together is not enough. Evidence shows that how we work together is important and the creation of purposeful partnerships that deliver change has to be our goal. Better results can be achieved through both supporting 'social movements' and 'systems thinking' across all sectors. Community-led approaches that empower individuals and communities to take control over their lives are also vital for success.

3.1.3 What are we trying to achieve?

We are bringing people together to achieve, over time, measurable improvements in health determinants and a reduction in the gap in healthy life expectancy between the most and least disadvantaged communities. To do this we need to:

Part 3 – Our Strategic Priorities

Align action nationally - *Cymru Well Wales* is a partnership of a growing number of public and third sector organisations who are committed to working together to secure better health for the people of Wales.

Formerly known as *United in Improving Health*, *Cymru Well Wales* is a strategic initiative that we have helped establish in partnership with sector leaders and influencers from across Wales. We are united in our common ambition to create the foundations of a positive future through better alignment of the activities and resources of communities, schools, local authorities, health care, housing, police, fire and rescue services, our environment, workplaces, sports and leisure activities.

Partners in *Cymru Well Wales* share a commitment to thinking and working differently to tackle health inequalities, learning from others to design innovative action for the future and empowering our communities in all that we do.

Cymru Well Wales is guided by a strategic leadership group that provides a focus for its collaborative efforts. The collaboration has identified its first three key areas of focus and work is underway through dedicated programme boards to drive improvements around these priorities.

- **Improving outcomes in the first 1000 days.** This recognises the growing national and international evidence that this is the area that delivers the greatest return on investment for the system and has the potential to change life chances and outcomes for individuals.
- **Preventing and mitigating the impact of adverse childhood experiences.** Evidence from Wales and internationally demonstrates a strong and cumulative association between exposure to adversity during childhood, and the adoption of health harming behaviours and poor mental health across the life course
- **Employability.** There is strong evidence to show that employment provides the most sustainable route out of poverty. Being unemployed adversely affects both mental and physical health.

We have undertaken further work to increase alignment around key priority areas for population health in 2016/17 including endorsing the top ten best buys for prevention in Making a Difference.

We will continue our work with our strategic partners to set ambitious targets for change at a population level, align our collective resources more effectively and ensure that we have a suite of system, service or programme level measures that will enable us to demonstrate the impact of our work and that of the system as a whole.

The approach to system working is demonstrated in initiatives with our partners in the housing and criminal justice sectors where we are

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undertaking joint programmes of work to achieve common outcomes. These partnerships are underpinned by Memoranda of Understanding between Public Health Wales and Community Housing Cymru; and between Public Health Wales and the Police and Crime Commissioner for South Wales and the South Wales Police.

3.1.4 Align action to reduce the impact of health harming behaviours and promote protective factors

We need to ensure that collectively we have the capacity and capability to deliver effective population change.

We have agreed with partners through the Transforming Health Improvement implementation programme to focus our collective health promotion efforts on addressing key health harming behaviours. These are:

- Tobacco use
- Alcohol use
- Physical inactivity
- Poor nutrition and obesity

The system outcomes are identified through national policy directions for collective action. There are a range of mechanisms which now exist to refine the outcomes and agree the indicators by which we will measure progress towards them. Work to renew and refocus programmes of work to deliver and accelerate change is well established and during 2017/18 we will continue to implement and embed this work across the system.

Tobacco

Whole system outcomes: Reduce the proportion of the population who smoke tobacco to 16 per cent or below by 2020.

- Reduce smoking uptake by children and young people.
- Increase the proportion of smokers who quit.

Our primary focus is to provide leadership to the wider public health system in relation to all aspects of tobacco control and to align action across sectors and organisations to achieve this goal. This includes work to reduce uptake of smoking among young people and to support smokers to quit. We will put in place a new integrated model of smoking cessation to ensure that smokers in Wales can access the best support to quit smoking in a way that is right for them. During 2016/17 we have worked closely with Welsh Government and other partners to develop a refreshed Tobacco Control Action Plan for Wales. As the content is agreed specific actions will be incorporated into our plans for implementation.

Alcohol

Whole system outcomes: Reduce the harm associated with excess alcohol consumption.

- Reduce the proportion of children who report having tried alcohol at age 15.
- Reduce the proportion of children who report having been drunk.
- Increase the proportion of adults who report drinking within recommended limits.
- Reduce the proportion of adults who report binge drinking.

We will work with our partners in local government and the criminal justice sector, among others, to reduce illegal sale and supply of alcohol to children and young people; work with communities to develop alcohol harm-reduction partnerships; and work with local authorities to use licensing laws to reduce the density of alcohol sales outlets, particularly in areas of deprivation.

We will continue to advocate for a minimum unit price for alcohol.

Physical inactivity

Whole system outcomes:

- Increasing the proportion of the population who report achieving the Chief Medical Officer physical activity guidelines.
- Reducing the proportion of adults who report being inactive.

We will continue our partnership with Sport Wales and the Welsh Government to create opportunities for all ages to become more active and less sedentary. We will be working to create environments that support active living including active travel. We will be working with key partners to deliver system level action to increase the proportion of children and young people who walk or cycle to school, linking with our Healthy Schools Schemes.

Poor nutrition and obesity

Whole system outcomes:

- Increase the proportion of the adult and child population who are a healthy weight.
- Reduce the inequality in rates of obesity between population groups for children at 5 years of age.
- Reduce the proportion of 5 year olds in the most deprived communities who have decayed, missing or filled teeth.

We will continue the work to embed the 10 Steps to a Healthy Weight and to deliver the agreed priorities in partnership with Health Boards. We will

Part 3 – Our Strategic Priorities

expand this work to include older children with the goal of halting and eventually reversing the year-on-year rise in levels of obesity in children and adults. Based on the insight work undertaken in 2015/16, we will develop a programme of social marketing to increase both parents' and professionals' ability to recognise unhealthy weight and take action.

Align action on mental well-being - We will work to increase levels of mental well-being in the population as we recognise that how we feel affects our ability to learn, to work and to care for ourselves and those around us. We recognise that more work is needed to improve how we measure and describe aspects of mental health and well-being and to increase our work to build resilience and emotional literacy as core preventative strategies both for mental ill health and to reduce the impact of adverse childhood experiences. Preventing self-harm among children and young people will be a key priority area in 2017/18.

The importance of community cohesion and individual and community resilience in creating communities which support mental well-being is increasingly recognised. Individuals and communities which establish and support strong social networks and reduce isolation are protected against mental ill health. Through our Healthy and Well Communities programme we are working to better understand and share what works in building social and community networks.

3.1.5 Social Marketing and Public Information

Public Health Wales will play an increasing role in co-ordinating action to promote behaviour change at scale through the use of social marketing approaches. During 2016/17 we have commissioned a range of insight work and development work in relation to three priority areas:

- Physical inactivity
- Increasing uptake of NHS Smoking Cessation Services
- Childhood Obesity, including the 10 Steps to a Healthy Weight

We have also developed an approach to social marketing and public awareness raising initiatives which will underpin work in this area in the future. This will include the establishment of a Behaviour Change and Public Information team which will provide a focus for this work within Health Improvement working closely with colleagues in Communications.

This team will also bring together work to improve our approach to the provision of health promotion information for the public to enable them to take control of their own health and well-being building on the work of the Health Promotion Library. Our approach will focus on increased joint working and co-production with other agencies to avoid duplication and to improve access to health promotion information through existing information services across Wales, including local libraries. We will work with partners to make it easier for the public to recognise trusted quality

Part 3 – Our Strategic Priorities

assured health promotion information and to more effectively exploit digital technology in place of print material, where it is appropriate to do so.

3.1.6 How will we measure success?

The Public Health Outcomes Framework indicators along with those for the Well-being of Future Generations (Wales) Act 2015 provide a basis for measuring our progress as a whole system.

The process for agreeing any future priorities or measures is an integral part of developing a collaborative approach. The measures we collectively choose to use will evolve over time to reflect shared understanding of the key things which require change.

Monitoring and evaluation will be embedded in our programmes work to enable decisions to be made about whether initiatives should be continued or stopped, or whether innovative approaches are succeeding.

3.1.7 Stakeholder Engagement

Public Health Wales has a range of established mechanisms for engaging with key stakeholders and the wider public in developing strategic plans. The primary mechanism for strategic engagement with our national partners is through Cymru Well Wales.

In addition we have strategic partnerships around key settings. This includes our Educational Settings Advisory Board which includes representatives from Welsh Government; Directors of Public Health; Health Boards; Association of Directors of Education; Sport Wales and Head Teacher representatives. A similar mechanism has been established for the National Exercise Referral programme. The National Making Every Contact Count Network is the mechanism established for agreeing the national programme of work. Major programmes such as the First 1000 Days programme have Programme Boards and other mechanisms for engagement with partners. There has been an extensive programme of engagement in developing the Healthy and Well Communities Programme which has included meetings with Local County Voluntary Councils among others.

For each of the health harming behaviours we have established, in partnership with our Local Public Health Teams, mechanisms for the leads in each area to come together to discuss common priorities and shape work programmes.

Engagement with the public is primarily achieved through bespoke social research (insight) work. In the last year work has been undertaken with smokers who want to quit on how best to support them to engage with NHS Smoking Cessation Services; parents of children on childhood

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obesity and ongoing engagement with young people through the development of the JustB/Byw Bywyd programme.

3.1.8 Strategic Objectives

The strategic objectives that will be the focus of delivery of this priority over the next three years are as follows.

Strategic Objective 1A		2	3	4	5	6
By the end of 2019/20 we will have led, in partnership with the Welsh Local Government Association, strategic approaches to aligning action across sectors to improve population outcomes in agreed priority areas and reduce inequalities in healthy life expectancy now and for future generations.						
What success will look like by the end of 2019/20						
• Leaders across Cymru Well Wales understand their role in systems approaches and can demonstrate their role in achieving change. • Health and well-being goals are aligned across Cymru Well Wales partners. • There are shared priorities for action agreed across Cymru Well Wales partners.						

By the end of Year 1	2017/18
Milestones • Additional outcomes and areas for action have been identified by the strategic leadership group. • A review of progress to date has been undertaken and recommendations developed for future action. • Organisations have formally pledged to support the goals of Cymru Well Wales • Programmes of work have been agreed for Employability and Adverse Childhood Experiences. • We have delivered an agreed joint work plan with Community Housing Cymru.	
The action we will take to achieve this • Undertake an initial evaluation of Cymru Well Wales and make recommendations for further development (Quarter 4). • Implement recommendations from Wales Audit Office review of Public health Wales NHS Trusts collaborative arrangements for managing Local Public Health resources and review of savings and investments (Quarter 4). • Co-ordinate the ongoing development of the Cymru Well Wales initiative in conjunction with the Welsh Local Government Association (Quarter 4). • Facilitate the strategic leadership group in identifying a further priority area for action (Quarter 3). • Support the development of a programme of work to address Employability and Adverse Childhood Experiences (section 2B) (Quarter 2). • Secure formal support for the aims of Cymru Well Wales from founding partner organisations and recruit additional members (Quarter 4). • Lead and manage the implementation of the First 1000 Days Collaborative Programme (Section 2A) (Quarter 4).	

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• Work in partnership with Community Housing Cymru to take forward the Memorandum of Understanding and agreed joint workplan (Quarter 3).	
By the end of Year 2	2018/19
Milestones	
• Recommendations arising from the review of progress have been addressed. • There is evidence of increased consistency in strategic plans across organisations in agreed priority areas. • Programmes of work have been agreed for newly identified priority areas.	
The action we will take to achieve this	
• Implement recommendations arising from the review and initial evaluation of Cymru Well Wales. • Review progress in addressing the recommendations from Wales Audit Office review of Public health Wales NHS Trusts collaborative arrangements for managing Local Public Health resources. • Co-ordinate the ongoing development of the Cymru Well Wales initiative in conjunction with the Welsh Local Government Association. • Facilitate the strategic leadership group in identifying a further priority area for action. • Support the development of a programme of work to address new priority areas. • Lead and manage the implementation of the First 1000 Days Collaborative Programme (Section 2A). • Undertake a review of the joint programme of work with the housing sector, identifying notable practice, impact and opportunities for improved joint working.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Implement recommendations arising from the review and initial evaluation of Cymru Well Wales. • Review progress in addressing the recommendations from Wales Audit Office review of Public health Wales NHS Trusts collaborative arrangements for managing Local Public Health resources. • Co-ordinate the ongoing development of the Cymru Well Wales initiative in conjunction with the Welsh Local Government Association. • Facilitate the strategic leadership group in identifying a further priority area for action. • Support the development of a programme of work to address new priority areas. • Implement any recommendations from a review of the joint programme of work with the housing sector.	

Strategic Objective 1B	2	3	4	5	6
By the end of 2019/20 we will be delivering action to increase the proportion of schools, pre-school settings, workplaces, communities and NHS settings which take effective action to promote health.					
What success will look like by the end of 2019/20					
• There are demonstrable changes in policy and practice in schools, workplaces, communities and the NHS which create supportive environments for health. • There is a year-on-year increase in sign up and participation with the frameworks for action. • There are national partnerships and networks in each key setting, which are sharing expertise and mobilising action.					

By the end of Year 1	2017/18
Milestones	
• The number of schools, pre-school settings and workplaces achieving the highest level of attainment against the national benchmarks has increased. • An agreed programme of work to support action to improve health at community level has been implemented. • A revised Health and Work Programme has been implemented.	
The action we will take to achieve this	
• Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards (Quarter 4). • Implement a revised pre-school settings scheme (Quarter 4). • Support Further Education and Higher Education in Wales in taking action to promote health and wellbeing among students and staff (Quarter 4). • Implement the agreed national level action to support implementation of Making Every Contact Count in Wales (Quarter 4). • Support NHS Wales to make progress against the UNICEF Baby Friendly Scheme in key settings (Quarter 4). • Implement a revised Health and Work Programme building on the existing Healthy Working Wales Programme (Quarter 4). • Implement an agreed programme of support for communities and voluntary organisations through our Healthy and Well Communities Programme (Quarter 4). • Establish improved mechanisms for monitoring and evaluation of activity (Quarter 4). • Implement the recommendations of the review of the National Exercise Referral Scheme (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• The number of schools, pre-school settings and workplaces achieving the highest level of attainment against the national benchmarks has increased. • Monitoring and evaluation frameworks are in place for schools, pre-schools; workplaces and communities.	

The action we will take to achieve this

- Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards.
- Deliver the pre-school settings scheme and network to agreed targets and quality standards.
- Review the implementation of Making Every Contact Count in Wales in conjunction with Health Boards and make recommendations for further action.
- Review the implementation of the UNICEF Baby Friendly Scheme in Wales and make recommendations for future action.
- Deliver the Health and Work Programme to agreed targets and quality standards.
- Implement the next phase of the Healthy and Well Communities Programme.
- Review progress in implementing action in key settings.
- Deliver the National Exercise Referral Scheme.

By the end of Year 3

2019/20

The action we will take to achieve this

- Deliver the National Exercise Referral Scheme.
- Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards.
- Deliver the pre-school settings scheme and network to agreed targets and quality standards.
- Deliver the Health and Work Programme to agreed targets and quality standards.
- Co-ordinate national level action in support of Making Every Contact Count.

Strategic Objective 1C

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By the end of 2019/20 we will have led and enabled collective action on the leading health harming behaviours and key protective factors (tobacco; obesity and nutrition; physical inactivity; substance use and mental well-being).

What success will look like by the end of 2019/20

- The proportion of smokers who access help to quit is increasing year on year.
- We have increased the proportion of pregnant smokers who access help to quit smoking during pregnancy.
- We have increased the proportion of pregnant women who receive help to limit excess weight gain during pregnancy.
- We have reduced the rise in the proportion of children who are obese at age five and can demonstrate progress in implementation of the 10 Steps to a Healthy Weight.
- An agreed approach has been implemented in relation to promoting mental well-being including emotional literacy and resilience in young people.
- Population oral health is improving and inequality in dental health in children has stabilised and has started to reduce.
- We have recognised brands for motivating change and mobilising action to address health harming behaviours.
- There is increased recognition of the importance of physical activity for health and well-being and evidence of collective action to deliver improvements across organisations and sectors.

By the end of Year 1	2017/18
Milestones	
• A new programme of work to prevent alcohol related harm has been established. • A new integrated model of smoking cessation support is in place across Wales. • A programme of work to promote awareness and understanding of the risks of illicit or illegal tobacco in Wales has been developed. • A joint programme to increase active travel to school has been implemented. • An evidence based programme of work to promote emotional and mental well-being for children and young people has been developed. • All health boards have demonstrated measureable improvements in routine carbon monoxide monitoring and referral to smoking cessation support for pregnant women. • Implemented a new social marketing programme for childhood obesity prevention in Wales. • Demonstrated evidence based action on the 10 Steps to a Healthy Weight. • Implemented, with Sport Wales, the first phase of the joint programme to increase physical activity. • Developed programme to reduce impact of sugar on population health. • Refreshed Designed to Smile programme aligning it with Healthy Child Wales, Flying Start, Healthy Settings (Schools, pre-school) and Childhood Obesity Programmes. • Monitoring and evaluation frameworks are in place for each of the health harming behaviours and protective factors. • Agreed with partners a best practice approach to preventing the use of new psychoactive substances.	
The action we will take to achieve this	
• Implement, in conjunction with health boards, the agreed new model for smoking cessation in each area of Wales (Quarter 4). • Deliver the JustB/Byw Bywyd Programme in target schools (Quarter 4). • Establish an alcohol prevention partnership across sectors and agree priorities for action to reduce alcohol related harm (Quarter 3). • Develop a programme of work to promote mental well-being, emotional literacy and resilience among young people (Quarter 2). • Develop a programme of work on illicit and illegal tobacco in conjunction with local authorities, Welsh Government and other partners in line with the revised Tobacco Control Action Plan (Quarter 4). • Implement the next phase of the 10 Steps to a Healthy Weight Programme (Quarter 4). • Implement a new social marketing programme to address childhood obesity (Quarter 4). • Implement a social marketing programme to increase uptake of NHS help to quit smoking (Quarter 4). • Implement joint programme to promote active travel to school (Quarter 4) • Implement agreed action to promote physical activity in Wales in conjunction with Sport Wales and Welsh Government (Quarter 4). • Develop, in conjunction with Welsh Government, a programme to reduce the impact of sugar on population health (Quarter 2). • Provide specialist advice to support the development and implementation of nutritional standards in key settings (Quarter 4). • Develop a programme to reduce the uptake of new psychoactive substances	

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(Quarter 3).	
By the end of Year 2	2018/19
Milestones	
• There is an increase in the number of schools who are taking evidence based action to increase active travel to school. • Phase 1 of the programme to promote emotional and mental well-being for children and young people has been implemented. • Awareness of the importance of reducing obesity in children and the 10 Steps has increased. • Implemented, with Sport Wales, phase two of the joint programme to increase physical activity. • Implement phase one of agreed approach to preventing the use of new psychoactive substances. • Programme to prevent obesity in children of school age has been developed. • Implemented phase 1 of the sugar reduction programme.	
The action we will take to achieve this	
• Review progress in delivery of NHS Smoking Cessation Services in line with agreed goals and standards. • Deliver the JustB/Byw Bywyd Programme in target schools. • Develop and test innovative approaches to harm reduction for parents who are unable to quit, to reduce smoke exposure in the home. • Review progress in implementing maternal obesity in pregnancy best practice across Wales. • Implement phase 1 of the agreed alcohol prevention programme. • Implement a programme of work to promote mental well-being, emotional literacy and resilience among young people. • Implement a programme of work on illicit and illegal tobacco in conjunction with local authorities. • Develop a programme to prevent childhood obesity in school age children. • Review phase 1 implement a new social marketing programme to address childhood obesity and make recommendations for future action. • Review phase 1 of the social marketing programme to increase uptake of NHS help to quit smoking and make recommendations for future action • Implement joint programme to promote active travel to school. • Review, in conjunction with Welsh Government and Sport Wales, progress in delivering action to promote physical activity in Wales and agree next phase of work. • Implement a programme to reduce the impact of sugar on population health • Implement agreed action, if appropriate, to reduce the uptake of new psychoactive substances.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Review progress in delivery of NHS Smoking Cessation Services in line with agreed goals and standards. • Deliver the JustB/Byw Bywyd Programme in target schools. • Implement a programme of work to promote mental well-being, emotional literacy and resilience among young people. • Implement a programme to prevent childhood obesity in school age children. • Implement joint programme to promote active travel to school. • Implement delivery programme to promote physical activity in Wales and agree next phase of work. • Deliver a programme to reduce the impact of sugar on population health.	

Strategic Objective 1D		2	3	4	5
By the end of 2019/20 we will have influenced system wide action through a focus on common outcomes and intelligence.					
What success will look like by the end of 2019/20					
- Public Services Boards, national agencies and others understand their challenges and successes in improving population health and reducing inequalities through a set of common public health outcomes, linking with the well-being of future generations' national indicators. - Public Services Boards will produce updated well-being assessments based on robust evidence and analyses using public health intelligence. - Intelligence services work coherently across Public Health Wales, in an agile way, exploiting technological opportunities to influence action to support the Well-being of Future Generations, a prudent approach to healthcare, strategic priorities and statutory functions.					

By the end of Year 1	2017/18
Milestones	
- Mechanism agreed with Welsh Government and resources identified for reporting the Public Health Outcomes Framework. - Assessment of intelligence gaps relating to local well-being plans. - Action plan following Public Health Wales strategic review of health intelligence functions. - Key products and official statistics delivered as agreed with users and partners.	
The action we will take to achieve this	
- Report on changes to health and inequalities through the Public Health Outcomes Framework through interim tool (Quarter 4). - Work with partners to agree resourced mechanisms for the ongoing reporting against the Public Health Outcome Framework (Quarter 2). - Review role of intelligence products in informing local well-being assessments and plans and undertake a gap analysis with partners (Quarter 2). - Complete the strategic review of Public Health Wales health intelligence functions, develop an action plan and undertake early implementation (Quarter 4). - Further develop our intelligence system, flexibly supporting users in line with the needs of the Well-being of Future Generations (Wales) Act 2015, including essential requirements e.g. for safe, modern cancer registration and intelligence (Quarter 4). - Deliver a programme of intelligence and official statistics, supporting public health system priorities and statutory functions (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
- Ongoing reporting mechanism for Public Health Outcomes Framework established and process for review of framework agreed. - A jointly owned plan for meeting intelligence needs to inform local well-being assessments. - Structure in place for effective and co-ordinated strategic leadership of health	

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intelligence functions within Public Health Wales.	
• Key products and official statistics delivered as agreed with users and partners.	
The action we will take to achieve this	
• Working in partnership, establish mechanisms for review and updating of Public Health Outcomes Framework. • Develop agreed and resourced mechanisms for ongoing reporting of the Public Health Outcomes Framework data. • Work with partners to prioritise and consider how intelligence gaps relating to well-being assessment and plans can be addressed. • Further implementation of the action plan following the Public Health Wales strategic review of health intelligence functions. • Continue to develop our intelligence system, flexibly supporting users in line with the needs of the Well-being of Future Generations (Wales) Act 2015, exploring opportunities of data science and technological developments. • Deliver a programme of intelligence and official statistics, supporting public health system priorities and statutory functions.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Contribute to agreed process for production and development of Public Health Outcomes Framework for Wales. • Further implementation of the action plan following the Public Health Wales strategic review of health intelligence functions. • Continue to develop our intelligence system, flexibly supporting users in line with the needs of the Well-being of Future Generations (Wales) Act 2015, exploring opportunities of data science and technological developments. • Deliver a programme of intelligence and official statistics, supporting public health system priorities and statutory functions.	

Strategic Objective 1E	2	3	4	5
By the end of 2019/20 there will be a modernised approach to the delivery of health information for the public to support an informed and prudent public.				
What success will look like by the end of 2019/20				
• We are a trusted source of information for the public on how to promote their health and that of their family. • Health information for the public will be co-produced with our partners to ensure a prudent approach. • People will access health promotion information through a range of outlets and in a range of formats making best use of the assets within the system and exploiting new technologies to the full. • Parents have improved access to information to help them promote the health and well-being of their children.				

By the end of Year 1	2017/18
Milestones	
• There is a revised public facing web presence that facilitates access to health	

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promotion information including tailored information. • A network has been developed to provide easy access to health promotion information across Wales. • Proposals have been developed for quality assurance of health promotion information for the public. • A policy position has been adopted on digital first and print based information provision. • A revised approach to the provision of information for parents has been agreed.	
The action we will take to achieve this	
• Secure agreement with partner agencies and organisations on priority areas for health promotion information to avoid duplication and ensure consistency of messages (Quarter 3). • Agree with Welsh Government a future approach to the development, production and dissemination of printed health improvement literature (Quarter 3). • Work with local information services and local libraries to develop a system for health information provision in local communities (Quarter 4). • Develop a revised approach to the provision of health information for parents in the Early Years (Quarter 3). • Establish a behaviour change and public information team (Quarter 1). • Develop options for quality assurance of health information with partner agencies (Quarter 3).	
By the end of Year 2	2018/19
Milestones	
• There is an increase in the use of Public Health Wales health promotion information by professionals and the public. • Quality assurance processes have been implemented. • A revised approach to the provision of information for parents has been implemented.	
The action we will take to achieve this	
• Explore options for the provision of tailored information and make recommendations for further development. • Review and agree with partners priority areas for the development of health promotion information. • Develop a phased programme plan to review, update and develop health promotion information for the public. • Hold at least one network event for local information services to support their role in providing health promotion information. • Implement the agreed approach to the provision of health information for parents in the Early Years.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Implement a phased programme plan to review, update and develop health promotion information for the public. • Hold at least one network event for local information services to support their role in providing health promotion information. • Implement the agreed approach to the provision of health information for parents in the Early Years.	

3.2 Strategic Priority 2

Working across sectors to improve the future health and well-being of our children

3.2.1 Why a priority?

The origins of many of the inequalities in health lie in early childhood and before birth. The early years—from pre-birth to seven years of age – is a critical part of childhood development as youngsters when they grow, develop, play and learn. This phase is a key factor in determining future health and well-being. There are long lasting and positive effects from early years programmes.

Adverse childhood experiences are stressful events occurring in childhood such as being a victim of neglect and child abuse (physical, sexual and/or emotional) or growing up in a household in which there are adults experiencing alcohol and drug use problems, mental health conditions, domestic violence or criminal behaviour resulting in incarceration. Evidence from Wales and internationally has demonstrated a strong and cumulative association between exposure to these experiences and the adoption of health harming behaviours (which are often adopted as coping mechanisms) as well as poor mental health across the life course. International evidence has demonstrated a range of cost effective approaches to preventing and mitigating Adverse Childhood Experiences.

Inequalities are already evident in child health outcomes, such as childhood obesity and oral health at the age of five.

3.2.2 Drivers for change

Evidence of impact of social determinants on health - The impact of social determinants on health and health inequalities is well documented. A major World Health Organisation report (Review of social determinants and the health divide in the World Health Organisation European Region; Marmot 2014) makes the case for investing in the early years as a principal means of improving health throughout the life course, and reducing health inequity. The case is made that the investment represents the greatest return on investment for the wider public services system. The Making a Difference Report has reinforced the substantial economic evidence for early intervention in reducing inequalities and in improving outcomes. This work will continue to inform future work within this priority.

The Well-being of Future Generations (Wales) Act 2015 places obligations on Public Health Wales, along with many other public bodies to take joint action to protect and improve the health of future generations.

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The act sets out ways of working that enable bodies to meet their duties, including collaboration, a focus on prevention, and integration of services.

Social Services and Well-being Act supports the delivery of care that has a focus on prevention and promotes well-being. It promotes help within a community which is collaborative and reduces the need for formal care.

Resilient Communities - Welsh Government proposals to develop Resilient Communities include a focus on offering children the best start in life. This priority, when combined with a priority for working with and listening to the voices of communities, offers a powerful driver for this area of work.

Adverse Childhood Experiences - Preventing Adverse Childhood Experiences (particularly in the early years) and mitigating their effects in later childhood is a key priority for this government and for the Future Generations Commissioner. Children's zones are a proposed way to integrate action in this area.

Healthy Child Wales Programme - This provides an opportunity for early intervention with children and in families through the identification of risk factors for poor outcomes and for those children not reaching their developmental milestones.

Initial findings from the First 1000 Days Programme - The First 1000 days Programme mapped the system for supporting pregnancy and early childhood in two areas. The findings from this work have provided a clear indication of issues to address in order to improve an equitable and collaborative approach.

3.2.3 What we are trying to achieve

The First 1000 Days Collaborative Programme Board has agreed three outcomes for the Programme, namely:

- The best possible outcome for every pregnancy.
- Children in Wales achieve their developmental milestones at two years of age.
- Children are not exposed to or harmed by multiple adverse childhood experiences in the first 1000 days.

Adverse Childhood Experiences Prevention and Support - An Adverse Childhood Experiences Prevention and Support Hub will be set up to harness and support action. It will work with and through existing programmes and services at both a Wales wide and local level. The goal will be to embed action to address Adverse Childhood Experiences prevention and mitigation across existing core programmes and services

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e.g. Successful Futures; Together for Children and Young People; Flying Start and Families First; and through establishing strategic partnerships with key sectors e.g. Voluntary and Community Organisations. Specific actions will include:

- Identifying community champions.
- Developing and sharing evidence-based tools for changing professional practice.
- Identifying and mobilising opportunities to bring an Adverse Childhood Experiences lens into existing programmes and networks.
- Initiating test and learn projects.
- Strengthening international networks.
- Researching protective factors and resilience to Adverse Childhood Experiences.

Tracking change at a population level - Public Health Wales has worked closely with the Welsh Government and health boards in developing maternity indicators, the Early Years Surveillance Tool and the Early Years Outcomes Framework. As part of phase 2 of Public Health Outcomes Framework for Wales there is a plan to develop population Adverse Childhood Experience indicators to monitor progress and evaluate interventions.

3.2.4 Stakeholder Engagement

The First 1000 Days Programme has been established through extensive engagement through the Cymru Well Wales initiative. Local mapping events have also shaped the programme of work which has been developed in partnership with the Local Co-ordinators group and agreed at the Programme Board which has widespread representation.

3.2.5 Strategic Objectives

The strategic objectives that will be the focus of delivery of this priority over the next three years are as follows.

Strategic Objective 2A

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By the end of 2019/20 we will have mobilised system-wide action to improve outcomes in the early years, with a focus on the first 1000 days.

What success will look like by the end of 2019/20

- There is increased awareness of the importance of the first 1000 days of life for long term health and well-being and increased evidence of co-ordinated action at local level to improve outcomes.
- More children are having their developmental milestones assessed systematically and are receiving appropriate evidence-based interventions, including scheduled interventions.

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By the end of Year 1		2017/18
Milestones		
• There is widespread engagement in the First 1000 Days Collaborative Programme from across Wales. • Local collaboratives have agreed priorities for action in relation to the first 1000 days and have begun implementation. • A public engagement and awareness raising programme has been developed based on parental insight research. • A monitoring and evaluation framework is in place.		
The action we will take to achieve this		
• Hold a minimum of two learning events to share learning from the First 1000 Days Collaborative programme (Quarter 4). • Support the establishment of local First 1000 Days Collaboratives in additional local authority areas (Quarter 4). • Implement a communication and engagement programme for the first 1000 days (Quarter 4). • Disseminate First 1000 Days evidence briefings in at least three outcome areas (Quarter 4). • Establish and agree an evaluation programme for the First 1000 Days Programme (Quarter 3).		
By the end of Year 2		2018/19
Milestones		
• The majority of local authority areas are participating in the First 1000 Days Collaborative Programme. • There is evidence of improvement in action to improve emotional and social development outcomes at age 2. • There is increased public and professional awareness of the importance of the first 1000 days of life. • Routine assessment of risk of exposure to Adverse Childhood Experiences is being implemented in routine ante-natal care.		
The action we will take to achieve this		
• Review progress to date against key outcomes and recommendations for further action made. • Hold a minimum of two learning events to share learning. • Support the establishment of local collaboratives in additional local authority areas. • Implement phase 2 of the communication and engagement programme for the First 1000 Days programme. • Disseminate evidence briefings in a least three key areas. • Implement agreed evaluation programme for the First 1000 Days Programme.		
By the end of Year 3		2019/20
The action we will take to achieve this		
• Implementation of early years programme. • Provision of continued support to collaboratives at local authority areas. • Implementation of the First 1000 Days Programme.		

Strategic Objective 2B

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By the end of 2019/20 we will have led and mobilised action across Wales to prevent and mitigate the impact of Adverse Childhood Experiences.

What success will look like by the end of 2019/20

- We have a successful multi sector collaboration which is tackling the effects of Adverse Childhood Experiences through introducing new ways of working, enabled by a support package of what works, awareness and training
- We have worked with a range of national and local programmes and services to embed Adverse Childhood Experiences informed ways of working to deliver change at pace and scale.

By the end of Year 1

2017/18

Milestones

- An Adverse Childhood Experiences prevention and support hub has been established.
- An Adverse Childhood Experiences engagement communication strategy is in place and driving engagement with organisations, communities and the public.
- Policy options have been developed for key sectors.
- Interventions are being tested in key settings.
- Training materials have been developed for key sectors, and training has commenced.

The action we will take to achieve this

- Establish an Adverse Childhood Experiences prevention and support hub (Quarter 1).
- Develop and agree Adverse Childhood Experiences prevention and support programme plan (Quarter 1).
- Map activity already underway in Wales which will form a basis for action learning (Quarter 1)
- Produce guidance on Adverse Childhood Experiences prevention and reduction of impact in at least two key settings (Quarter 4).
- Hold Adverse Childhood Experiences prevention and support awareness and training sessions (Quarter 4).
- Identify Adverse Childhood Experiences prevention and support 'champions' in key settings (Quarter 4).
- Develop Adverse Childhood Experiences prevention and support communication strategy (Quarter 1).
- Begin our engagement and communication activity and hold a number of stakeholder events across sectors/Wales. (Quarter 4).

By the end of Year 2

2018/19

Milestones

- Action to prevent or mitigate Adverse Childhood Experiences is embedded within strategic plans and policy in key sectors.
- Routine assessment of risk of exposure or existing exposure to multiple Adverse Childhood Experiences is built into routine assessment, care planning and other relevant protocols.

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- Best practice in responding to Adverse Childhood Experiences is being shared.
- Further trial and test activity has taken place to strengthen our what works approach and sector toolkits.

The action we will take to achieve this

- Review the initial progress in developing Adverse Childhood Experiences prevention and support programme and make recommendations for further development.
- Develop and agree a programme plan.
- Produce guidance on Adverse Childhood Experiences prevention and reduction of impact in at least two key settings.
- Increase the number of actively engaged 'champions' in key settings.
- Continue communication and engagement activity in line with the Strategic Communications and Engagement Plan
- Work with sectors to embed ACE awareness into core training programmes.

By the end of Year 3

2019/20

The action we will take to achieve this

- Build on our sector and life course work to bring together system change to prevent and mitigate ACEs.
- Establish ACE awareness and learning into core training for professionals.
- Increase awareness of ACEs amongst communities and the public through our communication activity.

3.3 Strategic Priority 3

Developing and supporting primary and community care services to improve the public's health

3.3.1 Why is this a priority

Primary care is usually the first point of contact for patients with our care system. It should be fair, equitable, accessible, cost-effective, sustainable and, above all, be designed to proactively improve the health and well-being of the population it serves. It is a priority because it is a:

- **complex public health intervention** in itself that can improve the health of the population and reduce inequalities in health
- **setting for a large number of specific public health interventions**, such as delivering screening programmes, vaccination programmes, interventions to support individual behaviour change and management of chronic conditions

Primary care encompasses both health and social care. It also includes support provided by other statutory or independent agencies that enable citizens to live fulfilling lives as members of their communities. Primary *health* care includes general medical practices, community nurses, community pharmacies, dental services, optometrists, and other allied health professionals. Primary *personal* care is provided by local authority, third sector and commercial carers but also by huge numbers of families and friends. Well-being is enhanced by recreational and leisure activities and clubs provided in communities. These elements of primary care work best from a user point of view when they are connected and work together.

The public health contribution is to support those working in primary care to take a population approach to the planning and delivery of services. A population approach focuses on achieving health outcomes at scale, preventing illness and addressing inequalities.

3.3.2 Drivers for change

Our plan for a primary care service for Wales up to March 2018 -

The Welsh Government's primary care plan seeks to improve the effectiveness of primary care and ensure more care is delivered in the community, focused on patients' needs. The plan sets the following priorities:

- planning care locally
- improving access and quality

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- equitable access
- a skilled local workforce
- strong leadership

A Planned Primary Care Workforce for Wales - The Welsh Government primary care workforce plan supports the strategy and sets out the key challenges. Both plans provide the starting point for the actions proposed for this strategic priority.

Sustainability in Primary and Community Care - Primary health care is under pressure as a result of a number of factors including an ageing population and difficulties recruiting sufficient staff. Social care is also under pressure from reduced local authority budgets, and impacts on care provider organisations. Part of the system response is to have a greater focus on preventing illness and to support individuals and communities to stay well, minimising the need for health and care services as people age. This requires services to develop new ways of supporting people with a greater focus on prevention and reducing inequalities. Evaluation of the Pacesetter Programme across Wales has led to the development of an emerging model for whole-system change.

Primary Care Clusters have begun to make real the potential for working with populations at a level larger than a single practice to improve health and plan services. Clusters are important for achieving change in what services are delivered and making connections between services within a locality. Locality planning offers opportunities for better integration with community wellness services, community assets and with partners such as social care and the third sector. Public Health Wales, through the primary care hub, is supporting the development of clusters through delivery of a range of actions and also has a key contribution in providing clusters with intelligence to inform and shape local plans. Local public health teams work with individual clusters in developing their plans to focus on population outcomes, prevention, and reducing inequalities.

3.3.3 What are we trying to achieve?

We are aiming to support the development of new models of primary care that best meet the needs of communities and address concerns about sustainability of services. Working with Welsh Government and local health board partners we are planning actions that will enable primary care to have a focus on population outcomes and to develop more activity to:

- Promote health
- Intervene early when people become ill
- Reduce health inequalities
- Support cluster development
- Learn from innovation and evidence

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Other strategic priorities within the Integrated Medium Term Plan also contribute to the delivery of strategic priority 3:

- Strategic Priority 1: Primary care is incorporated into our development of multi-agency systems working for improving health.
- Strategic priority 4: Quality improvement activity is integrated into our strategic objective to support the NHS to improve outcomes for people using services and to improve patient safety in primary care. The primary care hub works closely with the 1000 Lives Improvement Service.

3.3.4 Stakeholder engagement

Strategic Priorities reflect projects and programmes agreed through the Primary and Community Care Development and Innovation Hub Programme Board.

The Primary & Community Care Development & Innovation Hub (Primary Care Hub) coordinates support for health boards and clusters, at a national level, in the delivery of the national plan for primary and community care in Wales; facilitates coordinated delivery on a range of primary care projects; and provides support to other projects within the overall work programme for Directors of Primary, Community and Mental Health Services. Colleagues within other Public Health Wales national teams work in partnership with Primary Care Hub staff to deliver these projects. Local public health teams (LPHTs) also work closely with the Primary Care Hub, playing a key role in supporting primary care clusters directly within health board areas, and in contributing local knowledge and skills to the national work programme.

The work programme for the Primary Care Hub is agreed and overseen by the Programme Board and focuses on four themes:

- cluster development
- access to information and health intelligence
- quality improvement and safety
- innovations in healthcare

The Board includes representatives of the following stakeholders:

- Welsh Government
- Directors of Primary Care and Mental Health
- Directors of Public Health
- Directors of Workforce and Organisational Development
- Public Health Wales
- National Professional Lead

This is supported by the Public Health Wales Primary Care Reference Group, regional and national cluster events and connections to a range of primary care leadership groups.

Part 3 – Our Strategic Priorities

The programme of work for the Primary Care Hub sits within the overall portfolio of national commitments for primary care in NHS Wales.

3.3.5 Strategic Objective

The strategic objectives that will be the focus of delivery of this priority over the next three years are as follows.

over the next three years are as follows:

Strategic Objective 3A		2	3	4
By the end of 2019/20 we will have worked with health boards and other partners to support a sustainable primary and community care system fit for future generations.				
What success will look like by the end of 2019/20				
• We are delivering our shared and agreed contribution to the transformation of the primary and community care system in Wales including our commitments under the Welsh Government's primary care plan, Our Plan for a Primary Care Service in Wales. • We are delivering effective support to clusters, including programmes of leadership and skills development, evidence-based population health improvement activities, facilitating access to professional information and health intelligence. • A quality improvement and patient safety programme in primary and community care is being delivered. • Learning from innovation and evidence from practice is captured, reviewed and shared with health boards and clusters. • Advice to Welsh Government and health boards on primary and community care is being delivered. • An integrated and evidence-based prevention and care pathway approach in General Dental Services through the General Dental Services Reform Programme.				

By the end of Year 1		2017/18
Milestones		
• Clusters can access and use the information and tools they need. • Clusters are developing the skills they need to support the sustainability and transformation of primary and community services. • Clusters have opportunities to learn from each other and from wider innovation and evidence, including learning from the Pacesetter Programme and the emerging model for primary and community care in Wales. • Clusters and practices are involved in primary care quality improvement and patient safety initiatives. • The future vision and action plan for primary care in Wales beyond 2018 includes clear population health perspectives. • A coordinated approach to assessing and responding to primary care intelligence and needs is established across NHS Wales via the primary care Hub.		
The action we will take to achieve this		
• Provide advice to Welsh Government and health boards through the Hub Programme Board, as required, on the future direction and function of primary care in the light of experience and evidence (Quarter 4).		

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- Co-ordinate the ongoing development of the Primary and Community Care Development and Innovation Hub in conjunction with Programme Board partners (Quarter 4).
- Engage with partners to look at different or innovative ways of delivering care by primary and community care teams, learning from experience and evidence (Quarter 4).
- Engage health boards and clusters in the emerging model for primary and community care developed from shared learning from the Pacesetter Programme (Quarter 2).
- Share evidence on effective social prescribing and its applicability in Wales (Quarter 2).
- Continue the development programme for clusters, responding to identified need (Quarter 4).
- Work with multiple providers through the Primary Care Hub to develop a coordinated plan for primary care intelligence support (Quarter 4).
- Implement a systematic process for gathering and sharing activity in respect of social prescribing (Quarter 1).
- Further develop and promote the use of Primary Care One as central source of information and information sharing amongst clusters (Quarter 4).
- Deliver quality improvement activities as agreed by the 1000 Lives Quality and Patient Safety Steering Group (Quarter 4).
- Assess impact of the Primary and Community Care Development and Innovation Hub and on the basis of this develop proposals for further cluster development and support programmes in response to the vision and action plan for primary care in Wales beyond 2018 (Quarter 3).
- Link with health boards, Deanery (Health Education Wales) and other education organisations to develop the workforce so that it is more flexible and able to undertake a greater range of healthcare interventions (Quarter 4).
- Working with the Workforce Education & Development Service, advise on the delivery of national actions in respect of the primary care nursing workforce (Quarter 4).
- Support primary care focused pharmacy networks to support local implementation of public health programmes (Quarter 3).
- Contribute to the delivery of the Together for Health: Eye Health Care Delivery Plan for Wales 2013-2018 including working with partners to deliver an awareness campaign linked to National Eye Health Week; identify opportunities to develop eye health through existing programmes; develop website access, via Primary Care One, to promote prevention work with community opticians (Quarter 4).
- Deliver a programme of re-orientating Designed to Smile to 0-5 year age group with an increased emphasis on the first 1000 days (Quarter 4).
- Working with the Welsh Government, Health Boards and the dental profession, develop a General Dental Service (GDS) reform programme to improve on clinical and risk assessment, delivery of prevention and the application of prudent healthcare principles in dentistry (Quarter 4).
- Develop a plan to improve oral health intelligence in line with the strategic review of public health intelligence review and the Public Health Wales Dental Public Health review recommendations (Quarter 4).
- Provide Dental Public Health expertise to the Welsh Government and Health Boards in line with the Public Health Wales Dental Public Health review recommendations (Quarter 4).

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By the end of Year 2	2018/19
Milestones	
- Content of further cluster development and support programmes refined in response to any refresh of the national primary care plan for Wales. - Cluster plans will be informed by evidence of effective interventions to improve population health. - Practices in two or more health boards participating in the General Dental Services Reform programme.	
The action we will take to achieve this	
- Provide advice to Welsh Government and health boards, as required, on the future direction and function of primary and integrated care, in the light of experience and emerging international evidence. - Work to implement the refreshed vision for primary care services in Wales beyond 2018 through an action plan agreed with partners and within the resources available to Public Health Wales to support future plans for primary care. - Work with health boards to identify further needs for the cluster and primary care development programme in the light of evaluation and experience. - Support primary care focused pharmacy networks to support local implementation of public health programmes. - Deliver suite of intelligence support to primary care as part of coordinated products across agencies.	
By the end of Year 3	2019/20
The action we will take to achieve this	
- Review progress on our role and contribution in developing and supporting the transformation and sustainability of primary and community care. - With stakeholders, identify new goals, priorities and actions for primary and community care and develop a programme of work for delivery through the Primary Care Hub.	

Strategic Objective 3B	2	3	4
By the end of 2019/20, the well-being agendas are aligned between public health teams, primary care clusters and public service boards.			
What success will look like by the end of 2019/20			
- Well-being priorities and activities support the goals and ways of working of the Well-being of Future Generations (Wales) Act 2015. - Local plans include clear and aligned evidence-based commitments to population health improvement and the reduction of health inequalities.			

By the end of Year 1	2017/18
Milestones	
- Cluster action plans are informed by evidence of local population health needs and evidence of effective interventions. - Cluster action plans are informed by evidence based prevention and health improvement activities.	

The action we will take to achieve this	
• Support the introduction and development of the pharmaceutical needs assessment framework in Wales. (Quarter 4) • Primary care contractor professions are engaged in developing collaborative plans and opportunities for population health improvement (Quarter 4). • Provision to clusters of evidence informed health improvement interventions will facilitate alignment of well-being activities across partner organisations including Public Service Boards (Quarter 4). • Make links between oral health improvement and other health improvement work in clusters (Quarter 4). • Implement recommendations of Dental Health Resources review (Quarter 3).	
By the end of Year 2	2018/19
Milestones	
• Prevention and health improvement activities included in cluster plans are evidence-based and span organisations and professional specialties.	
The action we will take to achieve this	
• Support the introduction and development of the pharmaceutical needs assessment framework in Wales. • Review further requirements for shared products to support population health improvement in light of new vision for primary care services beyond 2018 and in the light of further evaluation and experience. • Continue to provide development opportunities for clusters to consider new ways of working collaboratively, including co-production to improve population health.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Agree with system partners a work programme within the resources available to Public Health Wales to support future plans for primary care in Wales.	

3.4 Strategic Priority 4

Supporting the NHS to improve outcomes for people using services

To create a happier, healthier, fairer Wales, Public Health Wales must focus on improving healthcare outcomes for people using services. This requires the delivery of high quality safe services across all conditions. By working to improve outcomes, Public Health Wales will actively promote the principles of prudent healthcare and commit to nurturing a self-sustaining culture of improvement and innovation which purposefully works to find and apply new and better ways of delivering care. The sustainable development principle of the Well-being of Future Generations (Wales) Act and prudent healthcare provide a supportive policy framework for our work, strengthening our ways of working with the NHS and other public bodies, involving communities, looking to the long term and focusing on prevention.

Public Health Wales' support for these policy drivers is focused on a whole systems approach to improving quality, reducing patient harm and increasing local improvement and innovation capacity and capability, underpinned by the principles of both prudent healthcare and the Institute for Healthcare Improvement's Triple Aim.

There is a recognised need to scale up the support and enabling infrastructure to aid the adoption and spread of prudent healthcare, improvement and innovation across NHS Wales and its partner organisations. Public Health Wales will offer unique national improvement support which combines quality improvement methodology and a focus on each of the four principles through the delivery of its work programmes. This will extend the reach of existing and new programmes and enable health boards and trusts to embed the philosophy of prudent healthcare to achieve sustained and measurable improvements.

3.4.1 Drivers for Change

Spreading research, improvement and innovation into prevention

Public Health Wales is uniquely placed to not only lead work to improve outcomes but also to provide research, evidence and expert opinion.

Recent publications such as 'Making A Difference: Investing in Sustainable Health and Well-being for the People of Wales' offer research in support of preventing ill health and reducing inequalities to achieve a sustainable economy, thriving society and optimum health and well-being for the present and future generations in Wales. The 'Adverse Childhood Experiences' study shows a strong link between Adverse Childhood

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Experiences and poor physical and mental health, chronic disease, lower educational achievement and lower economic success in adulthood.

Under the leadership of the Director of NHS Quality Improvement and Patient Safety, Public Health Wales is committed to working with Welsh Government and working with NHS Wales and partners to address the findings of these reports, spreading improvement science and innovation to enable organisations to effectively prevent and mitigate the harms identified and improve outcomes for service users

Healthcare Associated Infections, medications and primary care

Healthcare Associated Infections are a continuing priority for NHS Wales and a clear focus for Public Health Wales. Public Health Wales is committed to supporting the delivery of Welsh Government's commitment to halve Gram negative bacteraemia and inappropriate antimicrobial prescribing by 2020 and tackling Antimicrobial Resistance to ensure coordination and integration in the wide range of activities taken forward by organisations. Progress is being made against the Welsh Government infection reduction expectations for *Clostridium difficile* (*C. difficile*) and *Staphylococcus aureus* bacteraemia. Public Health Wales continues to provide monthly feedback on these infections and is in the process of developing surveillance feedback in support of the new commitments to reduce Gram negative bacteraemia and Antimicrobial Resistance.

In addition to this data feedback, Public Health Wales already provides a range of local and national support from a number of divisions. This includes;

- local support from microbiology and health protection teams
- epidemiological and surveillance support for healthcare associated infections and antimicrobial resistance
- advice and support for Infection Control Policies and guidance
- antimicrobial stewardship and support from 1000 Lives Improvement
- support for individual outbreak management
- local bespoke epidemiological analysis, policy and practice reviews

Although not responsible for direct delivery of patient care, Public Health Wales has recently escalated its approach to supporting NHS Wales' organisations to eliminate preventable healthcare associated infections and address antimicrobial resistance through a targeted improvement programme, and by working with organisations that face particular challenges.

Action will be also taken to strengthen a co-ordinated Public Health Wales approach to this support, with appropriate links between healthcare associated infections and antimicrobial resistance priorities being made.

Discussions with the Chief Pharmacist for Wales and Welsh Government are helping to shape prioritised plans for primary care medicines

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management in NHS Wales in year two and year three. This work, along with other areas of improvement and innovation support in primary care, are detailed in the primary care section of the Integrated Medium Term Plan. 1000 Lives Improvement will also work with the Primary Care Hub to identify, spread and adopt good practice across organisations in Wales.

Immunisation programmes are at the core of vaccine-preventable disease management, including virus related cancers and complications such as chronic pain following shingles. Wales and the UK have a world-leading routine schedule and, in 2015, became the first nation to have a vaccination programme to prevent all forms of invasive meningococcal disease. We have key roles in policy development, supporting service delivery, training immunisers and informing the public.

Mental Health

Improvement and innovation support is continuing to be provided for the delivery of the Welsh Government 'Together for Mental Health' Strategy and 2016-19 Delivery Plan. Prioritised three year programmes include improving the quality of older people's NHS psychiatric inpatient care, supporting DGH and community hospitals to implement the NHS Learning Disability Care bundle, and improving early intervention psychosis services. These are complemented by ongoing work to improve perinatal mental health, the rate of dementia diagnosis, safer staffing levels, and access to psychological therapies. The programmes will continue to be underpinned by work on the Mental Health Core Data set, the Mental Health Leaders Collaborative, the Criminal Justice/Mentally Disordered Offender Planning Groups and the Mental Health Measure.

1000 Lives Improvement

Public Health Wales supports NHS Wales on its continuing journey of patient safety, quality improvement and innovation through the work of 1000 Lives Improvement. The work is responsive to the OECD Reviews of Health Care Quality – United Kingdom (2016), investigations into patient safety in Wales which continue to highlight the need to further develop the culture of patient safety, improvement, learning and innovation and will support the launch of the updated 'Quality delivery Plan' (2017). The work programmes offer a coordinated approach to national challenges and clinical priorities whilst recognising that some organisations may require intensive support.

Support for quality improvement and innovation at the front line is critical and the relationships and processes which enable this are hugely valuable, and will continue to be nurtured through partnership arrangements with health boards and trusts.

A national safeguarding team for NHS Wales

The approach and actions outlined in this priority also demonstrate how Public Health Wales' Safeguarding Service is responding to the changes which have occurred in NHS Wales and the ongoing impact resulting from the Social Services and Well-being (Wales) Act 2014 and legislative drivers such as the, Violence against Women, Domestic Abuse and the Sexual Violence Act. This has resulted in a service that takes an approach to safeguarding people across the age spectrum and provides leadership and strategic focus to NHS Wales. The focus for Public Health Wales is to deliver strategic leadership across NHS Wales on safeguarding people and collaborate with regional partnerships in line with key legislative drivers.

3.4.2 What are we trying to achieve?

This strategic priority reflects the joint action for health boards and Public Health Wales in ensuring that appropriate national support is provided to primary, community and acute care to achieve improved health outcomes. The objectives and actions are co-produced with NHS Wales organisations, Welsh Government policy leads and key stakeholders to ensure they prioritise areas that can truly enable organisations to improve outcomes for service users. They are also informed by parallel discussions with nursing and medical directors as part of the development of Public Health Wales' Memorandum of Understanding with each organisation.

The sustainable development principle of the Well-being of Future Generations (Wales) Act will support us to involve service users and collaborate with service providers to focus on what is important to them. Through such an approach, we will be supporting NHS Wales to reduce harm and improve the quality and experience of care in Wales, contributing to a healthier Wales.

By working with service users and providers to focus on what they actually value and contribute to a healthier Wales, these objectives aim to enable NHS Wales to reduce harm and improve the quality and experience of care in Wales. Maintaining the clear focus on improving health outcomes, underpinned by the principles of prudent healthcare and a culture of improvement and innovation, will support the Welsh NHS and partners to deliver tangible benefits for the people of Wales.

3.4.3 Strategic Objectives

The strategic objectives that will be the focus of delivery of this priority over the next three years are as follows.

Strategic Objective 4A	3	4
By the end of 2019/20 we will have enabled the NHS to work across the whole system to support quality improvements underpinned by the principles of prudent healthcare.		
What success will look like by the end of 2019/20		
• Support has enabled health boards, trusts and partners to achieve the outcomes identified in the refreshed Quality Delivery Plan. • All 1000 Lives Improvement programmes have enabled health boards and trusts to embed the philosophy of prudent healthcare. • The National Task Force for Falls Prevention has enabled a reduction in non-injury falls admitted to emergency departments and an increase in the health and well-being of over 55's. • More than ten surgical elective services demonstrate sustainability through capacity and demand data and improved patient experience through Patient Reported Experience Measures. • The Outpatient Improvement Programme has supported organisations to reduce waiting times for appointments and improve patient experience. • Improvement and innovation support has enabled organisations to implement the 'Together for Mental Health' Strategy and Delivery Plan. Improvement support has enabled health boards and trusts to reduce the burden on high pressure services such as A&E. • Choosing Wisely Wales has enabled organisations to avoid tests and treatments that are unlikely to benefit them or might even be harmful and clinical staff and patients report more informed, shared decision making.		

By the end of Year 1	2017/18
Milestones	
• Health boards and trusts have been supported to achieve the year one actions in the refreshed Quality Delivery Plan. • A two-strand approach has been delivered to support health boards to embed prudent healthcare and achieve measurable improvements (<i>TBC</i>). • Support has been provided to promote the safety and well-being of older people with the 'Steady on, Stay Safe Campaign' reducing falls and subsequently A&E attendances. • Capacity/demand and improvement/ innovation support has been provided to the four existing and four new Planned Care Programme clinical specialities. • NHS Wales has been supported to spread innovation and learning through the Outpatient Improvement Programme. • Three targeted programmes to improve the quality of mental health services have made measurable improvements. • Organisations have received support to understand and manage the burden on high pressure services (<i>TBC</i>). • Choosing Wisely Wales has been delivered in partnership with the Royal Colleges and Community Health Councils.	

The action we will take to achieve this	
• Provide strategic support for the implementation of the refreshed Quality Delivery Plan through 1000 Lives Improvement's operational plan (Quarter 4). • Deliver national improvement programmes that clearly combine quality improvement methodology and a focus on each of the four prudent healthcare principles and a specific prudent programme that rolls out the Frequent Flier NHS Awards winner project (Quarter 4). • Lead the development and support of the National Task Force for Falls Prevention and continue to develop the Steady on, Stay Safe Campaign. (Quarter 3) • Provide capacity and demand and improvement support in the four new Planned Care Programme clinical specialities (Quarter 4). • Deliver year one of the Outpatient Improvement Programme to support health boards to reduce waiting lists and improve experience (Quarter 4). • Deliver improvement and innovation support to health boards, trusts and partners as outlined in 'Together for Mental Health' Strategy and Delivery Plan, including three year programmes of work to improve the quality of older people's NHS psychiatric inpatient care; support District General Hospitals and Community Hospitals to implement the NHS Learning Disability care bundle; and, improve early intervention psychosis services (Quarter 4). • Provide improvement support through the unscheduled care programme to health boards and trusts by focusing resources on admission avoidance, effective community care and the flow of patients through the system. (Quarter 4) • Support the delivery of Choosing Wisely Wales through evaluation, refined shared decision making training, the publication of interventions of low value from non-medical professional associations and continued engagement activity (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• Health boards and trusts have been supported to achieve the year one actions in the refreshed Quality Delivery Plan. • National improvement programmes are demonstrating measurable improvements through their support to health boards and trusts to embed prudent healthcare across the whole system. • There is evidence of the impact of year one actions by the national public and third sector task force on winter pressures and to improve transitions and flow across the whole system. • There is evidence of the impact of year one actions in the eight planned care programme clinical specialities and four new specialities are supported. • There is evidence of the impact and learning from the Outpatient Improvement Programme and support continues to be provided. • The improvement and innovation support provided to health boards, trusts and partners as outlined in the 'Together for Mental Health' Strategy and Delivery Plan is supporting measurable improvements. • Organisations are demonstrating improved management of high pressure services (TBC). • There is evidence of the impact of year one actions from Choosing Wisely Wales and the work continues.	
The action we will take to achieve this	
• Work with health boards and trusts to support the implementation of the	

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refreshed Quality Delivery Plan through 1000 Lives Improvement's operational plan. • Work with health boards, trusts and partners to scale up and spread the national improvement approach to prudent healthcare and progress the Frequent Flier programme into improving anticipatory care planning to address the root cause of the issue (<i>TBC</i>). • Continue to support the multi-sector National Task Force for Falls Prevention to support the health, safety and well-being of Older People. • Provide capacity/demand and improvement support in the four new Planned Care Programme clinical specialities. • Deliver year two of the Outpatient Improvement Programme. • Deliver improvement and innovation support to health boards, trusts and partners as outlined in 'Together for Mental Health' Strategy and 2016-19 Delivery Plan, including year two of three improvement programmes. • Continue to provide improvement support through the unscheduled care programme to health boards and trusts. • Continue to support the delivery of Choosing Wisely Wales with an initial evaluation of Choosing Wisely Wales produced, further shared decision making training offered and additional low value interventions published.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Continue to work with health boards and trusts to support the implementation of the refreshed Quality Delivery Plan. • Continue to work with health boards, trusts and partners to scale up and spread the national improvement approach to prudent healthcare. • Develop the strategic focus and actions of the multi-sector National Task Force for Falls Prevention to support the health, safety and well-being of Older People. • Provide capacity/demand and improvement support as directed by the Planned Care Programme. • Deliver year three of the Outpatient Improvement Programme. • Deliver improvement and innovation support to health boards, trusts and partners as outlined in the 'Together for Mental Health' Strategy and Delivery Plan, including year three of three improvement programmes. • Continue to provide improvement support through the unscheduled care programme to health boards and trusts. • Continue to support and refine the delivery of Choosing Wisely Wales through evaluation, shared decision making training and additional lists.	

Strategic Objective 4B

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By the end of 2019/20 we will have worked with NHS Wales to use patient safety as a driver for higher quality health care.

What success will look like by the end of 2019/20

- There is an improvement in the outcomes for women who experience a postpartum haemorrhage through increased compliance with the 4-stage approach and blood loss measurement, and a reduction in the incidence of stillbirths in Wales in line with the new Welsh Government target for 2020.
- There is an increase the proportion of patients diagnosed with cancer at an earlier stage of disease and within 28 days of referral with the aim of increasing survival.
- There are 300 fewer deaths attributable to sepsis compared to 2013, calculated from ICD10 codes A40/41.
- There is a 5% reduction in the use of nystatin due to improved mouth care for service users.
- A national programme of work has enabled NHS Wales to calculate the right number of nurses required to provide safe and effective care for patients.

By the end of Year 1

2017/18

Milestones

- Three targeted programmes of work have supported health boards to improve maternity outcomes and reduce unnecessary harm.
- Support for cancer detection and treatment pathways and work with the Cancer Network has enabled improvements and innovations in cancer care.
- Work targeting acute deterioration has enabled organisations in NHS Wales to reduce their rates of harm (including Sepsis and Acute Kidney Injury).
- A focus on care planning and harm reduction has enabled organisations in NHS Wales to improve mouth care across primary, community and secondary care.
- NHS Wales has been supported to devise robust acuity and dependency tools for identified speciality areas has been developed and delivered.

The action we will take to achieve this

- Support NHS Wales to improve maternity outcomes and reduce unnecessary harm through three programmes - a Multi-Disciplinary Team skills drills training approach (PROMPT); a national Safer Pregnancy and a programme focused on the early detection and management of post partum haemorrhage (Quarter 4).
- Support the Cancer Network's early detection programme (diagnostic), the implementation of Innovation Bids and improvements in priority pathways (e.g. head and neck; lung; upper gastro-intestinal) (Quarter 4).
- Support organisations with early detection and prevention of acute deterioration through three programmes, including reducing sepsis in paediatrics, reducing Acute Kidney Injury in pre-hospital care and reducing acute deterioration in primary care; underpinned by All Wales Rapid Response for Acute Illness Learning Set peer reviews and the generation of Acute Deterioration metrics. (Quarter 4)
- Prevent harm in primary and secondary dental services through programmes of work focused on preventing wrong tooth extraction and development of a

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Quality Indicator tool (Quarter 4). Develop and deliver a national programme of work to devise robust acuity and dependency tools for identified speciality areas, including data support and establishment reporting support (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
- Three targeted programmes to improve maternity outcomes and reduce unnecessary harm demonstrate improvements in outcomes. - Support for cancer pathway and patient experience improvements has been delivered with the Cancer Network. - Targeted programmes of work to prevent harm from acute deterioration demonstrate improved outcomes. - Targeted programmes of work to prevent harm from mouth care demonstrate improved outcomes. - Welsh Government and the All Wales Nurse Staffing Group have identified further areas of work for improvement support.	
The action we will take to achieve this	
- Continue to deliver the three targeted programmes to improve maternity outcomes and reduce unnecessary harm. - Continue to support the Cancer Network with diagnostic and pathway improvements and the Improvement Bids. - Scale up the programmes of work to prevent acute deterioration (Sepsis and Acute Kidney Injury). - Scale up the programmes of work focused on improving mouth care in primary, secondary and community care. - Provide improvement and evaluation support to areas identified by Welsh Government and the All Wales Nurse Staffing Group.	
By the end of Year 3	2019/20
The action we will take to achieve this	
- Evaluate the three targeted programmes to improve maternity outcomes and reduce unnecessary harm and work with health boards and trusts to enable ongoing local implementation. - Continue to support the Cancer Network with diagnostic and pathway improvements and the Improvement Bids. - Evaluate the programmes of work to prevent acute deterioration (Sepsis and Acute Kidney Injury) and work with health boards and trusts to enable ongoing local implementation. - Evaluate the programmes of work focused on improving mouth care and work with health boards and trusts to enable ongoing local implementation. - Continue to support NHS Wales in responding to safe staffing legislation through the national programme of work on acuity and dependency tools.	

Strategic Objective 4C

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4

By the end of 2019/20 we will have reduced healthcare associated infection rates in NHS Wales and provide strategic leadership and deliver responsive and flexible support with the aim of increasing immunisation uptake rates in Wales.

What success will look like by the end of 2019/20

- There are measureable improvements in healthcare associated infection and Antimicrobial Resistance including C. difficile infection, Gram negative blood stream infection and associated urinary tract infections, Staph. aureus blood stream infection and Antimicrobial Resistance in Surgical Practice.
- Support to contribute to the achievement of a 50% reduction in inappropriate antimicrobial prescribing by 2020.
- The introduction of new immunisation programmes will be supported with guidance, training, surveillance and public information, and existing standards will be updated.

By the end of Year 1

2017/18

Milestones

- Escalated support to health boards and trusts to reduce Healthcare Associated Infections so that they are responsible for improvements in high impact areas.
- Bespoke support continues provided to healthcare organisations unlikely or unable to achieve expected rate reductions.
- Core modules of ICNet are rolled out and a protocol developed for the surveillance of outbreaks in community and secondary care settings via ICNet.
- Targeted clinical, epidemiological and analytical support from the Vaccine Preventable Disease Programme provided to health boards facing challenges
- Improved compliance in health boards with existing policies and standards for immunisation service delivery including targeted action to reduce inequalities in uptake.

The action we will take to achieve this

- Co-ordinate Public Health Wales actions to support Health Boards and trusts (Quarter 1).
- Prepare a population specific report for each health board (addressing epidemiology, case reviews, current outbreak and Infection Prevention Control support) and agree local priorities and co-ordinate support (Quarter 1).
- Engage with Health Boards and jointly launch a new strategic plan (including programme of public health support) to enable health boards and trusts to make improvements in healthcare associated infection in high impact areas - C. difficile disease, Antimicrobial Resistance and Gram negative Healthcare Associated blood stream infection, Staph. aureus blood stream infection and Healthcare Associated Infection, and surgical site infection in Surgical Practice (Quarter 1 onwards).
- Engage with Health Boards and establish a national collaborative Healthcare Associated Infection to co-ordinate action to reduce rates across Wales

(Quarter 2). • Target public health support to reduce multi-(drug) resistant Staph. aureus (MRSA) and C. difficile rate in organisations that are challenged (Quarter 1 onwards). • Host the co-ordination support for the National Antimicrobial Resistance programme (Quarter 2). • Deliver the Public Health Wales support to national Antimicrobial Resistance programme and action plan (Quarter 4). • Implement ICNet as well as updates and improvements to data capture and reporting tools for current Healthcare Associated Infection surveillance, including in response to any new Welsh Government Healthcare Associated Infection targets (Quarter 1 onwards). • Collaborate with NHS organisations, academic institutions and others to develop and implement quality improvement measures and undertake relevant research (Quarter 1 onwards). • Develop expanded Healthcare Associated Infection reduction programmes in, and implement a range of quality improvement interventions for, surgical site infection beyond orthopaedics and caesarean-section (Quarter 4). • Provide evidence-based immunisation guidance, training, education and public information to support health boards, Trusts and general practices, including direct support for services to improve delivery (Quarter 1 onwards). • Provide information and target support to reduce inequalities in uptake of vaccine programmes in Health Boards that have challenges (Quarter 1 onwards). • Evaluate the new vaccine uptake reports to support cluster working and quarterly surveillance reports of vaccine preventable disease incidence (Quarter 1 onwards). • Continue to work with Immunisation Coordinators and universities across Wales to embed the use of the online immunisation e-learning modules into routine student and staff training in Wales (Quarter 1 onwards). • Continue to work with Public Health England to evaluate the national training resources for Healthcare Support Workers (Quarter 1 onwards).	
By the end of Year 2	2018/19
Milestones	
• Year two of a three-year programme of support for improvements in high impact Healthcare Associated Infection areas has continued to demonstrate improvements. • All Wales systems to support surveillance are embedded and routinely used to support service delivery and national strategies for reduced Healthcare Associated Infections. • Programme of support has continued to demonstrate improvement/maintenance of vaccine uptake levels across programmes.	
The action we will take to achieve this	
• Scale up the programme of support to enable health boards and trusts to make improvements in Healthcare Associated Infection high impact areas and target support to reduce multi-(drug) resistant Staph. aureus (MRSA) and C. difficile rates in organisations that are challenged. • Evaluate new surveillance schemes and updates to data capture and reporting tools for current Healthcare Associated Infection surveillance, including in response to any new Welsh Government Healthcare Associated Infection targets.	

Part 3 – Our Strategic Priorities

- Evaluate the effectiveness of ICNet and support healthcare organisations to develop appropriate business case for its continued availability.
- Work closely with colleagues across the UK to develop a strategy and implementation plan for measles and rubella elimination by contributing to the Measles and Rubella Elimination Group.
- Work with Public Health England to evaluate the addition of new vaccines into the routine schedule, such as Hepatitis B and Varicella vaccines.

By the end of Year 3

2019/20

The action we will take to achieve this

- Evaluate a programme of support to enable health boards and trusts to make improvements in Healthcare Associated Infection high impact areas and support organisations to continue with local implementation - C. difficile disease, Antimicrobial Resistance and Gram negative Healthcare Associated blood stream infection, Staph. aureus blood stream infection and Healthcare Associated Infection and surgical site infection in Surgical Practice.
- Undertake a strategic review of progress against required reductions in Healthcare Associated Infections, producing recommendations for further actions as appropriate.
- Implement a measles elimination strategy.

Strategic Objective 4D

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4

By the end of 2019/20 we will have led improvements in prescribing and medicines management in NHS Wales, delivering equitable, safe and preventative care for patients.

What success will look like by the end of 2019/20

- There is a systematic approach to reporting and learning from error embedded within primary care clusters, a reduction in the number of drug-related hospital admissions and in the amount of preventable harm.
- Improvements in the safety and quality of primary care have delivered equitable, safe and preventative care for patients, through the development of primary care clusters and a co-productive approach.
- Support to contribute to the achievement of a 50% reduction in inappropriate antimicrobial prescribing by 2020.

By the end of Year 1

2017/18

Milestones

- A national system of reporting and learning is developed.
- A national primary care safety and quality programme has been established and has targeted high impact improvements in prescribing and medicines and supported a culture of safety and Quality Improvement in primary care.

The action we will take to achieve this

- Deliver a primary care medications patient safety programme targeting initial high impact areas (Quarter 4).
- Support the development of a national system of reporting and learning from error embedded within primary care clusters (Quarter 4).
- Undertake evaluation of tools to optimise the presentation of antimicrobial resistance research needs and mapping applications. (Quarter 4)

Part 3 – Our Strategic Priorities

• Work in partnership with the Primary and Community Care and Innovation Hub to share and spread good practice by developing communities of practice and a Quality Improvement collaborative (Quarter 4). • Support the Social Prescribing Project Team of the Primary and Community Care and Innovation Hub to deliver three identified commitments (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• A national system of reporting and learning has become operational in primary care clusters. • A number of collaboratives are well established and able to demonstrate improvement in the identified areas.	
The action we will take to achieve this	
• Scale up the primary care medications patient safety programme targeting initial high impact areas. • Continue to support a national system of reporting and learning from error embedded within primary care clusters. • Continue to support the established communities of practice and Quality Improvement collaborative. • Continue to support the Social Prescribing Project Team of the Primary and Community Care and Innovation Hub to deliver identified commitments.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Evaluate the primary care medications patient safety programme targeting initial high impact areas and support primary care clusters with local implementation. • Continue to support a national system of reporting and learning from error embedded within primary care clusters. • Continue to support the communities of practice and Quality Improvement collaborative. • Continue to support the Social Prescribing Project Team of the Primary and Community Care and Innovation Hub to deliver identified commitments.	

Strategic Objective 4E	2	3	4
By the end of 2019/20, we will have increased quality improvement capacity and capability within NHS Wales and its partner organisations.			
What success will look like by the end of 2019/20			
• Improvement capacity and capability in the NHS workforce has increased with over 50% bronze Improving Quality Together (IQT) (approx 45,000), 5% (approx 4,500) silver IQT and 0.05% (approx 45) expert level. • IQT and Person Centred Care are an integrated offer available across health and social care. • There is a 10% year on year increase in entries submitted to the NHS Wales Awards to demonstrate and share good practice • All health board and trust improvement hubs are well-established and key			

Part 3 – Our Strategic Priorities

points of contact for local and national improvement.

- There is a measurable reduction in organisational waste and increase in value added activity in Public Health Wales corporate and divisional business processes

By the end of Year 1

2017/18

Milestones

- A programme of national Quality Improvement skills training has been delivered for all health boards and trusts and partner organisations,
- Person Centred Care programmes of work are delivered with clear links to improvement priorities, including Education Programme for Patients and Co-Production /Shared Decision Making training.
- The tenth anniversary of the NHS Wales Awards is delivered and good practice and innovations have been shared and adopted.
- Relationships with local improvement hubs are sustained and the sharing of knowledge and expertise has been facilitated locally and nationally.
- Improvement of Public Health Wales corporate and divisional business processes has been facilitated by year one of an internal improvement programme.
- A culture of innovation is facilitated across Public Health Wales.

The action we will take to achieve this

- Integrate Improving Quality Together (IQT) into medical education in Wales, working in partnership with universities, the Wales Deanery (Health Education Wales) and trainees (Quarter 4)
- Facilitate the delivery of Quality Improvement training at expert and exec level, and revised silver level (Quarter 4)
- Continue to deliver the Improving Quality Together (IQT) Gold network including the Health Foundation's Generation Q initiative (Quarter 4)
- Support health boards to deliver the national Education Programme for Patients train-the-trainer courses in high impact areas linked to improvement priorities (Quarter 4)
- Design and deliver a Patient Leaders programme – linking with the Patient Experience network (Quarter 4)
- Deliver national co-production/shared-decision making training in high impact areas linked to improvement priorities (Quarter 4)
- Deliver one national learning event to share good practice, innovations and improvements nationally and support local Quality Improvement hubs (Quarter 4)
- Manage and deliver the NHS Wales Awards (Quarter 4)
- Deliver a systematic approach to support Quality Improvement hubs (Quarter 4)
- Deliver a programme to facilitate improvement of Public Health Wales corporate and divisional business processes (Quarter 4)
- Establish and coordinate a Steering Group of external partners including universities, industry and health (Quarter 4)
- Support the 1000 Lives Improvement team to continually expand and develop their advanced improvement and innovation expertise (Quarter 4)
- Develop an innovation strategy for Public Health Wales encompassing technology, care pathways and service models (Quarter 4).

By the end of Year 2	2018/19
Milestones • A programme of national Quality Improvement skills training has continued to be delivered to support health boards, trusts and partners • Person Centred Care programmes of work have continued to be delivered in alignment with improvement priorities. • The NHS Wales Awards have increased in entries and winners have shared good practice and innovations with other organisations to implement. • Improvement hubs continue to act as key points of contact. • Improvement of Public Health Wales corporate and divisional business processes has been facilitated by year two of an internal improvement programme. • Work underway to embed a culture of innovation across NHS Wales	
The action we will take to achieve this • Continue to integrate Improving Quality Together (IQT) into medical education in Wales. • Support the roll out and evaluation Quality Improvement training and networks. programmes of the delivery of • Continue to deliver national Education Programme for Patients train-the-trainer courses. • Roll out the Patient Leaders programme. • Continue to deliver national co-production/shared-decision making training. • Continue to manage and deliver the NHS Wales Awards and one national learning event to accelerate the spread of these projects across Wales • Continue to deliver a systematic approach to support Quality Improvement hubs • Continue to deliver a programme to facilitate improvement of Public Health Wales corporate and divisional business processes • Support NHS Wales to embed a culture of innovation based on learning from year 1 of the Public Health Wales innovation strategy	
By the end of Year 3	2019/20
The action we will take to achieve this • Evaluate the integration of Improving Quality Together (IQT) into medical education in Wales. • Support NHS Wales individuals who have completed expert, exec, silver and gold training to act as a cadre of local and national improvement experts. • Complete the handover of national Education Programme for Patients train-the-trainer courses to local delivery. • Scale up the Patient Leaders programme – linking with the Patient Experience network • Evaluate the national co-production/shared-decision making training and enable organisations to continue with local delivery. • Continue to manage and deliver the NHS Wales Awards and one national learning event to share good practice, innovations and improvements nationally and support local Quality Improvement hubs • Continue to deliver a systematic approach to support Quality Improvement hubs • Continue to deliver a programme to facilitate improvement of Public Health Wales corporate and divisional business processes • Continue to support NHS Wales to embed a culture of innovation	

Strategic Objective 4F

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3

4

By the end of 2019/20 we will deliver strategic leadership across NHS Wales on safeguarding people and collaborate with regional partnerships in line with key legislative drivers.

What success will look like by the end of 2019/20

- An Adverse Childhood Experiences informed NHS Wales Safeguarding Network which shares learning, best practice and supports the implementation of more impactful interventions.
- The National Safeguarding Team is recognised as providing leadership and expertise, along with facilitating innovation in safeguarding people across the NHS and wider health and social care community.

By the end of Year 1

2017/18

Milestones

- Enable a more effective response by multiagency safeguarding partnerships to prevent and mitigate impact of Adverse Childhood Experiences.
- Adverse Childhood Experiences-living with domestic abuse: NHS Wales is better informed and has a clearer understanding of compliance with NICE Guidance on Domestic Abuse.
- Adverse Childhood Experiences-Mental Ill Health and Parenting: There is evidence of implementation of the Safeguarding Children Standards by Adult Mental Health Practitioners in NHS Wales.
- National Safeguarding Team knowledge arising from research, evaluation of activities and experience contributes to the offer by the Adverse Childhood Experiences Support and Prevention Hub.
- The National Team will have mapped our current stakeholder reach and identify areas for maintaining and improving communication along with opportunities for wider engagement and influencing.

The action we will take to achieve this

- Adverse Childhood Experiences evidence base presentations delivered to all Regional Adult Safeguarding Boards (Quarter 1).
- Analyse and report on findings from the Safeguarding Children Quality Outcomes Framework Self Assessment to support the development of Adverse Childhood Experiences informed practice by NHS Wales (Quarter 4).
- Analyse and report on findings from the Safeguarding Adults Quality Outcomes Framework Self Assessment to support development of Adverse Childhood Experiences informed practice by NHS Wales (Quarter 4).
- Analyse and report on NHS Wales compliance with NICE guidance on Domestic Abuse: mitigate impact of this adverse experience on children and adults (Quarter 3).
- Report and share lessons for NHS Wales on Adverse Childhood Experiences preventive factors and resilience arising from completed practice (child and adult) and domestic homicide reviews in 2017-18 (Quarter 4).
- Audit the compliance of NHS Wales against Safeguarding Children standards for Adult Mental Health services: mitigate impact of Adverse Childhood Experiences mental ill health (Quarter 2).
- Define the role of the National Safeguarding Team in the Adverse Childhood Experiences Prevention Support Hub for Wales (Quarter 2).

Part 3 – Our Strategic Priorities

- Undertake a stakeholder mapping exercise, analyse related activity and identify opportunities for wider engagement (Quarter 4).

By the end of Year 2

2018/19

Milestones

- The network priorities are shaped and influenced by the findings of public engagement exercise on the impact of the National Safeguarding Team leadership.
- National Safeguarding Team knowledge arising from research, evaluation of activities and experience contributes to the offer by the Adverse Childhood Experiences Support and Prevention Hub.
- The National Safeguarding Team will have a clear plan to maximise opportunities for wider engagement and influence.

The action we will take to achieve this

- Analyse and present findings from the Integrated (Adult and Children) Safeguarding Quality Outcomes Framework Self Assessment to support development of Adverse Childhood Experiences informed practice.
- Collate and report on improvement plans arising from the Integrated Safeguarding Quality Outcomes Framework Self Assessment to prevent and mitigate impact of Adverse Childhood Experiences.
- Contribute to public awareness and understanding of Adverse Childhood Experiences by undertaking public engagement process to evaluate impact of National Safeguarding Team leadership on safeguarding practice.
- Develop a plan that describes how the National Safeguarding Team will maximise opportunities for wider stakeholder engagement.
- Evaluate the implementation of training standards by health boards and Trusts in NHS Wales.

By the end of Year 3

2019/20

The action we will take to achieve this

- Review the Child Sexual Exploitation Prevention Strategy for NHS Wales in line with the National Action Plan for Child Sexual Exploitation: prevent and mitigate impact of Adverse Childhood Experiences (sexual abuse).
- Collate and report on improvement plans arising from the Integrated Safeguarding Quality Improvement Framework Self Assessment to support development of Adverse Childhood Experiences informed practice.
- Contribute to development of Adverse Childhood Experiences informed organisations by undertaking stakeholder (including public) engagement process, to evaluate the impact of National Safeguarding Team leadership on NHS practice in respect of Looked after Children in Wales.

3.5 Strategic Priority 5

Influencing policy to protect and improve health and reduce inequalities

3.5.1 Why this is a priority

Policy and its successful implementation is a driver for improving health and well-being, reducing inequalities and tackling poverty. With the introduction of the Well-being of Future Generations (Wales) Act 2015, Wales has a unique opportunity to systematically address the wider determinants of health and well-being. This supportive legislative and policy context, including the Social Services and Well-being Act, the Public Health Bill, the Active Travel Act, Violence against Women, Domestic Abuse and Sexual Violence Act and the Environment Act, provides Public Health Wales with a framework that can be utilised in helping to achieve our ambition of a healthier, happier and fairer nation.

Public Health Wales plays a key role in supporting evidence informed policy and practice. We can add value to the development, implementation and evaluation of joined-up policy, whether at a national or local level, that supports the protection, improvement and promotion of health and well-being across Wales and the reduction of health inequalities. For example, our publication “Making a Difference: Investing in Sustainable Development for the Health and Well-being for the People of Wales” supports and informs decision makers by providing research evidence and expert opinion in support of preventing ill health and reducing inequalities to achieve a sustainable economy, thriving society and optimum health and well-being for the present and future generations in Wales. Our support role is delivered through an expert resource; focused research and knowledge mobilisation; and systematic response to policy needs at local, national and international levels.

Our aims ensure that:

- Health is a consideration in all policy issues and decisions across government and the public sector, supported by the use of Health Impact Assessments;
- Policy development at a local, national or international level is informed by the best intelligence and evidence available; and gaps in the evidence are informed by the research we do;
- The benefits of prevention, health promoting and improving policies are understood by the public and professionals on a multi-sectoral basis.

Part 3 – Our Strategic Priorities

We recognise the need to work in partnership across public health and the health and social care systems and also the critical importance of engaging with key stakeholders and sectors, such as criminal justice, housing, education, environment, academia, third sector, others and the public.

Public Health Wales is already working collaboratively with partner organisations across a wide range of policy issues - these arrangements are framed by the sustainable development principle of the Well-being of Future Generations (Wales) Act. For example, Public Health Wales has supported the development of Cymru Well Wales, a platform for collaborative working for over 60 organisations across public and third sectors. The participating organisations have committed to securing better health for the Welsh population, and have identified three key areas of focus: first 1000 days; employability; and Adverse Childhood Experiences.

With our partners in the housing and criminal justice sectors, we are undertaking joint programmes of work to achieve common outcomes. These partnerships are underpinned by Memoranda of Understanding between Public Health Wales and Community Housing Cymru; and between Public Health Wales and the Police and Crime Commissioner for South Wales and the South Wales Police. All of our partnerships will be further developed and utilised for public health benefit as part of the three year plan.

We recognise that local partnerships at Public Services Boards are a powerful mechanism for improving health at a local level and we aim to support them in this ambition. We will also be working closely with the NHS and Regional Safeguarding Boards in further promoting the importance of Adverse Childhood Experiences becoming embedded within practice and service delivery across health and social care provision.

We recognise that significant policy impacting on health and well-being in Wales is developed on a UK, European and global basis. So we aim to ensure that key stakeholders in Wales better understand the opportunities to influence and use international evidence, policy and good practice for the benefit of the Welsh population. Public Health Wales has already established successful partnerships with the World Health Organization, the Regions for Health Network and Healthy Cities, EuroHealthNet, the International Association of Public Health Institutes and the Commonwealth Secretariat. Through the links and activity of the International Health Co-ordination Centre we are contributing to the Welsh offer on Global Health. Our focus and priorities are informed by the World Health Organisation Health 2020 European Strategy and the 2030 Agenda on Sustainable Development, tailored to the Welsh challenges and assets. We are developing an International Strategy to ensure our common vision and goals, and to enhance coherence, collaboration and learning in order to better inform policy and practice. We aim to

Part 3 – Our Strategic Priorities

strengthen and develop further our international and global health impact and partnerships, especially considering the UK referendum decision to leave the European Union (EU). We will work to support Wales through the emerging international challenges.

Public Health Wales recognises the value of research and evaluation to inform policy and practice at a local, national and international level. Public Health Wales is working towards implementing the Research and Development Strategy, launched in 2015, embedding and supporting research across the organisation, and strengthening collaborations to directly inform policy and practice.

3.5.2 Drivers for change

Our drivers for change are:

- The potential for policy to drive and support health improvement and to reduce inequalities and levels of poverty.
- The need to understand the impact of the UK referendum to leave the EU, on population health and well-being, sustainability as well as its impact on our organisation and our partner organisations. We will work to understand how to manage any challenges and identify opportunities that emerge from the process.
- Substantively greater impacts are possible for public health if the activities of all public sector bodies and other key stakeholders are aligned. We can contribute to integrated multi sectoral approaches to prevention that improve health, reduce antisocial behaviour and increase economic growth.
- The urgent need to engage with and understand the opportunities provided by policy development at European and other international levels.
- The low levels of investment in health promotion and prevention interventions in Wales. A strong professional advocacy for cross-sector investment in policies that support health improvement and promotion is vital to the well-being of the people in Wales and to reducing pressures on health and social care systems, communities and the wider economy.
- The growing body of compelling Welsh research evidence demonstrating the link between Adverse Childhood Experiences and their impacts on population health and well-being across the life course.
- The growing need to build personal and community resilience and to support sustainable development in response to current and emerging economic, environmental and social crises and threats to public health.

3.5.3 What we are trying to achieve

We are trying to achieve a nationally coordinated multi agency and inclusive approach to tackling public health issues which is better informed, evaluated, better funded, prevention focused, more cost effective and that influences policy and practice at local, national and international levels.

This includes:

- Supporting the development, implementation and evaluation of public health policy across Wales, at a local and national level, and more widely on a UK and international basis.
- Making a compelling case for increased investment in health promotion and early prevention interventions in Wales, by mobilising the relevant evidence and demonstrating the wider benefits, including to the NHS, to society and to economic growth.
- Helping to ensure policy developments within Wales and on an international basis are used to their full extent to improve population health and to develop capacity and capability to support this purpose.
- Facilitating multi-sectoral approaches to prevention and health improvement through engagement with the housing sector, education, social services, criminal justice and other public services.
- Providing timely, quality assured support, advice and information and promoting best policy and practice across and between all sectors, settings and systems
- Using translational research to analyse and evaluate national and international policy developments and informing the evidence base to support advocacy to legislators and other policy makers, alongside practitioners and partners in public health.
- Ensuring our Research Strategy creates an environment that develops and supports research capacity; facilitates the generation of new knowledge; develops and strengthens collaborative relationships; and effectively engages the public in population health research and communicates research findings.
- Ensuring our International Strategy creates an environment that maximises benefit from our international work; facilitating opportunities, learning and impact for our organisation and the wider NHS.

3.5.4 How we are going to achieve this

We will achieve this by:

- Working with government - providing evidence-informed options to maximise the health benefits and minimise the health harms from policy development and implementation across all departments.

Part 3 – Our Strategic Priorities

- Using and strengthening the evidence base - providing health impact assessment through the policy development process and continuing into the empirical assessment of implemented policy in order to help ensure policy improves well-being and reduces health inequalities. Also working with national and international research partners, including local public health teams, academia, and the third sector to address gaps in knowledge and evaluate the impact of policy and practice on health outcomes.
- Working across boundaries - facilitating the integration and alignment of policy at international, national and local level across multiple organisations (including the housing sector, education, criminal justice, social and health bodies) with a public health ethos at its core. Our work facilitating the implementation of the Well-being of Future Generations (Wales) Act, supported by the Health and Sustainability Hub, will intensify our partnership working with our stakeholders.
- Making the case - advocating for investing in prevention through the use of national and international evidence, translated and communicated to policy- and decision-makers and professionals in order to increase understanding and support of health promotion and improvement interventions.
- Learning with others - working on national and international basis in partnership with other organisations and agencies in order to ensure Wales uses, learns from and influences public health policies and practices and adopts successful innovations.
- Empowering stakeholders - from a public health perspective we will increase the understanding of and the ability and capacity to develop and implement health promoting and improving policy. Through the Public Health Network Cymru events, forums and web-based systems, we will actively engage stakeholders, supporting and promoting public health policy and best practice in Wales.
- Engaging internationally - working with our UK, European and global health partners and using our International Health Coordination Centre links and experience, we will ensure the sharing of good practices, expertise and evidence and will support partnership building, accessing external income, enhancing mutual synergies and the dissemination of innovative practice as well as promoting Public Health Wales policy developments, role and influence on a global level.
- Bridging the gap between policy, practice and research – supported by the Research and Development team, we will work to increase the impact of public health research so that it informs and supports policy development and implementation as well as public health practice.
- Supporting the implementation of the sustainable development principle – supported by the Health and Sustainability Hub, we will use the Well-being of Future Generations (Wales) Act to frame and guide our work.

Part 3 – Our Strategic Priorities

The strategic priority has been developed through discussion and planning across Public Health Wales as well as with key stakeholders, including the Welsh Government, the Future Generations Commissioner, Universities and third sector organisations as well as with our international partners (e.g. World Health Organisation, International Association of National Public Health Institutes, etc). As part of our plans for 2017-2020 we will continue to invest in such partnership working across Wales and internationally in order to deliver effective, efficient and innovative approaches to driving and delivering Public Health.

3.5.5 Strategic Objectives

The strategic objectives that will be the focus of delivery of this priority over the next three years are as follows.

Strategic Objective 5A			3	4	5
By the end of 2019/20, we will be able to inform and support policy development and cross-sectoral working locally and nationally, linking in research and learning from international good practice, and will have embedded the Well-being of Future Generations (Wales) Act 2015 within the organisation as a “way of working”.					
What success will look like by the end of 2019/20					
• We are maximising our support to the public health workforce to help increase their knowledge and skills, linking policy to research and practice. • We are supporting the development of Health Impact Assessment capacity across Wales and are providing expert support on policy. • We are supporting policy development, implementation and evaluation at all levels across Wales, are contributing to international policy, and are involving our population in our policy work. • We are key partners in cross sector working, contributing to joint work to tackle the major threats to public health in Wales. • We have embedded the Well-being of Future Generations (Wales) Act 2015 “ways of working” and are delivering our well-being objectives jointly with our partner organisations to contribute to the well-being goals. • We are supporting criminal justice policy and practice to have an “Adverse Childhood Experiences lens”, through our collaborative and integrated working. • We are supporting the translation of research into policy and practice, in collaboration with partner organisations.					

By the end of Year 1	2017/18
Milestones	
• We have delivered events and utilised opportunities to increase public health knowledge and skills of Public Health Network Cymru. • We have delivered training to help build skills and capacity for Health Impact Assessment across the organisation and with stakeholders and have provided expert support to Welsh Government in response to the	

Part 3 – Our Strategic Priorities

requirements of the Public Health (Wales) Bill.

- We are undertaking cross organisational work to deliver position statements and policy briefings.
- We are embedding the “ways of working” into corporate functions and decision making and are being supported to deliver well-being objectives.
- We have delivered the requirements of the Police Innovation Fund project and have joint working agreements with criminal justice in other regions.
- The NHS and Public Service Boards understand and are able to maximise their contribution to a “more equal” Wales.

The action we will take to achieve this

- Conduct a comprehensive evaluation of Public Health Network Cymru (Quarter 3).
- Build capacity of the Public Health workforce through: delivery of 3 seminars (reflecting the priorities of Public Health Wales and Network members); a conference; establishment of an online learning platform; and engagement with network members (Quarter 4).
- Support and advise Welsh Government on Health Impact Assessments, with a focus on the requirements of the Public Health Bill (Quarter 4).
- Increase capacity for Health Impact Assessment through promoting Health Impact Assessment best practice e.g. through delivery of Health Impact Assessment training sessions and explore opportunities for a one day Health Impact Assessment symposium in Wales (Quarter 4).
- Support Health Impact Assessment integration into planning via the new EU Environmental Impact Assessment (EIA) Directive and the Welsh Government National Development Plan Health Impact Assessment (Quarter 4).
- Produce and disseminate timely organisation position statements, policy briefings and consultation responses on key public health issues on an ongoing basis, informed by evidence, research and learning from international policy and practice (Quarter 4).
- Identify routes for public engagement and involvement in policy development and implementation (Quarter 4).
- Work across directorates and support functions to facilitate the embedding of the sustainable development principle to enable staff to apply the Well-being of Future Generations (Wales) Act 2015 in their work, with a focus on supporting strategic planning (Quarter 4).
- Support the development of joint well-being objectives with other Public Bodies / stakeholders, to contribute to maximising Public Health Wales' contribution to the Well-being goals (Quarter 4).
- Provide support to PSBs through a network of local public health leads and Welsh Government (Local Government Partnership) and through provision of briefings and tools (drawing on feedback from PSBs) (Quarter 3).
- Support Public Health Wales' approach to environmental sustainability e.g. through understanding its carbon footprint and develop a programme of work with an Environmental expert interest group (Quarter 4).
- Working with the Office of the Future Generation's Commissioner, Auditor General and Welsh Government, identify opportunities to offer specialist Public Health support, as well as keeping pace with latest developments in the implementation of the Act (Quarter 4).
- Deliver the understanding element of the Police Innovation Fund project (including the current systems and processes for responding to Adverse Childhood Experiences and the prevalence of Adverse Childhood Experiences

Part 3 – Our Strategic Priorities

in the offender population) and inform the development and testing of new ways of working with police and other partners (Quarter 4). • Take forward the principles of the Memorandum of Understanding with the South Wales Police and the Police and Crime Commissioner for South Wales with other regions in Wales to develop stronger collaborative and preventative action and support a Wales wide public health approach in policing and criminal justice (Quarter 4). • Working with Research & Development (R&D), Knowledge Mobilisation and partner organisations, to raise awareness of the new knowledge generated from the research we do, to inform policy & practice (Quarter 3). • Use findings of the review undertaken in 2016/17 to identify how the Centre for Equality and Human Rights can support the NHS to achieve a more equal Wales, contributing to achieving the Well-being of Future Generations (Wales) Act 2015 Goals (Quarter 4). • Share Centre for Equality and Human Rights learning on co-production and working with communities within Public Health Wales and with other NHS organisations (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• We have implemented the recommendations from an evaluation of Public Health Network Cymru to maximise our impact. • We have delivered a practical Health Impact Assessment guide to support practitioners. • We have involved our population in our policy work. • The impact of our joint action plans with partner agencies is understood. • The organisation has agreed well-being objectives with partner organisations and is being supported by the Health and Sustainability Hub to deliver these. • We have identified opportunities to embed learning from the Police Innovation Fund project in the criminal justice sector across Wales. • We have developed a toolkit to support knowledge translation. • PSBs are supported in their work on Equality and Human Rights.	
The action we will take to achieve this	
• Implement the recommendations of the evaluation of Public Health Network Cymru. • Support and advise Welsh Government on Health Impact Assessment, with a focus on any statutory requirements of the Public Health Act 2017. • Deliver a Health Impact Assessment practical guide for Wales. • Embed the principle of engagement and involvement in our policy work, so that organisational policy development, implementation and practice are informed by and responsive to our population. • Provide policy support to the 'Investment for Health and Sustainable Development' work programme. • Working across Directorates, facilitate the embedding of systems change to apply the aims of the Well-being of Future Generations (Wales) Act 2015. • Support collaborative working with other public bodies to deliver joint well-being objectives. • Provide specialist Public Health support to the Office of the Future Generations Commissioner as agreed in 2017/18. • Embed learning from the Police Innovation Fund project across other police forces and criminal justice agencies in Wales. • Develop and disseminate a knowledge exchange toolkit to relevant partners.	

Part 3 – Our Strategic Priorities

- Support PSBs, providing an Equality and Human Rights perspective.

By the end of Year 3

2019/20

The action we will take to achieve this

- Support and advise Welsh Government on Health Impact Assessment, with a focus on the statutory requirements of the Public Health Act 2017.
- Provide policy support to the 'Investment for Health and Sustainable Development' work programme.
- Review the impact of the Well-being of Future Generations (Wales) Act 2015 on the work of Public Health Wales, including the role of the Health and Sustainability Hub.
- Undertake a review of the work programme delivered as part of the Memorandum of Understanding with policing and criminal justice.
- Support the flow of research produced by both Public Health Wales and National Centre for Population Health and Well-being Research into policy and practice.

Strategic Objective 5B

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5

By the end of 2019/20 research and evaluation will be embedded in Public Health Wales, through developing and supporting research capacity, generating new knowledge, strengthened collaborative relationships and improved communication to ensure new knowledge is transferred into policy and practice.

What success will look like by the end of 2019/20

- We are a recognised national and international leader in the delivery of robust, high quality research across multiple public health disciplines.
- We will be able to demonstrate how the research and evaluation we do in collaboration with others addresses gaps in knowledge and informs evidence based policy and practice.
- We support staff across Public Health Wales to develop and apply research and evaluation skills, and disseminate their findings.

By the end of Year 1

2017/18

Milestones

- We can identify gaps in knowledge needed to inform practice and/or policy, understand our research priorities in those areas, and have mechanisms in place to commission or lead research to address those priorities.
- Working with our external partners we are using innovative research and evaluation approaches to address key priority areas including Adverse Childhood Experiences, health and sustainability, Well-being of Future Generations (Wales) Act 2015
- We will have a clear and coherent pathway for sharing the new knowledge generated from the research we do, to inform evidence based national and international policy and practice.
- We will have a clear and coherent pathway for transfer of knowledge into evidence informed policy and practice, gaining national and international recognition for the work we do.
- We have robust research governance processes in place and actively

Part 3 – Our Strategic Priorities

contribute to the research infrastructure for Wales through links with Health and Care Research Wales.

The action we will take to achieve this

- Develop process to identify and prioritise research needs in line with Public Health Wales strategic priorities and draw on capacity and capability within Public Health Wales, and external partners to deliver high quality research addressing those needs (Quarters 1 & 2).
- Develop a network of accountable staff to support delivery of the Public Health Wales Research Strategy, including external engagement through links with Higher Education Institutes (HEI), National Centre for Population Health and Well-Being Research (NCPHWR) and Health Wise Wales (Quarter 1 to 4).
- Strengthen and streamline research management and governance systems to ensure quality and safety of Public Health Wales' involvement in research and delivery against Health and Care Research Wales (HCRW) targets (Quarter 1 to 4).
- Lead a research programme in collaboration with external partners (such as local public health teams, Health Boards, Public Service Boards, academia, housing, police and others) with a focus on health and sustainability, Adverse Childhood Experiences, Well-being of Future Generations (Wales) Act 2015 and in anticipation of the implications of the EU transition (Quarter 4).
- Increase national and international collaborations with academia and other partners facilitated through our links with the wider Health and Care Research Wales infrastructure and Public Health Wales links with international research networks, as described in the International Health Strategy (2017-2027) to increase Public Health Wales involvement in externally funded research bids (Quarter 4).
- Maximise dissemination of our research to national and international audiences through publication in international peer reviewed journals, advocating open access publications, presentation at key research conferences and an annual research report highlighting Public Health Wales achievements for practice, academic and policy audiences. (Quarter 4).
- Working with R&D, Knowledge Mobilisation and partner organisations, to raise awareness of the new knowledge generated from the research we do, to inform policy & practice (Quarter 4).
- Strengthen our links with the Health and Care Research Wales research infrastructure, to increase dissemination and encourage use of research support and opportunities available to Public Health Wales (e.g. Clinical Research Time Awards, Research funding applications from Public Health Wales) (Quarter 4).

By the end of Year 2

2018/19

Milestones

- We will have a community of research active staff, across multiple disciplines, with increasing collaborations across multiagency groups.
- We will complete a review of how our research informs policy and practice.
- We see an increase in peer reviewed publications, and research funding, and increased national and international recognition for the work we do resulting in increased collaborations.
- We have robust research governance processes in place.

The action we will take to achieve this

- Review progress against the Public Health Wales' Research Strategy, including barriers and enablers supporting staff to become research active e.g. as co-investigators, Principal Investigators (PIs) and to publish research activities with impact on policy and practice.
- Further develop a research programme in collaboration with partners addressing the wider determinants of health, inequalities and sustainability in line with key areas of policy focus.
- Review information governance processes and procedures to ensure they continue to be fit for purpose.

By the end of Year 3

2019/20

The action we will take to achieve this

- Lead research programme in collaborations partners addressing the wider determinants of health, inequalities and sustainability.
- Complete a review to examine the impact of research completed by Public Health Wales on national and international policy and practice.
- Generation of new externally funded research bids with academic and other national and international collaborators.

Strategic Objective 5C

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By end of 2019/20 we will have stronger international impact, links and role in global health; effective cross-organisational and cross-NHS engagement; and leading expertise in investment for health, well-being and sustainable development nationally and internationally.

What success will look like by the end of 2019/20

- We are a recognised international centre of excellence, supporting multi-sectoral collaboration and research across regions and countries, and informing and influencing policy and practice to foster sustainable health, well-being and equity for the present and future generations.
- We enable and support staff across Public Health Wales to share, contribute to and benefit from international partnership, evidence, policy and good practice in a pre- and post-Brexit climate.
- Our International Health Coordination Centre works across the NHS and we contribute to the Wales offer on global health and sustainable development, supporting access to external funding opportunities and helping managing any pre- or / post-Brexit uncertainty and change.

By the end of Year 1

2017/18

Milestones

- Mainstreamed a joint World Health Organisation European programme of work on 'Investment for Health and Sustainable Development', achieving excellence within and beyond Welsh borders.
- Launched and start implementing our International Health Strategy, strengthening coherence, collaboration and global responsibility, enhancing learning and partnership, and informing policy and practice across the organisation and the NHS.

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- Reviewed our International Health Co-ordination Centre strategic direction and governance to optimise working across the NHS and linking with Welsh Government and other key stakeholders.
- Delivered specific products or made specific contributions to global health through our external relationships with the Commonwealth Secretariat and the International Association of National Public Health Institutes.

The action we will take to achieve this

- Promote and reinforce Public Health Wales' international vision, commitment and engagement through the launch of our International Health Strategy and development of its governance structure and implementation plan (Quarter 1, 2 & 4).
- Mainstream a programme of work on 'Investment for Health and Sustainable Development' across the organisation in partnership with the World Health Organisation Europe, working to achieve excellence within and beyond Welsh borders and to apply for a World Health Organisation Collaborating Centre designation (Quarter 1, 3 & 4).
- Strengthen governance, reciprocal partnership, organisational responsibility, good practice and research for contributing to sustainable development and global health through review and consolidation of our International Health Coordination Centre governance and stakeholder links, and developing an implementation toolkit for the Charter for International Health Partnerships in Wales (Quarter 2 & 4).
- Support health protection, improvement, promotion and reducing inequalities across Wales by establishing a cross-organisational 'International Hub/Network' to strengthen staff sharing, learning and engagement, to develop skills and links, and to enhance benchmarking and innovation through evidence mobilisation, translation and implementation into policy and practice (Quarter 2, 3 & 4).
- Take forward a programme of work with the Commonwealth Secretariat, including update of the developed Health Protection Tool Kit; develop a violence prevention action plan; and agree and commence further/follow-up joint products (Quarter 1 to 4).
- Undertake a Peer-to-Peer review of Public Health Wales by the International Association of National Public Health Institutes (Quarter 3).

By the end of Year 2

2018/19

Milestones

- Achieved international excellence and recognition on 'Investment for Health and Sustainable Development'.
- Continued implementing our International Health Strategy.
- Continued delivering specific products or make specific contributions to global health work.

The action we will take to achieve this

- Implement further Public Health Wales' International Health Strategy and increase our impact.
- Achieve international excellence and recognition on 'Investment for Health and Sustainable Development' through a World Health Organisation Collaborating Centre designation.
- Support Wales offer and commitment to sustainable development, global health and responsibility through collaboration, joint work and product development with the Commonwealth Secretariat, World Health Organisation, EuroHealthNet and our UK partners.
- Evaluate the implementation of the Charter for International Health

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Partnerships across Wales. • Produce and start implementing a plan to address the recommendations of the International Association of National Public Health Institutes peer review.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Reinforce Public Health Wales' international vision, commitment and engagement in international and global health. • Coordinate and support a European cross-organisational programme of work on 'Investment for Health and Sustainable Development' as a World Health Organisation Collaborating Centre. • Support Wales offer and commitment to sustainable development and global health including further join work, product development and roll-out in association with the Commonwealth Secretariat, World Health Organisation, EuroHealthNet and across the UK. • Conclude actions arising from any outstanding recommendations of the International Association of National Public Health Institutes peer review.	

3.6 Strategic Priority 6

Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver

3.6.1 Why this is a priority

We have previously detailed our commitment to focus on, and continually drive improvements in, the quality, safety and efficiency of the services we deliver. Our previous plans have included detail of work on:

- the modernisation of microbiology services and the cervical screening programme
- performance improvements within screening programmes
- a commitment to create a culture that puts the citizen at the heart of what we do as part of continual improvement

We will build on these developments further over the next three years to achieve truly transformational change to the way we deliver public health services for the people of Wales and our partners.

3.6.2 Drivers for change

Along with the wider NHS Wales, we face a number of strategic challenges and opportunities over the next five years. These include:

- increasing financial and capacity/demand pressures on services as part of an ever changing operational environment
- the need to ensure we meet the principles of prudent healthcare
- the need to better align and integrate resources to address major public health issues, such as healthcare associated infections and antimicrobial resistance, outbreak response, emerging infections, and inequalities, especially the uptake of population health programmes like screening and vaccination and immunisation
- the need to maximise the opportunities of advances in technology across our public health services
- the age profile of the current workforce, the challenge of recruiting to key specialist roles and the requirement to develop the workforce needed in the future
- increasing expectations from the wider NHS and the public for our services
- the five ways of working enshrined in the *Well-being of Future Generations (Wales) Act 2015*
- the evidence-based priority areas for preventive action set out in *Making a Difference*, and specifically priorities 8 (protection from

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disease and early identification) and 10 (ensuring safe and health promoting natural and built environment)

The principles of prudent healthcare have guided our approach to several recent service developments, for example, co-producing specific approaches to our cervical screening services together with members of the transgender community. In a similar way, and consistent with the ways of working enshrined in the *Well-being of Future Generations (Wales) Act 2015*, we collaborate with a wide array of other stakeholders within Wales and elsewhere including, for example, all 22 local authorities, Natural Resources Wales and the Food Standards Agency in Wales, as well as Public Health England, in the delivery of our health protection responsibilities. Our redesign of the north Wales microbiology services and the development of all Wales standard operating procedures ensure that we do only what is needed, no more and no less and support our efforts in reducing inappropriate variation. We also continue to work to reduce inequalities across all our services. This includes work within the bowel screening programme where we are working closely with patient interest groups to encourage uptake among men in poorer communities.

We deliver many of our services in partnership with Health Boards, in many cases relying on a small pool of specialist staff who may work in both Public Health Wales and Health Board roles. Clearly defining these relationships and mutual expectations will better enable us to provide timely, high quality services. To that end, we have developed, and in 2016/17 introduced, a single Memorandum of Understanding between Public Health Wales Directorate of Public Health Services and Health Boards, to stand alongside our existing Service Level Agreements.

3.6.3 Focused on our core purpose

Whilst acknowledging these drivers Public Health Wales will not lose sight of its core responsibilities to protect the population of Wales from threats to its health. Building on our previous successes we are committed to giving strategic leadership and practical advice and support to the NHS and wider partners to:

- achieve critical population uptake levels for childhood immunisations and targets for flu vaccination, recognising the preventive value of immunisations as a public health intervention (evidenced in *Making a Difference*), and at the same time support the introductions of new vaccine programmes
- working in partnership, strengthen our core health protection services to reduce the impact from and respond effectively to communicable disease and environmental hazards, incidents and outbreaks of disease
- achieve Welsh Government's new expectations for health care associated infection reductions

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- co-ordinate a whole of Wales response to protect Wales from new and emerging infectious diseases – learning from our experiences with Ebola and Zika virus disease, in 2016, we produced a new Emergency Response Plan in collaboration with stakeholders including Welsh Government
- identify those who may be at increased risk of a disease or health condition through effective screening programmes by increased focus on our current performance and planning for the introduction of new programmes, adopting a long-term prevention approach consistent with the *Well-being of Future Generations (Wales) Act 2015* and evidenced in priority 8 of *Making a Difference*

The strategic objectives set out in this section, as well as those for immunisations and Healthcare Associated Infections set out in Strategic Priority 4, explain how we will deliver on these commitments.

3.6.4 Engaging with our stakeholders

It is not possible for Public Health Wales to undertake its core protection responsibilities without the full engagement of the public and key stakeholders, especially our statutory partners in health boards and trusts, local authorities and other bodies including Natural Resources Wales and the Food Standards Agency. Building on our previous achievements we will do this by:

- providing public information that is easy to understand and recognises language and culture as a well-being goal enshrined in the *Well-being of Future Generations (Wales) Act 2015*
- raising awareness of public health programmes and promoting informed choice as demonstrated by the work of the Screening Engagement Team, which is consistent with the involvement called for in the *Well-being of Future Generations (Wales) Act 2015*
- explicitly focusing activities to reduce inequities in participation in our immunisation and screening programmes
- continued targeted support provided to health boards by our Welsh Healthcare Associated Infection Programme to achieve reductions in Healthcare Associated Infections and
- continued engagement with health boards to agree a proposal for improving the quality of and modernising our microbiology services

Our refresh of this strategic priority has also involved extensive internal engagement – across divisions with some reassignment and revision of specific objectives – and external engagement, on specific issues, with all our key stakeholders. This includes internal workshops, external consultations and where appropriate external quality assurance of our proposals, for example, our new emergency response plan.

3.6.5 What we are trying to achieve

An Integrated Public Health Service Directorate

The Directorate will continue its development into a fully integrated service and will complete this work towards the end of 2018/19. An integrated Directorate means that we work as one team unless there are advantages to retaining divisional or programme specific approaches/work streams.

We will also explore opportunities for joint ventures and partnerships, via a greater business focus with social enterprises and the wider commercial sector. This means that we will look to increase revenue through the marketing and monetising of our services to other UK countries and internationally, including diagnostic assays, screening programmes and surveillance tools. This will be a new development for the directorate and so we will need to make the case for our approach, underpinned with robust governance.

An Integrated Health Protection Service

We will develop an integrated Health Protection Service, which will better align the existing health protection and microbiology divisions. This will further strengthen our response to infection prevention and control challenges, the protection of population health from communicable and non communicable hazards and facilitate the proactive targeting of our resources to prevention priorities as highlighted in *Making a Difference*. This should lead to measurable improvements for patients (reduced infection prevalence and more timely and appropriate interventions), clinicians (timely results to inform action) and the wider community (reduced risk of infections, tackling inequalities in health).

Good progress has been made in 2016/17 including the piloting of new local health protection arrangements, developed in collaboration with local directors of public health, which will result in more equitable service delivery across Wales. This is supported by the establishment of an Acute Response Centre in our new offices in Cardiff. The recent recruitment of a new Director of Integrated Health Protection and a Professional Lead Consultant in Health Protection is expected to lead to further operational changes that will ensure we maximise the opportunities set out in *Making a Difference*.

The Lead Consultant has already commenced a review of the programmes managed by the Health Protection division, helpfully prompted by a recent request from Welsh Government for a comprehensive review of sexual health services in Wales. This includes a review of programmes managed by the Health Protection service to ensure appropriate alignment to NHS Delivery plans and clear focus on addressing inequalities in health. This will include further development of an enhanced model for local health

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protection services, aligned to the modernisation of microbiology services. This aims to better enable working, at a local level, with key partners through releasing assets to drive change, while also enabling career and role development. Service developments will be underpinned by the introduction of new platforms, including a case and incident management system, which will support the management and response to public health incidents and outbreaks and provide stronger governance and greater transparency. In addition, at an all-NHS in Wales level Public Health Wales will continue to lead the ICNet Programme started in 2016/17 that will establish a whole of Wales infection control and case management system. Through our strategic leadership we will ensure the platforms join together to create a single 'view' of infectious diseases in Wales to inform NHS action.

Public Health Wales staff working in public health protection, including microbiologists and scientists, have a longstanding and highly regarded active involvement in global health. This includes membership of UK and European committees, joint appointments with the European Centre for Disease Prevention and Control, technical advisory roles to international bodies including the World Health Organisation, and research collaborations with universities across the world. We will continue to build on these activities and our intentions in this area are set out under Strategic Priority 5.

Delivery of Key Health Protection Functions and Services

Substance Misuse

The Substance Misuse programme supports the core Health Protection activities of surveillance, preventing transmission of communicable disease and managing outbreaks and other incidents which threaten public health and, in addition, strategically supports efforts to address wider harms for individuals and the population in relation to drugs and alcohol and associated vulnerabilities. The overarching strategic objective of the Substance Misuse programme is to reduce health inequalities, and prevent or reduce communicable and non-communicable disease, wider harms and premature death related to substance use. This is achieved through established and innovative national surveillance systems and research programmes, policy and guidance for service improvement and recognised expertise.

Sexual Health

Sexual health is a complex area of healthcare which goes beyond integrated sexual health services operating in isolation. A joined up or partnership approach with other sectors of healthcare and related services would ensure that local services would meet local need. Public Health Wales has been requested to undertake a review of Sexual Health and HIV services after it was identified as a priority by the Minister for Social

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Services and Public Health. The review will provide recommendations on the actions required to provide prudent, co-ordinated sexual health services that meet the needs of the population and that will reduce health inequalities through focused action.

These recommendations will be informed by a cost benefit analysis of any proposed change to the current service provision.

Environmental Health

A broad range of environmental hazards (for example, chemical incidents and air pollution) have the potential to adversely affect individual and population health. The Health Protection Team is committed to reducing these risks through the provision of specialist public health advice intended to support multi-agency responses to acute environmental incidents, chronic public health concerns and industrial and other developments that might impact air, land or water quality. The Team also undertakes proactive work to understand associations between environmental hazards and health in Wales in order to inform priorities for action.

Specific high level actions for these areas are set out within this plan and are underpinned by more detailed programme plans.

A High Quality, Modern Microbiology Service

We have already commenced a major modernisation programme with the objective being to develop an all Wales managed service network (delivered through a regional model). The Public Health Wales microbiology service has recently been reviewed by the Clinical Pathology Accreditation (UK) Ltd/United Kingdom Accreditation Service against International Organisation for Standardisation (ISO) 15189 standards and we anticipate full accreditation subject to resolution of identified non-compliances. Following the recent appointment of a new Programme Manager we are already working in partnership with health boards and wider stakeholders to ensure that the development of the service takes account of health board and population need. This includes interfacing with existing regional and national initiatives, such as the National Pathology Programme Board and ARCH, as well as establishing a South East Wales Microbiology Forum that is enabling collaboration between Public Health Wales and non-Public Health Wales microbiology services. This varied approach brings focus and develops existing collaboration and synergy whilst minimising duplication.

Essential to the modernisation of the service is the provision of a competent and sustainable workforce. In response to the UK wide challenge to recruit to the consultant medical microbiology workforce, Public Health Wales has instigated a range of activities to enhance our recruitment and retention potential. This includes revamped promotion of

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the benefits of working in Wales, Public Health Wales and microbiology as well as launching work streams designed to develop our microbiology careers. Our approach is clear: we use a multidisciplinary approach in delivering our service and we are investing in our people to achieve this. We have already introduced Associate Practitioner roles within our Medical Laboratory Assistant group and are looking to develop our consultant healthcare scientist cadre as part of the redesign of an Infectious Disease service.

These approaches are consistent with Modernising Scientific Careers and recognise the fact that microbiology is expected to remain dependent upon a skilled workforce and less on automation than other pathology sub-specialties in the short and medium term. We can predict retirement of around 30% of our current staff in the next ten years which along with the introduction of new technology poses a huge challenge to service delivery.

The service is currently at a 'hinge point' where some factors promote consolidation and economies of scale (in the short-term) but are not necessarily the longer term model. As such, whilst transforming a service to meet a future of near / point of care testing in primary and secondary care settings, microbiology will need to ensure continuity of a current service model during the transition period. There will also be a shift in location of service delivery with greater emphasis on our medical and scientific workforce to be alongside other clinicians at or close to the bedside.

Alongside developing and agreeing a vision of microbiology services for five and ten years time, it is essential to have a workforce plan that manages the transition and the inherent risks to service delivery in the short term whilst preparing for the long term service model. This work has already started internally within Public Health Wales microbiology services and is about to be extended to include our microbiology partners in health boards. Only together can we deliver a modern, fit for purpose microbiology service for NHS Wales in the long term.

The creation of an all-Wales microbiology network will ensure the sustainable delivery of high quality and equitable services, in support of prudent healthcare. This concept will initially focus on collaborative working, roles and functions rather than issues of structure and ownership. The latter aspects will be explored subsequently in an organic manner.

Further developments at an all-Wales and regional level, will bring together high quality clinical and technical expertise underpinned by the application of current and emerging technology, including molecular diagnostics and next generation sequencing, supported by efficiencies derived from automation. Confronted by competition for scarce skills this will maximise the opportunities for the exploitation of automation and

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technology through the development of critical mass and allow for a more efficient response to public health priorities and threats. We have already started this work with an evolving Welsh (operational) Network for Serological and Molecular Diagnosis. This concept is seeking to produce a national service that enables local functionality whilst maintaining a national critical mass and will provide a template for further intra-microbiology networks.

Genomic sequencing provides us with an opportunity to enhance our response to infectious diseases significantly. Following capital investment from Welsh Government at the end of 2015/16 we have been working with partners to develop an approach for Wales. The intention is to implement a phased approach to pathogen sequencing over 2-3 years, starting with organisms of immediate concern including *Clostridium difficile*. Public Health Wales believes that it is essential to establish a genomic sequencing capability across the NHS in Wales, if not an All Wales Genome Sequencing Service. In order to secure this we have worked closely with Welsh Government, together with partners in academia, and industry, as well as the wider NHS, to make the case for and support the development of a Welsh Government-led Genomics for Precision Medicine strategy including infectious diseases. We will also support wider developments across Public Health Wales in relation to epigenetics and its application to public health.

The introduction of genomics technologies aligns to the intention of microbiology to transform and innovate our laboratories to provide a high quality, safe and prudent service for the population in Wales. This ambition is in line with the Welsh Government Genomics Strategy, which specifies that the priorities for development should be:

- Clinical and laboratory services
- Research and Innovation
- Strategic partnerships
- Workforce

The activities and actions for the work are focussed on developing the capability and capacity to provide initially a diagnostic service for HIV resistance and Mycobacterial sequencing.

Subject to funding, further planned development include: surveillance data for *Clostridium difficile*, sequencing assistance for the typing and characterisation of ESKAPE pathogens and next generation sequence-based approaches for the identification of *Cryptosporidium*, *Cylospora*.

These development proposals align to national Welsh Government Delivery Plans, in particular Achieving Excellence - The quality delivery plan for NHS in Wales 2012-2016 and Antimicrobial Resistance (AMR). There are emerging targets on AMR that require a sustained and multidisciplinary approach at a national level, hence the proposals for

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C.difficile and ESKAPE pathogens – both key areas for surveillance and infection management.

The plans are centred on five key objectives that will have wide range of outcomes and impact over the next five years

- a)** Delivering an infectious disease services that is equitable, consistent and reflective of the needs of patients in Wales – fulfilling the prudent healthcare principles to work with patients and healthcare professionals to improve outcomes so that patients have a greater control of their own health.
- b)** Driving an efficient research and innovation base – prioritising support for investigation and research to promote coproduction and cross discipline work.
- c)** Initiating economic growth – using NGS to instigate productivity, transform the service and create commercial opportunities.
- d)** Facilitating partnership in developing and adopting new approaches in public health – capitalising on existing collaborative work and research strengths to foster collaboration and enhance contributions to future development
- e)** Building capacity, training, educating and developing staff in NGS – developing and investing in staff to build biomathematics and bioinformatics capability in the Wales workforce.

Effective communication and governance is critical to the planned transformation and the microbiology management team has already undertaken a listening exercise during December 2016. This has acted as a spring board for regular communication to both Public Health Wales and non-Public Health Wales microbiology services with an engagement and communication framework, currently in development in` partnership with the staff unions and the corporate communications team.

To provide traction to the delivery of modernisation activity a number of sub-committees have been established including workforce, quality and commissioning.

The commissioning work stream is already demonstrating positive engagement by developing relationships beyond the pathology directorates in each health board. Instead, the direct service users such as sexual health and infection control teams are being involved in the Service Level Agreement discussions.

Key work underway includes:

- Development of a service specification which incorporates diagnostic microbiology, infection control and infectious disease management;
- Costing exercise to provide a set of national reference costs;

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- Reviewing a set of referral pathways to assist in demand management.

These and other activities demonstrate Public Health Wales commitment to ongoing collaboration and partnership in delivering an accredited and effective microbiology service in Wales.

Delivering effective screening programmes that maximise clinical outcomes

Public Health Wales delivers seven national programmes, and coordinates the All-Wales managed clinical network for antenatal screening. Each programme is informed by evidence, is consistent with priority 8 (protection from disease and early identification) in *Making a Difference* and delivered in ways consistent with the five ways of working enshrined in the *Well-being of Future Generations (Wales) Act 2015*. Several of the established programmes will undergo significant technological change in the next three years. We also need to sustain performance standards across the full range of our screening programmes and consider how best to develop and integrate additional programmes into the portfolio as screening policy develops. To assist with this we commissioned an external review of the Screening Division's structures in 2016/17, and will consider how best to implement the findings in 2017/18 and beyond.

We will continue to develop engagement with service users and continue implementation of a systems approach aimed at improving uptake, with a particular focus on targeting hard to reach communities and groups in order to support a reduction in health inequalities.

The introduction of Human Papilloma Virus primary testing within the cervical screening programme represents a paradigm shift. This approach will provide a more sensitive test and will allow us to identify women requiring treatment more effectively than we can at present. These changes will deliver significant and enhanced benefits, such as increasing quality and effectiveness (including cost effectiveness) and improved service user experience, in line with the principles of prudent healthcare.

We will continue to adopt a phased approach to the introduction of Human Papilloma Virus testing, and we will implement a pilot of primary screening in 2017. The results of the pilot will be used to inform the full roll out of primary testing and we will then work with our Health Board partners to determine the optimal configuration of cervical screening laboratory services.

We are planning for the introduction of Faecal Immunochemical Testing in the bowel screening programme. Indications are that this test, which is more sensitive and more acceptable to the public than the current faecal occult blood test, will significantly enhance the role played by Bowel Screening Wales in reducing mortality from colorectal cancer in future

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years. Achieving this aim will result in increasing demand for diagnostic colonoscopy throughout Wales, and we will work in partnership with local health boards to develop this.

Antenatal screening for Downs syndrome will be refined by the introduction of non-invasive prenatal testing (NIPT) for women with a high risk initial screening result. The improved specificity of the test will result in fewer diagnostic amniocenteses, with reduction in the risk of miscarriage as a result. Delivery of antenatal screening forms part of the package of antenatal care provided by Health Boards. Antenatal Screening Wales is leading the planning and coordination of NIPT implementation across Wales.

Diabetic Eye Screening Wales became part of Public Health Wales in April 2016. We will continue to develop the programme in line with best practice, for example, by establishing the necessary fail-safes and informatics infrastructure to enable the safe introduction of risk based screening intervals within the programme. This will ensure that resources are targeted at those at greatest risk without reducing the effectiveness of the programme in people at lower risk of sight loss, and provide capacity for the expected increasing number of people with diabetes in Wales in future years.

Breast Test Wales converted its analogue equipment to a fully digital platform in 2011-12. Our planned schedule of equipment replacement will begin during the period of this plan, in 2018/19, and continue until 2021/22.

Further technological developments across the full range of programmes will act as a key driver to the way screening services are both delivered and managed over the coming years. This will include the development of:

- digital platforms to develop more flexible and innovative solutions to the way people interact and use our services and
- a common informatics platform for all programmes to improve effectiveness and increase efficiencies

At the same time we will work with the NHS Wales Informatics Service to implement a new Cervical Screening Informatics Service to replace the current 'Exeter system'.

3.6.6 Strategic Objectives

The strategic objectives that will be the focus of delivery of this priority over the next three years are as follows.

Strategic Objective 6A			
	2	3	4
By the end of 2019/20 we will have a fully integrated Public Health Services Directorate.			
What success will look like by the end of 2019/20			
- We will work as one team unless there are advantages to retaining specific work streams. - We will deliver high quality integrated services that exploit new technology and meet or exceed performance targets (see supporting trajectories detailed in the Appendix). - We will deliver an integrated business management unit working across the directorate. - Opportunities with social enterprises, academic and commercial partners are fully exploited to maximise returns in public health outcomes, increase research collaboration and generate income. - Working collaboratively, sharing best practice and undertaking joint research within Public Health Wales and with partners.			

By the end of Year 1	2017/18
Milestones	
- By the end of 2017/18 we will be working as a single fully integrated Directorate capable of delivering all its services with a minimum of duplication. - Production of proposals to develop a commercial unit.	
The action we will take to achieve this	
- Establish effective mechanisms for staff and stakeholder engagement in the integration process of functions across the Directorate (Quarter 1). - Ensure that consistent approaches to risk management are embedded across all teams (Quarter 1). - Strengthen governance within the central directorate team by publishing directorate governance arrangements. (Quarter 2). - Develop proposals to inform decision making on developing commercial capabilities (Quarter 3). - Develop an options appraisal for integration of laboratory services at Magden Park, Llantrisant (Quarter 4). - Implement workforce changes in line with the directorate workforce plan (Quarter 4). - Work with informatics providers to ensure fit for purpose Information Management & Technology (IM&T) systems are in place (Quarter 4). - Develop and implement a directorate wide performance management framework so that each division monitors, reports and manages performance in a consistent manner (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
Informatics platforms to support specific service requirements (such as	

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Cervical Screening and a Health Protection case management system) will be in place.	
• Actively managed workforce plan underpinning all service development. • Implementation of proposals to develop a commercial unit subject to approval.	
The action we will take to achieve this	
• Complete directorate integration with consistent business management processes embedded over the annual operating cycle. • Following initial development work in 2016/17, produce a directorate management team development plan. • Undertake a formal review of the process of integration identifying lessons learned and benefits realised. • Produce recommendations for any changes to arrangements as a result of undertaking the formal review.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Undertake a review of integration and take forward recommendations.	

Strategic Objective 6B	2	3
By the end of 2019/20 we will have developed an Integrated Health Protection Service (combining microbiology and health protection) that will deliver a more efficient and effective response to public health threats.		
What success will look like by the end of 2019/20		
• An integrated and modernised health protection service delivering a more effective response to the detection, prevention and management of infectious diseases and non communicable hazards. • Public Health Wales working with others to act to reduce public health risks from environmental hazards • The delivery of timely and appropriate interventions for specific patients and the wider population measured through surveillance, population surveys and validated health indicators. • A reduced risk of infections within the wider community. • The impact of any outbreak in the hospital or community setting is minimised through prompt recognition and identification, appropriate testing and effective management. • Reduction of impact from food/water borne disease and environmental hazards through strengthened partnership with Local Authorities (and other stakeholders).		

By the end of Year 1	2017/18
Milestones	
• A higher profile and understanding by stakeholders of the impact of communicable disease and environmental hazard on the burden of disease in Wales. • Reductions in Healthcare Associated Infection to meet new Welsh Government targets in NHS Wales. • Reduction in levels of community communicable disease. • Alignment of Health Protection and Microbiology staff.	

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- An integrated service supporting outbreak management in hospital and community settings.
- Designed and implemented an All Wales Acute Response (AWARe) system for Wales.

The action we will take to achieve this

- Establish project board and engagement process for delivery of All Wales Acute Response (AWARe) system for Wales (Quarter 1).
- Undertake and evaluate pilots of the AWARe system (Quarter 2).
- Implement an enhanced model for surveillance and analytical support, including web based survey tools (Quarter 2).
- Facilitate increased joint working between Health Protection and Microbiology staff (Quarter 3).
- Working with stakeholders co-produce an infectious disease system for Wales (Quarter 4).
- Establish an operational model for delivering an integrated infection service for regional delivery reflecting local need (Quarter 4).
- Support Welsh Government to implement recommendations from 'Air Quality and Noise Management in Wales' consultation, raise awareness and develop guidance for action for the NHS and wider public health community (Quarter 4).
- Finalise development of a case management system (Quarter 4).
- Establish, with partners, consensus and systems to evidence and reduce premature deaths related to alcohol and drug poisonings (Quarter 4).
- Implement national surveillance system for blood borne viruses including HIV from screening to treatment outcome to reduce rates of related liver disease (Quarter 4).
- Completed reviews of sexual health and HIV prevention services as requested by Welsh Government (Quarter 4).
- Support the roll out of prison health services in new prison in North Wales (Quarter 4).
- Provide leadership for the Hepatitis C treatment programme and input to the liver disease implementation group (Quarter 4).
- Refresh the all Wales TB working group and produce and publish a TB control strategy for Wales (Quarter 4).
- Contribute to the Food Standards Agency (FSA) review (UK wide review) regards future regulation of food business in Wales (Quarter 4).

By the end of Year 2

2018/19

Milestones

- Measurable reduction in antimicrobial prescribing and Healthcare Associated Infection rates.
- A modernised workforce focused collectively on infection control priorities.
- Further improvements to the AWARe system.

The action we will take to achieve this

- Evaluate AWARe including conduct an external stakeholder survey.
- Agree local work plans with stakeholders to support prudent prescribing and reduction in Healthcare Associated Infection.
- Implement relevant findings and recommendations from the review of sexual health services.
- Support the implementation of relevant findings from the review of food industry regulation.
- Quantify and support implementation of policy recommendations to reduce community-acquired healthcare associated infections

Part 3 – Our Strategic Priorities

- Develop in partnership implementation plans for TB control across the NHS.

By the end of Year 3

2019/20

The action we will take to achieve this

- Deliver relevant and timely surveillance outputs to support needs assessments, evaluation of interventions and outbreak detection.
- Undertake benefits realisation and stakeholder analysis at the conclusion of service redesign.
- Design and support a research programme that better evidences the impact of risk factors and increased burden amongst those with protected characteristics in relation to communicable and non-communicable disease.

Strategic Objective 6C

2

3

By the end of 2019/20 we will have developed a high quality, all Wales microbiology network, based on a three region model managed by Public Health Wales.

What success will look like by the end of 2019/20

- A microbiology service regarded as a valued partner in delivering Infection Prevention and Control by all Health Boards.
- A sustainable workforce based on functionality delivered by a multidisciplinary team.
- An integrated Health Protection Service (see 6B) that brings together high quality clinical and technical expertise and is underpinned by the application of current and emerging diagnostic technology.
- An all Wales managed microbiology service network that is ISO 15189 and ISO (FWE) (2012) accredited.
- A Microbiology service that is delivered through the use of molecular technology and next generation sequencing (subject to funding).
- Completion of the first business cycle of the new national managed service for evaluation by NHS Wales.

By the end of Year 1

2017/18

Milestones

- An agreed future vision of Microbiology services for Wales based on an agreed set of roles and functions and aligned to national priorities for infection prevention and control and the management of infectious disease.
- Established regional arrangements for implementing the necessary service developments to support the delivery of an all-Wales managed Microbiology Network.
- Design of governance arrangements for an all-Wales service network, working with health boards and other partners so that it meets with the needs of the NHS in Wales.
- Work in partnership with health boards and other local stakeholders to ensure that the service specification is fit for purpose and that service improvements are achieved and maintained.
- Redesign workforce requirements based on planned service change and specifications. This will deliver a service using a workforce with the required competency, roles and functions to meet the needs of our partners and population.
- With partners, develop detailed proposals for an Infectious Disease service to

Part 3 – Our Strategic Priorities

support stakeholders across Wales. • A set of evidenced performance measures based on the Trust Quality & Impact Framework to provide assurance to service providers on the quality and delivery of the Microbiology service. • A change in emphasis with regard to the Service Level Agreements bringing in a greater clinical focus and involvement of Microbiology service users.	
The action we will take to achieve this	
• Working with partners, undertake engagement and option appraisal events to establish an agreed vision of Microbiology services for five and ten years into the future (Quarter 4). • Active management of innovative national recruitment initiatives to stabilise medical (and non-medical) consultant workforce (Quarter 1 and ongoing). • Using the workforce plan, implement agreed actions to develop career opportunities across all grades including MLA, Associate Practitioners, BMS, Clinical Scientists and Consultant Healthcare Scientists (Quarter 2). • Conclude a baseline and gap analysis and make recommendations on the all-Wales laboratory service description for microbiology (Quarter 3). • Consult on the development of a clinical specification for the all-Wales Microbiology and Infection service (Quarter 2). • Initiate discussions with Health Boards regarding the provision of Clinical Infection management services (Quarter 1). • An all-Wales staff engagement exercise has already started with communication to both PHW and non-PHW staff about how we are to explore future service design together. This is ongoing (Quarter 1). • Initiate the service review of Microbiology laboratory functions in Quarter 2 (sequence of review to be informed by the outcomes of the gap analysis of service description). • Building on current dialogue, develop formal regional engagement and delivery mechanisms (North Wales, Mid and West Wales, arrangements for South East) (Quarter 2). • Initiate discussions with stakeholders (Deaneries in England and Wales, Health Boards in Wales) regarding the development of combined Infection Training for clinical staff (Quarter 2). • Further develop a genomics led Healthcare Associated Infection service in Quarter 2 (subject to funding) in conjunction with health boards and aligned with the Genomics for Precision Medicine strategy due to be published by Welsh Government in Spring 2017. • Evaluate molecular diagnostics in expanded service diagnostics (Quarter 3 and ongoing). This will build on the existing proposals for an all-Wales Serology and Molecular Diagnostics network. • With stakeholders develop and deliver option appraisals on the delivery models for Microbiology services (Quarter 4). • Establish a mechanism through the NHS Collaborative for developing a fit for purpose commissioning model for the service (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• First year of operation of the all-Wales microbiology and infection service network. • Service review completed with recommendations delivered to the Board whilst informing the National Pathology Programme Board and National Pathology Collaborative. • Consolidate genomics provision with the production of service development	

Part 3 – Our Strategic Priorities

proposals aligned with available resources.	
Implement the agreed delivery arrangements in the three regions in collaboration with stakeholders.	
The action we will take to achieve this	
- Further funding applications submitted the Welsh Government Genomics Strategy Group to develop and roll out the genomics service (primarily training and revenue expenditure). - Delivery of a complete genomics led Healthcare Associated Infection service that is coordinated throughout Public Health Wales initiatives in conjunction with stakeholders and health boards. - Substantial progress with senior and consultant-level appointments all filled with succession plans in place. - Exploit income generation opportunities identified in Year 1. - Continue to review the provision of Microbiology services in the North following consolidation of service. - Targeted stakeholder engagement in the development of the genomics service.	
By the end of Year 3	2019/20
The action we will take to achieve this	
Continue to develop the genomics service aligned with our investment plans.	

Strategic Objective 6D	3	4
By the end of 2019/20 we will have ensured that all our screening programmes are using the best available technology to maximise clinical outcomes with embedded service user engagement, and continue to meet or exceed national clinical and timeliness standards.		
What success will look like by the end of 2019/20		
- Routinely meeting or exceeding national standards in service performance. - Improved uptake, user engagement and reduced inequalities in uptake. - Implementation of risk based screening intervals in Diabetic Eye Screening Wales. - Replacement of the Faecal Occult Blood test by Faecal Immunochemical Testing in Bowel Screening Wales. - Full implementation of testing for Human Papilloma Virus as the primary screening test in Cervical Screening Wales.		

By the end of Year 1	2017/18
Milestones	
- Continued planning for major service changes to take place in 2018/19 including modernised tests and modifications to current programmes to improve outcomes. - Sustained achievement of timeliness standards within the programmes. - Improved service user experience, engagement and uptake. - Improved failsafe for Diabetic Eye Screening Wales.	
The action we will take to achieve this	
Develop a plan to implement the actions arising out of the external review of screening commissioned in 2016-17 (Quarter 1 and 2)	

Part 3 – Our Strategic Priorities

• Implement pilot of HPV primary testing in Cervical Screening Wales. (Quarter 1) • Implement the outcome of the Newborn Hearing Screening Wales financial benchmarking exercise (Quarter 1) • Plan the introduction of HPV primary testing in Cervical Screening Wales (Subject to agreement on funding flows) (Quarter 4) • Plan the introduction of FIT testing in Bowel Screening Wales (subject to agreement on funding flows) (quarter 4) • Plan and coordinate the introduction of NIPT in Antenatal Screening (Quarter 4) • Plan the introduction of risk based Diabetic Eye Screening (Quarter 4) • Implement actions to improve access to screening for service users with sensory loss (Quarter 2/3) • Support Health Boards to implement successful interventions to improve uptake from evaluated pilots in primary care clusters (Quarter/2/3) • Carry out procurements required for Bowel Screening Wales post-FIT primary testing (Quarter 4) • Develop robust failsafe system for the Diabetic Eye Screening Programme. (Quarter 2) • Replace the Breast Test Wales Picture Archiving Communications System (PACS) (Quarter 1/2)	
By the end of Year 2	2018/19
Milestones	
• Fully implement Human Papilloma Virus primary testing. • Fully implement Faecal Immunochemical Testing. • Fully implement risk based diabetic eye screening intervals.	
The action we will take to achieve this	
• Continued implementation of recommendations from external review of Screening carried out in 2016/17. • Replace Breast Test Wales mammography sets in West Wales. • Introduce primary HPV testing in accordance with developed plan and in line with national policy. • Implement Faecal Immunochemical Testing in Bowel Screening Wales. • Implement risk-based screening intervals in Diabetic Eye Screening Wales. (Subject to receiving ministerial approval in 2016-17). • Implement new cervical screening [NHAIS ('Exeter')] informatics system • Plan and implement additional screening programmes in line with Welsh Government policy.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Undertake benefits realisation and stakeholder analysis of implementation of the findings of the external review of screening carried out in 2016-17 • Undertake benefits realization and stakeholder analysis of programme changes introduced in year 2 • Replace Breast Test Wales mobile units in West Wales • Replace Breast Test Wales mammography sets in South East Wales • Work with Health Boards to increase colonoscopy capacity to allow increase in the sensitivity of FIT test in BSW • Develop colposcopy service model following implantation of HPV primary testing • Continued implementation of successfully piloted interventions to improve uptake and reduce inequalities in uptake	

— Part 4 —

Our ways of working



4.1 Strategic Priority 7

Developing the organisation to be the best it can be

4.1.1 Why this is a strategic priority

The Well-being of Future Generations (Wales) Act 2015 sets the foundations for how we will effectively work to deliver our six public health priorities. We are using the Act, particularly the Sustainable Development Principle and its five ways of working, as the basis for how we will **develop the organisation to be the best it can be** over the next three years. This will involve challenging our traditional ways of working to look for innovative ways to successfully deliver our six public health priorities, along with our Well-being Objectives.

We will ensure that the ways we work allow us to collaborate and innovate across Public Health Wales and with our partners. This will involve us challenging, and in some cases redesigning, our systems and processes to place the five ways of working at the heart of '**what we do and how we work**'. As a result, we will embrace the opportunity for **collaboration, involve** the public and our partners in what and how we do things, work in more **integrated** ways and focus on delivering **preventative action** that leads to **long term** improvements.

A number of drivers have helped to shape and inform the direction of this priority. They have included the:

- **NHS Wales Staff Survey**
- **Review of our public and service engagement**
- **Baseline of our readiness to embrace the Well-being of Future Generations (Wales) Act 2015**
- **Service specific reviews undertaken (e.g. external review of our screening services)**

These reviews and surveys have helped us to better understand, and identify, key issues that we need to address to develop our organisation over the next three years. They show the progress we have made since we agreed this priority and provide us with a 'road map' for how we will further develop Public Health Wales to be the '**best we can be**'.

The strategic objectives and actions set out below set out how we will transform our ways of working and doing business to make us an organisation that is able to innovate and work across boundaries to deliver at pace.

4.1.2 What we are trying to achieve

By the end of 2019/20 we will be communicating and engaging effectively with the public and our partners, and utilising technology to its full potential.

Communications and engagement are key enablers in helping us to achieve our commitment to the people of Wales. Through our **Communication and Engagement Strategy** we aim to adopt a proactive approach to communicating and engaging with stakeholders to build positive relationships. We will do this by utilising the latest tools and new technologies, including transforming our existing website, to enable effective collaboration with partners and help build proactive relationships with the public.

By the end of 2019/20 we will be utilising information technology to its full potential.

Through the development of our **Digital Strategy**, and the subsequent **Strategic Outline Programme**, we will provide first class IT systems and services to staff to support them to deliver our strategic priorities and objectives. This will ensure that we are delivering solutions driven by business need that support and enable the delivery of our strategy and priorities.

By the end of 2019/20 we will have developed workplaces for staff that support effective collaboration and are exemplars for meeting the challenges of the Well-being of Future Generations (Wales) Act 2015.

The **Our Space Programme** aims to align flexible working practices, new technology and the organisation's strategy to enable Public Health Wales to move toward developing a modern, sustainable workplace. During 2016, we delivered No 2 Capital Quarter: a modern, fit-for-purpose office environment for 500+ staff in South East Wales that evidences how public bodies can work differently to secure public value.

Over the next three years we will complete the future phases of the Our Space Programme across Wales using this blueprint, focussing more and more on collaboration, sustainability and public value outcomes.

By the end of 2019/20 we will be delivering improvements in outcomes based on robust integrated plans that we have developed and will deliver with our partners.

We will further strengthen and develop integrated **planning and performance management** within the organisation, and where possible with our partners, particularly in relation to developing integrated Well-

Part 4 – Our ways of working

being objectives and the alignment of resources to support effective delivery. This will include ensuring we have a clear focus on outcomes and quality, and adopting a strategic approach to financial planning so we put our resources in the right places and are delivering effectively.

By the end of 2019/20 we will have a sustainable, diverse and healthy workforce that is equipped with the skills needed to support the delivery of our strategy.

From a people and organisational development perspective, that over the next three years we undertake actions that focus on attracting great people, growing our skills and training, creating a modern workplace, and establishing a diverse and healthy workforce. This will be underpinned by getting the basics right, including the development of a 10 year workforce plan.

By the end of 2019/20 we will be a high performing, high quality and safe organisation that effectively uses knowledge as part of our continued commitment to improvement.

Over the next three years we will continue to strengthen our arrangements and approach to **quality**. We will do this by creating environments where people who work for us are encouraged to be ambitious and passionate about making a difference. This will be through the implementation of our **Quality and Impact Framework**, and development of an Improvement Hub. As part of this approach, we will ensure knowledge is used to best effect in delivering the actions set out within this plan. We intend to be an exemplar organisation that utilises knowledge and research evidence in our decision making processes.

By the end of 2019/20 we can demonstrate we have effective governance arrangements that ensure a focus on long term decision making and effective partnership working, including with the public.

We will continue to strengthen and develop our **governance** arrangements, including implementing a best practice corporate governance framework across the organisation that will enable a more integrated approach to corporate, clinical and information governance and risk management. We will also ensure that we are clear when making decisions with partners that we have the right governance arrangements in place. This will support and enable effective long term decision making that allows us to effectively deliver, in partnership, the ambitious actions set out within this plan.

4.1.3 The action we will take

Strategic Objective 7A	
By the end of 2019/20 we will be communicating and engaging effectively with the public and our partners and utilising technology to its full potential.	
What success will look like by the end of 2019/2020	
- We will have adopted a positive and proactive approach, including the use of digital communication, to communicate and engage with our stakeholders. - We will improve communications skills across the organisation to allow the corporate communications team to focus on strategic and specialist work. - We will have built sustained relationships with the public and stakeholders that lead to positive engagement and are mutually beneficial. - We will have developed a clear and consistent corporate identity for Public Health Wales. - We will be utilising all the communications and engagement tools available to us to achieve our goals.	
By the end of Year 1	2017/18
Milestones	
- Communications training for staff across the organisation is developed and rolled out. - We will have clear plans in place to engage stakeholders and the public in the design of our communications campaigns. - We will evaluate branding work undertaken previously and be able to demonstrate improved recognition of our branding. - We will undertake an annual audit of the range of communications channels.	
The action we will take to achieve this	
- Evaluate the corporate communications and engagement strategy, make recommendations for improvement and revise the current document (Quarter 2). - Provide strategic communications support to the campaign to ensure Public Health Wales staff are vaccinated against flu (Quarter 3). - Conduct and implement a review of the engagement, communications and web resource across the organisation (Quarter 1). - Provide communications support to the Planning and Performance Team around the development of the next three-year organisation strategy, including the design and delivery of an engagement process to involve the public in our planning (Quarter 4). - Evaluate the new corporate website, including auditing traffic to the site from the public and stakeholder groups (Quarter 4). - Plan and deliver the Welsh Public Health Conference as an opportunity to engage multi-agency stakeholders on our strategic priorities (Quarter 3). - Develop and deliver a programme of internal communications work to engage staff in the implementation of the Well-being of Future Generations (Wales) Act 2015 (Quarter 2). - Write, design and publish the annual report, and take a revised approach to the planning of the annual general meeting based on learning from the previous year (Quarter 3).	

Part 4 – Our ways of working

• Plan and deliver staff conference, to engage staff in organisational priorities and to facilitate opportunities for networking and relationship building (Quarter 4). • Develop and roll out package of training to ensure continued development of staff communication skills and ensure it is embedded in the organisational Continuing Professional Development programme (Quarter 4). • Develop and implement a public affairs strategy improving our communication with politicians (Quarter 3). • Deliver health improvement campaigns (Quarter 4). • Develop, implement and evaluate a communications and engagement strategy supporting change programmes within the Public Health Services directorate (Quarter 2). • Evaluate the effectiveness of the 2016/17 seasonal flu vaccination campaign, producing recommendations to be implemented in support of the following year's campaign (Quarter 4). • Develop, implement and evaluate a communications strategy supporting the launch of the International/Global Health Strategy (Quarter 1). • Conduct research into the reputation of Public Health Wales to increase from baseline in Year 1 and review if work undertaken regarding branding review has been fully implemented (Quarter 2).	
By the end of Year 2	2018/19
Milestones	
• Staff across the organisation are enabled and empowered to undertake basic communications activities previously undertaken by the corporate team. • We will demonstrate involvement from a number of relevant stakeholders in the evaluation of our communications campaigns. • We will undertake an annual audit of the range of communications channels we are using and will reconsider our use of existing, new and emerging channels to best engage with the populations we serve.	
The action we will take to achieve this	
• Review and issue an updated Communications and Engagement strategy. • Evaluate the success of communications training across the organisation by undertaking a skills audit, and make and implement recommendations for further developing communications skills among the workforce. • Refresh the communications and engagement strategy. • Continue to evaluate the new websites. • Re-evaluate our use of social media to ensure we are taking advantage of the most up-to-date methods of engaging with the population we serve.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Refresh the communications and engagement strategy. • Re-evaluate our use of social media to ensure we are taking advantage of the most up-to-date methods of engaging with the populations we serve. • Audit of communications skills across the organisation to identify any gaps in communications training previously delivered.	

Strategic Objective 7B	
By the end of 2019/20 we will utilise information technology to its full potential.	
What success will look like by the end of 2019/20	
• We have an infrastructure that enables customers, be they citizens, professionals, staff or stakeholders to fully engage with our organisation in the manner which best suits them. • We are a digitally aware organisation that is using technology to full advantage. • We have a collaborative infrastructure, and audio-visual capabilities, that delivers information and knowledge easily to the place it's needed. • We have responsive analytics delivering information at the time and place it's needed and that works across all our systems and services. • We will have transitioned/re-developed a significant number of our specialist applications.	
By the end of Year 1	2017/18
Milestones	
• Implementation key actions from our informatics Strategic Outline Programme. • Roll out of collaboration and mobile computing services to support cross-organisational and partnership working. • Integrate specialist applications, such as Case Incident Management System, Information Bureau for Infectious Diseases and Cervical Screening Information Management System, within Public Health Wales Applications & Information Management Service and produce realistic plans to migrate other systems. • Proposals for development and utilisation of business intelligence tools.	
The action we will take to achieve this	
• Develop plans for Business Intelligence systems and services following the review of information systems (Quarter 4). • Scope the requirements for a Customer Relationship Manager system to support the NHS Wales' digital health and social care strategy (Quarter 4) • Undertake further development of the Cervical Screening Information Management System (Quarter 4). • Develop and implement full informatics service management processes integrated with the Informatics Steering Group (Quarter 4). • Rollout electronic GP tests results for selected screening programmes (Quarter 4). • Implement further electronic workflows to increase efficiency (Quarter 4). • Expand mobile computing services as part of implementation of the Digital Strategy (Quarter 2). • Undertake a process to rationalise our technical infrastructure (Quarter 3). • Implement text/email to patients services from screening management systems (Quarter 4). • Continue to rollout collaborative services (Quarter 4). • Upgrade our audio-visual capabilities to further enhance training and engagement activities (Quarter 4). • Deploy servers within the NHS Wales 'DMZ' (infrastructure that supports internet facing services) to improve our external (to NHS Wales)	

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collaborative capabilities (Quarter 3). • Develop Document Disaster Recovery and resilience processes as part of our business continuity arrangements (Quarter 2). • Upgrade all staff to Microsoft Office 2010/2013 or above (Quarter 3). • Build effective informatics training services (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• Develop a pathway for integrated business intelligence and customer relationship management requirements fed by in-house data sources and connected to external sources. • Continue to develop internal and external publication and collaboration services and expand our audio-visual capacity. • Continuous evaluation of our product range to determine if it is fit-for-purpose. • Further re-develop/transition our specialist systems and services to the Public Health Wales Applications & Information Management Service. • Transition all mobile applications to the new mobile service. • Continue to transition staff to in-house support. • Enable cloud services where they provide opportunities to increase our effectiveness, enhance our online security and offer opportunities for decreasing costs. • Continue to evaluate new and emerging technologies.	
The action we will take to achieve this	
• Continue to rollout electronic GP tests results. • Undertake further development of mobile solutions across Public Health Wales. • Further rollout text/email to patients services from screening management systems. • Open up, in concert with nationally developed services, our systems for patient self-service. • Re-evaluate our collaborative and office services. • Continue the rationalisation programme of our IT infrastructure and focus on the opportunities emerging as a result of NHS Wales' initiatives in the cloud. • Build the infrastructure for the development and implementation of the Business Intelligence and Customer Relationship Manager services.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• In concert with the service units, implement Business Intelligence. • Implement the Customer Relationship Manager services. • Complete IT infrastructure rationalisation and have plans for deployment of cloud services. • Identify and deploy new/updated collaboration and office products. • Continue to transition all specialist systems to the new Public Health Wales Applications & Information Management Service. • Re-evaluate our collaborative and office services, continue the digital strategies innovate work stream based on a solid and sustainable platform. • Continue the rationalisation programme of our IT infrastructure focussing on the opportunities emerging as a result of NHS Wales' initiatives in the cloud.	

Strategic Objective 7C	
By the end of 2019/20 we will have developed workplaces for staff that support effective collaboration and are exemplars for meeting the challenges of the Well-being of Future Generations (Wales) Act 2015.	
What success will look like by the end of 2019/20	
• We have successfully reconfigured our office estate. • Public Health Wales has demonstrated its reduced environmental impact. • Service users and staff enjoy safe and secure environments. • We have a clear understanding of how we can improve our services through the use of digital technology.	
By the end of Year 1	2017/18
Milestones	
• Swansea office reconfiguration completed. • Dedicated facilities function established. • Public Health Wales understands its environmental impact. • We have an improved web presence.	
The action we will take to achieve this	
• Ensure baseline assessments are in place to underpin the main pillars of the Sustainability Action plan e.g. energy waste, consumption and travel and have in place a range of mechanisms to plan and track progress (Quarter 1). • Track and monitor the organisation's sustainability performance against a range of agreed sustainability targets and make changes as appropriate (Quarter 4). • Complete a review of North Wales office accommodation and recommendations agreed by Executive Team (Quarter 4). • Complete the move of staff from Oldway Centre, Swansea and the Screening Administration Staff, Carmarthen, to new office accommodation in the Swansea area (Quarter 2). • Throughout the year to have tracked and monitored the benefits realisation plan (Quarter 4). • Establish a dedicated Facilities function with a populated staffing structure (Quarter 1). • Achieve 100% statutory compliance and to have achieved the agreed actions within the estates action plan (Quarter 4). • Complete the agreed actions within the Health & Safety Action Plan (Quarter 4). • Agree way forward on a Corporate Planning Framework development which will facilitate the development of the next 3-year Integrated Medium Term Plan (Quarter 1). • Complete the functionality & content of Public Health Wales website within the all Wales content management system (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• Phase 2 Our Space completed. • Decision made over Phase 3 of Our Space.	

Part 4 – Our ways of working

- Public Health Wales has a better understanding of our environmental impact and sustainability strategy has been implemented.
- Selected digitalised services have been introduced through the new website.

The action we will take to achieve this

- By March 2018 to have reconfigured office accommodation in Carmarthen
- Select any new premises for office staff in North Wales with a supporting implementation plan (and project) in place by December 2018.
- Achieve full compliance on statutory estates matters on all properties in the estates.
- Embed Health & Safety awareness across the organisation and levels of statutory and mandatory training is over 95%.
- Demonstrate the organisation's commitment to sustainability through a systematic approach across estates and facilities.
- Successfully introduce selected digitalised services through the new website.
- Complete a review of the planning arrangements and made recommendations.

By the end of Year 3

2019/20

The action we will take to achieve this

- Complete changes to the North Wales office accommodation.
- Undertake and analyse a review of the benefits of the Our Space programme.
- Complete the agreed actions within the estate action plan.
- Produce/publish case studies that evidence sustainable improvement in travel, energy, and waste/consumption.
- Establish arrangements in readiness for the next three-year strategic plan.

Strategic Objective 7D

By the end of 2019/20 we will be delivering improvements in outcomes based on robust integrated plans that we have developed and will deliver with our partners.

What success will look like by the end of 2019/20

- We will have developed integrated plans with our partners, particularly around system priorities, as part of implementing the Well-being of Future Generations (Wales) Act 2015.
- We will have a performance management system with a clear focus on outcomes and quality that ensures timely and robust information is used to inform decisions.
- We will have developed robust business continuity arrangements that ensures the delivery of our key services and responsibilities under the Civil Contingencies Act.
- We will have budgets and resources aligned to the delivery of our long term strategic priorities.
- We will be delivering value for money based on a robust assessment of our programmes and services.
- We will be using financial information, through business intelligence, that help shape and inform long term decision making.

By the end of Year 1

2017/18

Milestones

- Approved Strategic Plan setting out how we will deliver our new priorities.

Part 4 – Our ways of working

• Refreshed planning approach for 2017/18 that supports the organisation to effectively deliver. • An integrated performance management system and arrangements that focus on the outcomes, impact and quality of our work. • Delivery of strategic financial programme that assesses the value and efficiency of our services. • Establishment of mechanisms to support the realignment of funding towards the delivery of our priorities for 2018 onwards. • Approved Budget Strategy which aligns budgets, operational plans and strategic priorities, including a refreshed Medium Term Capital Plan that supports delivery of our priorities for 2018 onwards.	
The action we will take to achieve this	
• Develop and agree new organisational strategy and priorities through undertaking a process of internal and external engagement (Quarter 3). • Develop new Strategic Plan for 2018/19 – 2021/22 and Operational Plan for 2018/19 (Quarter 4). • Implement revised planning process following review of current planning arrangements (Quarter 2). • Undertake review and implement revised directorate performance indicators (where required) (Quarter 4). • Undertake scoping of business intelligence tools for supporting effective performance reporting (Quarter 2). • Commence implementation of fully automated performance reporting system (Quarter 4). • Undertake Business Impact Analysis to inform the refreshing of our business continuity plans (Quarter 2). • Review and refresh Business Continuity Plans (Quarter 4). • Establishment of strategic financial programme as part of development of new Strategic Plan (Quarter 1). • Undertake value for money review of our service and programmes, including benchmarking against similar services where possible (Quarter 2). • Establish financial decision making model to support realignment and allocation of funding to delivery priorities for 2018 onwards (Quarter 3). • Develop new charging mechanism for microbiology tests which reflects testing costs (Quarter 1). • Undertake a review of procurement and wider commissioning across the Trust (Quarter 2). • Develop fully costed options for remaining phases of Our Space (North Wales and West Wales) (Quarter 3).	
By the end of Year 2	2018/19
Milestones	
• Approved Strategic Plan and refreshed Operational Plan. • Production of high quality unqualified Annual Accounts. • Complete budget setting for 2019/20.	
The action we will take to achieve this	
• Finalise implementation of fully automated performance reporting system (subject to scoping exercise). • Fully implement quality assurance arrangements within business intelligence tool. • Development of refreshed Strategic and Operational Plan. • Undertake annual review of business continuity arrangements.	

Part 4 – Our ways of working

• Refresh financial plan and capital plan. • Production of Trust Annual Accounts within timetable and to high level of quality.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Development of refreshed Strategic and Operational Plan. • Undertake annual review of business continuity arrangements. • Undertake assessment of organisational Business Continuity arrangements against International Organisation for Standardisation (ISO) standards in advance of seeking formal accreditation.	

Strategic Objective 7E	
By the end of 2019/20 we will have a sustainable, diverse and healthy workforce that is equipped with the skills needed to support the delivery of our strategy.	
What success will look like by the end of 2019/20	
• We will have robust workforce strategies, which support our and development of the broader Public Health System. • We will have implemented an Organisational Development Strategy that supports and drives performance improvement across all organisational levels and staff groups. • We will have achieved the Platinum Corporate Health Standard, and enhanced our Health & Well-being offering for staff. • We will have a clear strategy for recruiting and attracting the best talent. • We will have supported delivery of consistent organisational operating model and have helped deliver a constructive organisational culture.	
By the end of Year 1	2017/18
Milestones	
• We have implemented an Apprenticeship programme in support of the Apprenticeship Levy. • We have implemented Electronic Staff Record Self Service. • We have a recruitment strategy that responds to organisational challenges. • We have provided resource to commence implementing the Welsh Language Standards.	
The action we will take to achieve this	
• Finalise a 10 year Public Health Wales Strategic Workforce Plan (Quarter 4) • Develop an annual recruitment plan utilising data from the strategic workforce planning process (Quarter 3). • Use staff survey results to drive organisational improvements (Quarter 4). • Map and publish the career structures for key professional groups (Quarter 2). • Conduct a review of our current and target organisational structures (Quarter 4). • We will develop a People and Organisational Development performance dashboard (Quarter 2). • We have a clear plan to embed values across the organisation and reward values aligned behaviour (Quarter 1). • We have a succession pipeline for key roles (Quarter 3).	

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• We have established an ongoing method of oversight and secured dedicated resource in support of Welsh Language and Equality requirements (Quarter 4). • We will establish and deliver an organisational framework to maximise the benefits associated with the introduction of the Apprenticeship Levy (Quarter 2). • We will implement an employee development cycle and offering, focusing on professional, leadership and staff development (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• We will develop and employer Brand / employee deal. • We have defined and implemented an organisational approach to change management. • We will influence creation of a consistent organisational operating model. • We will achieve recognition of our staff health and well-being work through attaining the Gold Corporate Health Standard.	
The action we will take to achieve this	
• Fully implement our approach to Talent and Succession Management across all divisions. • Review learning and development provision against strategic workforce plans. • Implement a Public Health Wales approach to people change management. • Conduct a review of recruitment and drive improvement in reducing the number of “hard to fill” posts. • Review succession plans to ensure adequacy of supply for identified key roles. • Conduct a review of staff health and well-being initiatives, to understand the value placed on the initiatives by staff. • Welsh Language is embedded in everything we do. • We implement a process to deliver engagement with our Strategic Equality Plan.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• We will have developed a coaching and manager-led Human Resources culture. • People & Organisational Development focus will be on strategic, value adding interventions. • We will have enabled this through simplified policies and processes, and manager development. • We will have explored delivering transactional activity through a shared service model. • We will achieve recognition of our staff health and well-being work through attaining the Platinum Corporate Health Standard.	

Strategic Objective 7F

By the end of 2019/20 we will be a high performing, high quality and safe organisation that effectively uses knowledge as part of our continued commitment to improvement.

What success will look like by the end of 2019/20	
• Our staff will be supported to maintain any professional requirements and to optimise their relevant career pathways to realise their full potential. • Our Quality and Impact Framework will provide evidence, through key quality performance indicators, that we are a quality driven organisation. • Our staff are actively engaged in research, and have gained the necessary skills and confidence to undertake research, and to evaluate public health programmes and services, and disseminate their findings. • The appropriate use of knowledge in decision-making, particularly in the development, approval and implementation of programmes and projects, follows a transparent process which is consistent across the organisation, where the methods and assumptions are clearly set out. • Staff are actively engaged in research and have gained the necessary skills and confidence to undertake research and to evaluate public health programmes and services and disseminate their findings. • Staff are supported to evaluate their work appropriately and learning from evaluation is proactively shared across the organisation.	
By the end of Year 1	2017/18
Milestones	
• Effective governance arrangements are in place to support professional non medical registration and revalidation of nurses, midwives, biomedical scientists and Allied Health Professionals. • Full implementation of the Career Framework for Clinical Health Care Support Workers, including the development of Level 3 and 4 diplomas. • Development and reporting by all Divisions of at least two key quality performance indicators. • Fully established quality hub with rolling programme to build capacity and capability in improvement and creating opportunities to achieve impact. • Consistent approach as to how we involve service users and the public in developing, planning, monitoring and improving services and programmes. • Defined staff training and development programme for research and evaluation. • Established mechanisms for mobilising knowledge across organisation. • Defined training and development programme for research and evaluation.	
The action we will take to achieve this	
• Develop systems and processes across the organisation to confirm the professional registration (and where appropriate revalidation) requirements for all non-medical regulated staff (Quarter 1). • Engage with Healthcare Support Workers (clinical and laboratory staff) to raise awareness of the relevant Careers Frameworks in conjunction with Organisational Development and Learning to ensure that sufficient development and training is provided (Quarter 4). • Establish a quality hub to build capacity and capability in quality improvement and create further opportunities to achieve greater impact (Quarter 4). • Continue to implement the Quality and Impact Framework (Quarter 4). • Continue to engage with stakeholders, service users and the public and work with Directorates to take forward the agreed recommendations identified within the Review of Public and Service User Engagement report (Quarter 4). • Develop and pilot a workforce training and development programme which provides flexibility in training opportunities, enabling staff to gain the	

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required research, evidence and evaluation skills, competencies and experience in ways which fit best with their learning styles and work programmes (Quarter 4). • A baseline assessment of the various elements of knowledge mobilisation (Quarter 4). • Agree & embed process changes to improve use of knowledge in decision making in Public Health Wales (Quarter 4). • Pilot the developed innovation framework (Quarter 3). • The evaluation and innovation group will continue to develop the required project plan and subsequent action required (Quarter 4). • Agree and embed organisational process changes to improve use of knowledge in decision making in Public Health Wales (Quarter 4). • Develop mechanisms for sharing knowledge, such as that arising from research, evidence review and evaluation, across Public Health Wales (Quarter 4). • Develop and pilot a workforce training and development programme which provides flexibility in training opportunities, enabling staff to gain the required research, evidence and evaluation skills, competencies and experience in ways which fit best with their learning styles and work programmes (Quarter 4). • Cross-organisational Evaluation Project Group implements Year 1 of project plan: organisational processes, support mechanisms, sharing learning (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• Effective monitoring arrangements are in place to ensure the governance of professional non medical registration and revalidation of nurses, midwives, biomedical scientists and Allied Health Professionals. • Career framework in place for Health Care Support Workers within laboratories under the Modernising Scientific Careers. • Further development by all divisions of key quality performance indicators for each relevant pillar of the quality house with regular reporting against them. • Evaluation of the training and development programme demonstrates that staff have gained and are applying research, evidence and evaluation skills • Demonstration of the appropriate and transparent use of knowledge in decision-making. • Staff have gained and are applying research, evidence and evaluation skills. • Evaluation, which is appropriate to scale and nature of Public Health Wales activity, is taking place more routinely and informs practice.	
The action we will take to achieve this	
• Develop monitoring systems and processes across the organisation to confirm the professional registration (and where appropriate revalidation) requirements for all non-medical regulated staff. • Undertake an annual audit of processes in relation to nurses/ midwives, allied health professionals and biomedical scientists." • Fully implement the relevant Healthcare Support Worker Frameworks. • Continue to implement and embed the Quality and Impact Framework and Quality Hub. • Continue to fully embed quality governance arrangements to effectively support the wider organisational governance structures. • To continue to engage with stakeholders, service users and the public so that	

we work together to co-produce/ design services, programmes and functions. • Evaluate process changes to demonstrate improved use of knowledge in decision making in Public Health Wales. • Undertake case-studies to assess the extent to which the Knowledge Mobilisation Cycle is embedded within how we work. • Continue to monitor and evaluate effectiveness of workforce training programme for research, evidence and evaluation, to ensure staff are demonstrating application of skills gained. Review and implement changes required to increase impact. • Continue to monitor and evaluate organisational processes and mechanisms for supporting evaluation and sharing learning from evaluation. Review and implement required changes to increase effectiveness.	
By the end of Year 3	2019/20
The action we will take to achieve this	
• Ensure systems and processes remain effective across the organisation to confirm the professional registration (and where appropriate revalidation) requirements for all non-medical regulated staff. • Undertake an annual audit of processes in relation to nurses/ midwives, allied health professionals and biomedical scientists. • Monitor and refine Quality and Impact measures. Consider the use of a Quality and Performance Dashboard. • Review the effectiveness the clinical and quality governance arrangements. • To continue to engage with stakeholders on a regular basis so that they co-produce/ design services, programmes and functions. • Continue to monitor process changes to demonstrate improved use of knowledge in decision making in Public Health Wales. • Continue to monitor case-studies and mechanisms for sharing new knowledge to demonstrate the Knowledge Mobilisation Cycle. • Continue to monitor and evaluate effectiveness of workforce training programme for research, evidence and evaluation, to ensure staff are demonstrating application of skills gained. Review and implement changes required to increase impact. • Continue to monitor and evaluate organisational processes and mechanisms for supporting evaluation and sharing learning from evaluation. Review and implement required changes to increase effectiveness.	

Strategic Objective 7G

By the end of 2019/20 we can demonstrate we have effective governance arrangements that ensure a focus on long term decision making and effective partnership working, including with the public.

What success will look like by the end of 2019/20

- We will have effective governance arrangements that ensure a focus on long term decision making and effective partnership working, including with the public.
- We have an integrated governance framework that best enables the delivery of our strategy.
- We are able to demonstrate that we are working in a way that is safe, legal,

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fair and transparent and accountable and meet all our legal and statutory requirements. • The Board will derive substantial assurance from audit and other reports around the performance of the Information Governance Management System. • Public Health Wales will have a risk management system which will give the Board substantial assurance around its risk management arrangements.	
By the end of Year 1	2017/18
Milestones	
• We can demonstrate that our clinical and corporate governance arrangements are effective and fit for purpose. • We can demonstrate that appropriate induction and support has been provided to the newly appointed Non-executive Directors and the Chair. • The Board is visible and accessible. • Board understand their role and have the skills to perform their role. • When working in partnership with others we have clear and robust governance arrangements in place. • Public Health Wales will process information in compliance with the requirements of the General Data Protection Regulations 2015 and establish an effective governance structure for information quality. • The risk management system will demonstrate through a Board approved maturity matrix and regular audit reports significant progress towards compliance with ISO31000.	
The action we will take to achieve this	
• Conduct a holistic review of our governance arrangements (Quarter 2). • Devise a best practice corporate governance model to enable a more integrated approach to governance incorporating corporate governance, information governance, clinical governance and risk (Quarter 4). • Develop a decision making framework for the Board and organisation taking account of the provisions of the Well-being and Future Generations (Wales) Act and the five ways of working (Quarter 3). • Develop and implement a plan of Board visibility and accessibility (Quarter 1). • Effectively manage Chair and Board member induction and transition (Quarter 4). • Agree and implement a Board Development Plan (Quarter 1). • Review existing governance arrangements with our partners and, where appropriate, devise and implement revised collaborative governance arrangements (e.g. Cymru Well Wales) (Quarter 2). • Embed policy development to include the maintenance of a policy database, accessibility of information on the internet/intranet and an awareness raising process (Quarter 4). • Development and publication of the policies required under the Information Governance Policy Framework (Quarter 3). • Development and implementation of a risk management system working towards compliance with no major non conformities when assessed against the requirements of ISO31000 (Quarter 4).	
By the end of Year 2	2018/19
Milestones	
• We can demonstrate the Board is effective in discharging its duties. • We will review Standing Orders, Scheme of delegation and any other written	

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control documents which underpin our governance arrangements. - Public Health Wales will be processing information of a consistently high quality, with a level of efficiency which meets business needs. - The Board will be able to derive substantial assurance around the performance of its risk management system as measured against the requirements of ISO31000.	
The action we will take to achieve this	
- Conduct an external review of effectiveness of the Board. - We will review Standing Orders, Scheme of delegation and any other written control documents which underpin our governance arrangements. - Devise and implement a programme for providing opportunities for under-represented groups to gain knowledge and experience of being a Non Executive Board member (similar to All Aboard pilot scheme). - Development of an Information Governance Quality Assurance programme. - A fully implemented risk management system which is effectively embedded across Public Health Wales that is compliant with ISO31000.	
By the end of Year 3	2019/20
The action we will take to achieve this	
- Reflect on the previous 2 years and the learning from the actions taken and benchmark our integrated governance arrangements against best practice. - Publication scheme developed in line with the requirements of the Re-use of Public Sector Information Act 2015. - Development of Business Continuity plans for key Information Assets. - Development of Public Health Wales wide Business Continuity exercise programme for key Information Assets.	

4.2 Our financial plan

4.2.1 Baseline position (2016/17)

Figure 4.1 shows the baseline expenditure of £112.071m by Public Health Wales Directorate and by type of expenditure. The NHS Wales Collaborative for Health, which is hosted by the Trust, is not included in these figures.

Figure 4.1: 2016-17 Expenditure Budget by Directorate

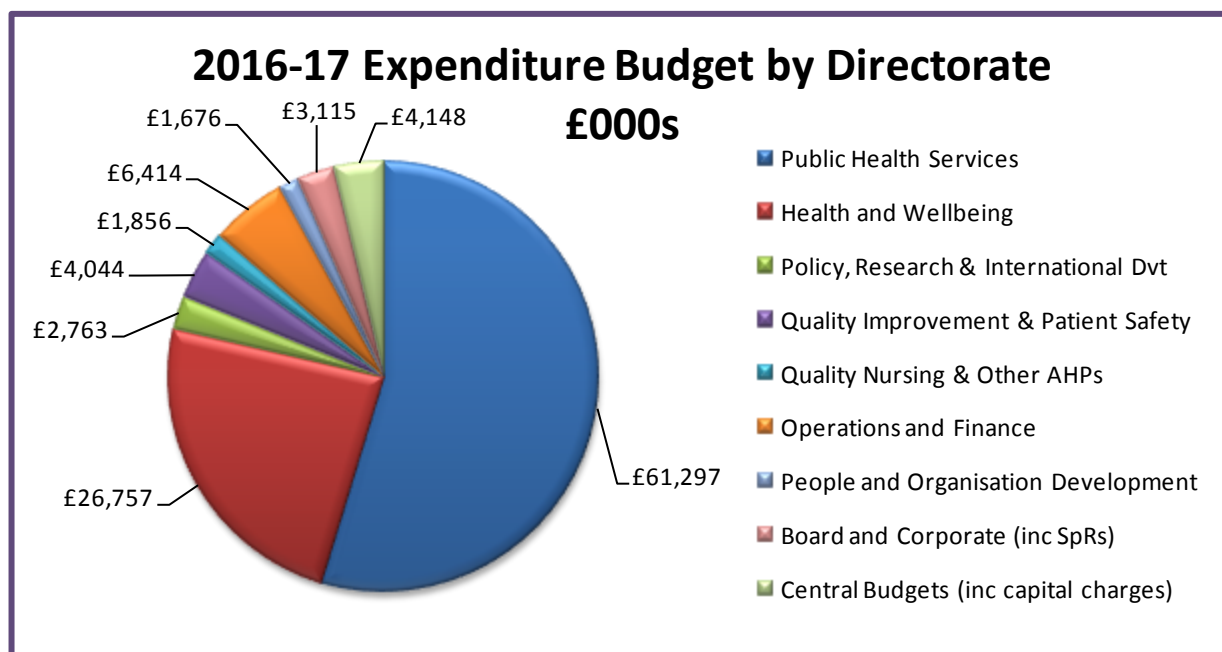
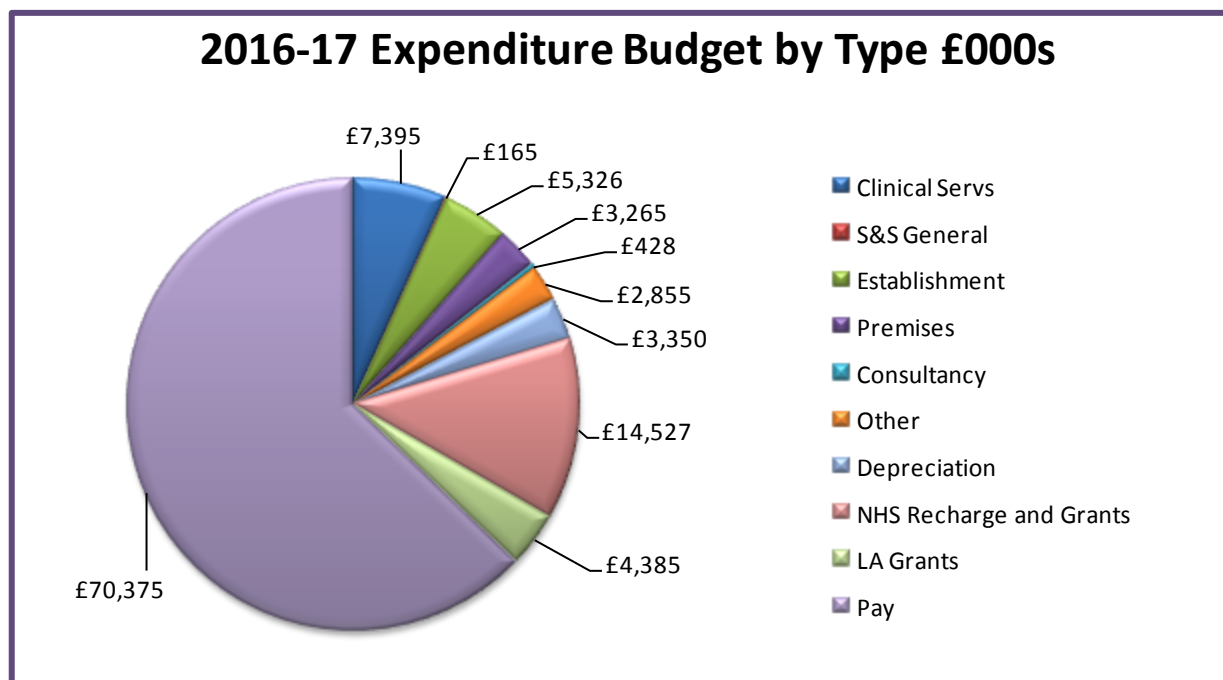


Figure 4.2: 2016-17 Expenditure Budget by Type



4.2.2 Financial planning approach

As part of the integrated approach to planning we have once again ensured that our financial planning is aligned with the Strategic and Operational Plans of the Trust. The process for developing both revenue and capital plans has been integrated into the preparation of the Integrated Medium Term Plan with no stand alone budget setting process.

A number of clear assumptions have been communicated across the organisation:

- Each Directorate was expected to demonstrate 1% efficiency reduction in expenditure
- Any internal investments or resource realignments support strategic priorities and are aligned with the Well-being of Future Generations act. They have also been assessed against the potential to generate future savings or income
- The financial plans considered the principles of Prudent Healthcare at all times
- Capital investment plans are linked to programmes, which are in turn linked to agreed priorities or supporting enablers.
- Our Strategic Priorities guide our actions and the deployment of resources, and we have directed more resources and more effort to those areas that have been prioritised

The plans to deliver on our priorities have formed a key focus of the budget setting and workforce planning process for 2017/18 and will continue to do so in subsequent years.

4.2.3 Our revenue plan

Table 4.3 demonstrates that financial plans are balanced, as part of a viable and sustainable plan.

They are set within the resource allocation and planning parameters set out in the Public Health Wales Grant Allocation Letter received on 20 December 2016.

Table 4.3: Financial Plans

	2017/18 £000s	2018/19 £000s	2019/20 £000s
Baseline budget			
Expenditure	112,072	113,812	113,812
Income	-112,072	-113,812	-113,812
Net budget	0	0	0
Cost pressures			
Pay	2,382	1,497	1,965
Non pay and Income changes	1,548	1,254	754
Total inflationary cost pressures	3,930	2,751	2,719
Welsh Government funding for pay award and prices	-1,734	-1,734	-1,734
Savings Plans	-2,196	-1,017	-985
Net position	0	0	0

4.2.4 Cost pressures

Our overall financial pressure in 2017/18 is 3.51 per cent or £3.930m. The individual elements of this are shown in the table below.

Table 4.4: Cost Pressures

	Cost Pressure £000s	Cost Pressure %
Pay inflation		
Increments	524	
Pay Award	719	
Apprenticeship Levy, Pension Admin and Auto-enrolment	410	
Other Pay pressures	729	
Non pay cost pressures	1,523	
Income Changes	25	
Total cost pressures	3,930	3.51%
Less Welsh Government funding for pay award and prices	-1,734	
Total Net cost pressure	2,196	1.96%

The pay pressure of £729k includes new posts within the newly created ACEs Hub and additional capacity within Microbiology, Primary Care and Information Management and Technology (IM&T).

In addition to inflationary cost pressures, the non pay cost and service pressures include the following service pressures:

- Breast Test Wales Picture Archive Communications System replacement
- Welsh Language standards impact
- Human Papilloma virus (HPV) test of cure roll out
- Revenue consequences of replacement of Breast Test Wales Mobile units

4.2.5 Savings

In order to cover the net cost pressure and set a balanced budget, we have agreed and implemented a savings plan of £2.196m (1.96%), as shown in table 4.5.

Table 4.5: Savings

Type of Saving	Amount £000s	%
Budget holders consuming cost pressures	1,322	
General Cost Improvement Plans	874	
TOTAL	2,196	1.96

The savings plans are a combination of pay and non pay, and have been fully risk assessed in terms of achievability and service impact.

4.2.6 Reinvestment and realignment of our resources

An element of the pay and non pay pressures are a direct result of ensuring our financial plan supports our Integrated Medium Term Plan, ensuring that resources are targeted to our priorities. These include:

- Supporting the roll out of the Human Papilloma virus (HPV) test of cure
- Developing a Adverse Childhood Experiences resource
- Ensuring that the Trust complies with the requirements of the new Welsh Language legislation
- Continuation of the modernisation review of Microbiology Services
- Continuation of the development of the Wellbeing and Future Generations Hub
- Ensuring accommodation across all locations is fit for purpose, including addressing health and safety requirements
- Additional support for Information Governance, Emergency Planning and Business Continuity

4.2.7 2017-17 Revenue Plan by Directorate

Figure 4.6: 2017-18 Expenditure by Directorate

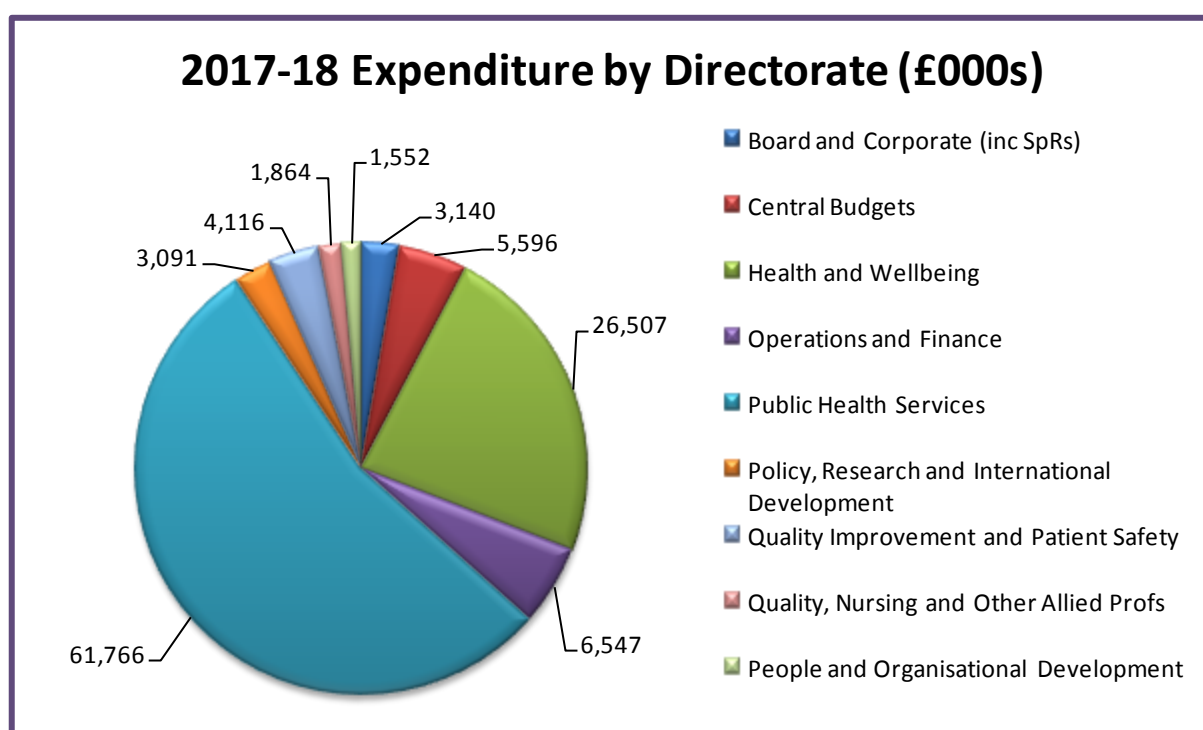


Figure 4.7: Revenue Plan by Directorate

Directorate	Income £000s	Pay £000s	Non Pay £000s	Total £000s
Income	-114,179			-114,179
Board and Corporate (inc SpRs)		3,012	128	3,140
Central Budgets		592	5,004	5,596
Health and Wellbeing		19,337	7,170	26,507
Operations and Finance		4,146	2,402	6,547
Public Health Services		37,338	24,428	61,766
Policy, Research & International Development		2,398	693	3,091
Quality Improvement and Patient Safety		3,578	537	4,116
Quality Nursing and Other Allied Profs		1,745	120	1,864
People and Organisational Development		1,206	347	1,552
Grand Total	-114,179	73,351	40,828	0

4.2.8 Financial risk

We manage our financial risk on a monthly basis. As part of the finalisation processes for the plan all savings schemes will be risk assessed and regularly reviewed.

4.2.9 Our capital plan

Our discretionary capital funding has now been increased by 50% on a recurrent basis to £1.58m for 2017/18. We have also benefited from All Wales strategic capital funding for a number of large scale programmes, in particular the Mammography modernisation programme which is now in the process of being replaced. Table 4.7 summarises the strategic capital requirements over the next 4 years.

Table 4.7: Strategic capital schemes 2017/18 to 2020/21

	FY17- 18 £000s	FY18- 19 £000s	FY19- 20 £000s	FY20- 21 £000s
Approved Capital Schemes:				
Cervical information system National Health Applications and Infrastructure Services (NHAIS) replacement	240	310		
Digital mammography replacement	360	880	2,260	2,260
Picture Archive Communication System (PACS)	300			
Unapproved Capital Schemes:				
Colposcopy and colonoscopy imaging systems				1,205
Total Strategic capital requirements	900	1190	2,260	3,465

4.2.10 Replacement of Digital Mammography

Between 2011 and 2014, the Trust received approximately £10m in strategic capital funding to enable the Breast Test Wales programme to move into digital mammography. The funding provided new mammography equipment, necessary enabling works, conversion of mobile units to include Disability Discrimination Act compliance and a Picture Archive Communication System to enable reading, reporting and transfer of images.

There is now a need to replace this digital technology and in 2016/17 the Trust received strategic capital funding to begin the replacement programme. Further funding until 2021-22 will be required to fully replace the equipment

The figure includes the final six months of the finance lease payments relating to the Picture Archive Communications System, with the expectation that the replacement system will be funded from revenue rather than capital.

4.2.11 Cervical Screening Information Management System

The Cervical Screening Information Management System project is the development of a new informatics system to support the continued delivery of the cervical screening programme in Wales, following the planned decommissioning of the existing shared Wales and England IT system from February 2017. The benefits of the new system include the ability to implement HPV Primary Screening in line with expected UK strategy, an increased capability to address capacity shortfall and improved timeliness of results to women.

4.2.12 Discretionary Capital

The draft plans for the discretionary capital are set out in table 4.8 below. There are assumptions made for a rolling IT replacement programme whilst replacement of equipment elsewhere is based upon the aged asset register.

The discretionary funding has been reduced for 2018/19 and 2019/20 as part of the funding arrangement for the fit out of No.2 Capital Quarter. In addition, any proceeds from the sale of the Temple of Peace will be used to offset this loan.

We have begun to address issues with our estate with the move to No.2 Capital Quarter, and further rationalisation and work to ensure accommodation is fit for purpose is planned for 2017/18 and 2018/19. It has been assumed that this expenditure will be contained within our discretionary funding for 2018/19 to 2021/22, however, work is ongoing

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to finalise estimates and strategic funding will be sought should expenditure be higher than anticipated.

In 2016/17, we purchased 10 Diabetic Eye Screening Wales vans as part of a planned replacement programme. The replacement programme will continue in 2017/18 with the purchase of further vans, along with associated equipment which will be purchased in 2018/19 from discretionary funds.

Table 4.8: Discretionary capital programme 2017/18 to 2021/22

	FY17- 18 £000s	FY18- 19 £000s	FY19- 20 £000s	FY20- 21 £000s	FY21- 22 £000s
IT Replacement Programme	350	350	350	350	350
Estates	525	500	350	350	350
Equipment Replacement	455	442	327	515	515
Microbiology Maldi-Tof Replacement				365	365
Abdominal Aortic Aneurysm (AAA)			265		
Diabetic Eye Screening Wales Van Replacement Programme	250				
Contingency					
Grand Total	1,580	1,292	1,292	1,580	1,580
Discretionary Funding	1,580	1,580	1,580	1,580	1,580
less Capital loan payback		-288	-288		
Discretionary Capital Available	1,580	1,292	1,292	1,580	1,580
Shortfall / (Surplus)	0	0	0	0	0

4.3 Our People

4.3.1 Overview and Strategic Context

Within our strategic priority to develop the organisation, the key element of our plan from a people perspective is to have a sustainable, diverse and healthy workforce that is equipped with the skills required to support the delivery of our strategy.

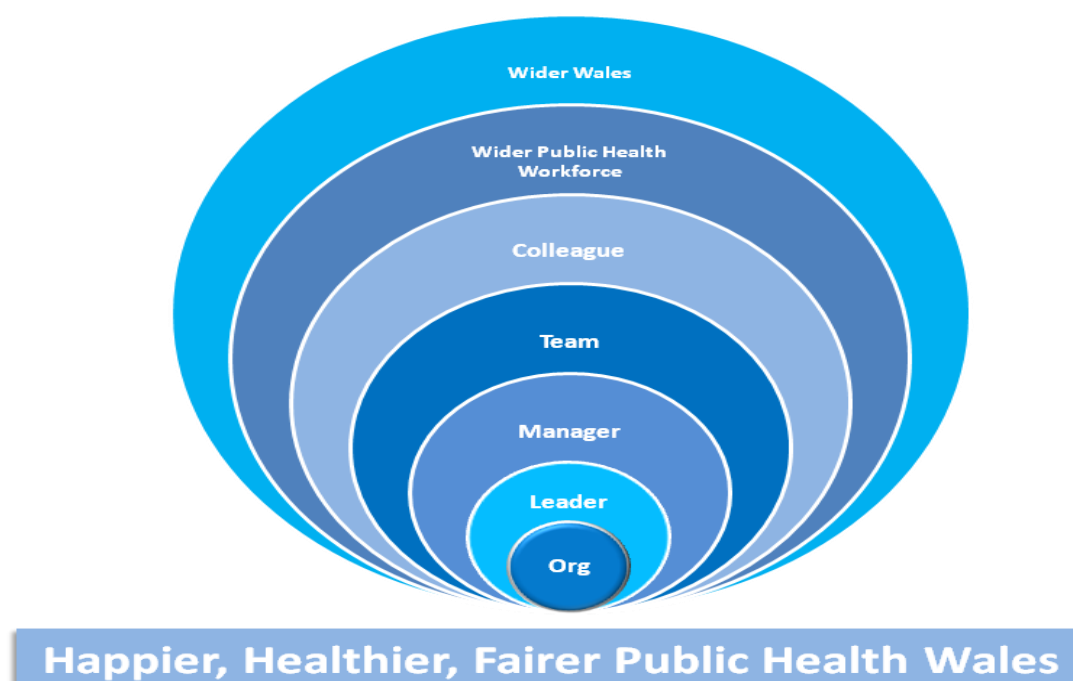
With this in mind, our aim is to create an environment in which services are provided to ensure that our employees are happy, healthy, and are treated fairly – turning the organisation’s ambition for the people of Wales inward, toward our own people.

We will undertake actions that have a focus on attracting great people; growing our skills and talent; creating a modern workplace; and establishing a diverse, inclusive and healthy workforce. This will be underpinned by getting the basics right, including the development of a 10 year workforce plan.

4.3.2 Organisational Development

The Public Health Wales strategic approach to OD spans seven separate, but interlocking levels as shown in the diagram below.

Our Organisational Development Strategy will cover how we function as an organisation (how we are structured and deliver work in support of our Strategic Priorities) as well as our organisational culture and climate, how we develop and support our colleagues and leaders to be at their best in working together and performing their roles and how we develop and grow Public Health skills and capacity across the NHS and Wales generally.



Our Staff Survey / Medical Engagement Scale Results

A key data source for defining our Organisational Development approach and plan over the course of the IMTP is our staff survey results

Our results point to some clear areas where we will focus our efforts over the course of our IMTP, and while it is too early to detail specific plans, these areas are summarised below.

In respect of recognition and feedback our survey results informed us that 59% of staff are satisfied with the recognition they get for good work and 46% with the extent to which the organisation values their work, whereas 66% of staff state that their appraisal / review left them feeling that their work is valued by the organisation, and 54% saying they get clear feedback about how well they are doing their job. Therefore whilst we have seen a marked improvement in the number of staff reporting that they have received an Appraisal (71% up from 54% in 2013) there is still clearly room to improve in helping individuals connect their work to that of the organisation and fostering a culture where individuals are openly valued and recognised for the work they do.

Building from a recognition requirement, our survey also informs us that staff report feeling less positive around opportunities to progress (32% compared with 37% in 2013) and being supported and encouraged to develop, with only 49% of staff saying there is sufficient time at work for them to complete their training and only 58% reporting that their appraisal helped them review how to improve in their job.

Whilst there are already plans in place to focus on learning and development, a clear priority is giving staff clearer support in developing and progressing their careers.

In respect of change management our survey there has been a notable movement in the percentage of staff recognising the need for change, which has increased to 76% (67% in 2013), but only 32% believe that change is well managed (up from 30% in 2013) and again this is one of our lowest scores (as it was in 2013) and how we plan and manage change will therefore be a key area of focus for us at an organisational level.

Focussing on staff health and wellbeing, there are also some areas which require further review immediately; in particular 17% of staff report having experienced harassment, bullying or abuse at work from their manager/team leader or other colleagues, with just 50% reporting that the organisation took effective action as a result and 49% of staff say that they have come to work in the past three months despite not feeling well enough (down from 59% in 2013).

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In addition to the All Wales Staff Survey, in 2016 medical staff were additionally invited to complete the Medical Engagement Scale (MES). The MES was run on a pan-Wales basis with the aim of providing a reliable and valid baseline of Welsh doctors' perceptions about the opportunities and interests they have in adopting expanded medical roles particularly with respect to the planning, design and delivery of improved patient services.

Our overall response rate to the survey was 57%, which compared favourably with rates across Wales, although the results themselves demonstrated low levels of engagement compared to other respondents.

Following discussions with members of the Joint Medical and Dental Negotiating Committee (the JMDNC), we shared the full Public Health Wales report with all medical colleagues and have confirmed our commitment to working in partnership with our Medical colleagues to understand and improve levels of medical engagement within the organisation.

Our Organisational Development Proposition

As part of our approach to defining our Organisational Development Strategy we will be hosting workshops across all organisational levels to socialise and refine our approach to Organisational Development in the first year of our IMTP and discussing / agreeing what we mean by Organisational Development in Public Health Wales and what interventions we should prioritise at which level.

Whilst our strategic approach to Organisational Development is still therefore relatively new, we already have offerings and plans as detailed below and will look to further expand and build upon these over the course of our IMTP.

Organisational Level

We have committed in our People Plan to review our Organisational Design in respect of structures and job families and are advancing these discussions through cleansing our structures with ESR. It is envisioned that this review will help us understand and improve factors such as how decisions are made and information flows in our organisation, as well as providing opportunity for us to streamline and improve services provided across our organisation by support functions as may be practicable.

We are also developing capacity to be able to understand in greater depth our organisational culture and climate, so that we can ensure the way we conduct business and behave / interact with each other internally, in conjunction with how we are structured is aligned to achievement of our Vision and Mission and Strategic Priorities.

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As an initial step in this respect, we have recently concluded work to understand and refine our organisational Values and supporting behavioural descriptions, which we will use to drive better organisational performance within a constructive organisational climate.

Leadership and Management Development Levels

Public Health Wales designed, commissioned and implemented a bespoke Leadership and Management Development Programme (the MLDP) in 2013 which has seen very positive feedback from attendees.

MLDP was rolled out to provide a critical mass of leadership and management competence across the organisation and has been delivered to leaders, managers and aspiring managers with over 400 attendees in total.

Over the course of the IMTP, commencing in 2017, we aim to refocus on management and leadership development proposition, retaining the modules for new to role managers and leaders from the MLDP which have been most impactful, whilst shifting emphasis to up-skilling managers and leaders in line with the roles and responsibilities contained within our management and leadership framework, through more practical and on the job development.

In conjunction with this change in focus we will also establish and embed an organisational approach to talent and succession planning and management and will introduce programmes to develop future leaders and aspiring managers in support of these processes, specifically linked to our strategic priorities and supporting leadership requirements.

Team Level

We have recently trained and accredited our People and Organisational Development teams in use of the Aston Team Performance models and will continue to provide support to teams across all organisational areas, tailoring our approach to meet team needs, such as newly established or merged teams, teams where there has been restructuring and so on.

In addition to this in the 2017 performance year we will work with the organisation to understand how we can better approach the formation and delivery of 'virtual teams' collaborating on organisational priorities across Directorates.

Colleague Level

At present colleague development falls into four main categories covering Statutory and Mandatory Training (Core Skills Requirements); Public Health internal workforce development; development of recognised professional groups (Allied Health Care Professionals / Health Care

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Support Workers / Nurses and Medics and so on) and a high cost approach to development in support of specific vocational qualifications.

The 2017 performance year will also see us roll out an organisational approach to colleague development, drawn from training and learning needs analysis completed as part of our workforce planning process, which will enable us to identify and prioritise broad staff development in support of key organisational skill requirements across areas such as knowledge management, research and evidence skills, network creation and systems working and project / change management.

Wider Workforce / System Level

A key priority for us as an organisation over the course of the IMTP will be to develop and grow Public Health skills and knowledge across the wider NHS and the whole public and third sector workforces across Wales. In support of this we are working with our senior leaders internally and across Public Health teams in Health Boards to start to set a strategy for how the role of Public Health will change over a 10 year period and what skills we need to provide to which individuals in order to enable this future. We will also use this work to feed into any required Government driven NHS workforce strategy.

4.3.3 Workforce Profile

Structures and Numbers

At the start of 1st January 2017, our workforce of 1,692 people, 1,493.87 full time equivalents (FTE), were deployed as follows:

Table 4.9: Deployment of staff (FTE)

Directorate / Division	Headcount	FTE	%
Corporate Services (inc. Executive Team and Board)	23	22.60	2
Health & Well-being	417	362.13	24
Hosted Services	68	61.59	4
Microbiology Division	347	313.49	21
NHS Quality Improvement / 1000 Lives	53	51.23	3
Operations and Finance	99	93.87	6
Policy Research & International Development	47	43.35	3
Health Protection	75	69.87	5
Quality, Nursing & Allied Health Professionals	28	26.7	2
Specialist Registrars	18	15.70	1
Screening Services Division	489	409.58	27
People & Organisational Development Directorate	28	23.76	2
Grand Total	1,692	1,493.87	

Grade Mix

We are a professionally rich organisation, with a large proportion of our staff graded at band 6 and above, as illustrated in figure 4.10. This is to be expected given the professional nature of our work.

Figure 4.10: Grade profile of staff in post

Pay Grade	Headcount
Medical & Dental	101
Adhoc	20
Band 9	33
Band 8d	25
Band 8c	46
Band 8b	58
Band 8a	122
Band 7	235
Band 6	285
Band 5	181
Band 4	220
Band 3	267
Band 2	96
Band 1	3
Grand Total	1,692

Age Profile

Figure 4.11 shows the age profile of our workforce.

Figure 4.11: Age profile of staff in post

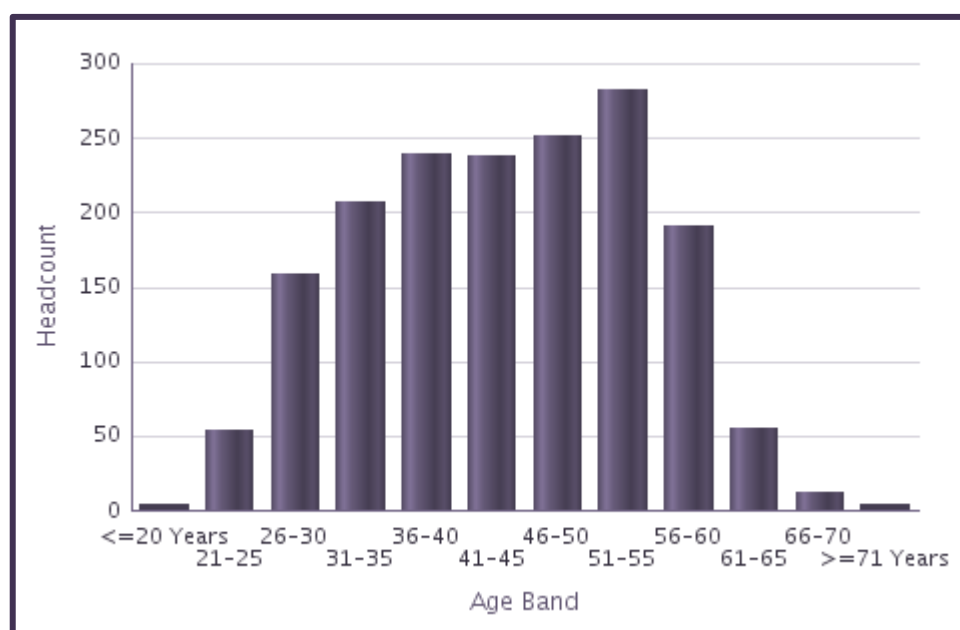


Table 4.12: Age profile of staff in post

Age Band	Headcount	FTE
<=20 Years	4	3.67
21-25	54	51.55
26-30	158	147.27
31-35	206	184.63
36-40	239	209.46
41-45	238	202.85
46-50	251	223.37
51-55	281	252.20
56-60	191	166.66
61-65	55	41.51
66-70	12	7.97
>=71 Years	3	2.72
Grand Total	1,692	1,493.87

Our Priorities

Within the aforementioned context, a plan has been developed to deliver our 5 key people priorities, and enable the organisation to deliver its vision and mission through its people.

Getting the Basics Right	Attracting Great People	Creating A Modern Workplace	Growing our Skills and Talent	Establishing a Diverse, Inclusive and Healthy Workforce
- Establishing ESR and maximising our workforce systems - Workforce plans for 3 and 10 years - Effective HR advice and case management - Better reporting of people related data - Embedding 'My Contribution' - Delivery of 'Statutory and Mandatory' training - Robust and effective management of sickness absence	- Simple, effective and timely recruitment processes - Developing our employer brand and a compelling offer to attract new talent - Embedding robust and modern recruitment practice - Delivering proactive approaches to better manage skill shortages and hard to fill posts	- Policies and practices that people want to use - Developing constructive relationships with our staff and organisation partners - Finalising and embedding values that capture and drive the culture we want to see - Responding well to staff survey results and improving how it feels to work for us	- Professional Leadership Programmes - Coaching and mentoring programmes - Mapping the professions, and working with Heads to develop career frameworks - Talent management and succession planning - Work placements and apprenticeships	- Achieving Bronze Health Standard and, over the course of this plan, Gold - Implementation of our Strategic Equality Plan - Creating a bi-lingual organisation, with thriving Welsh language culture, and readiness for the Welsh Language Standards - Driving further improvement to attendance levels through a well-being approach

4.3.4 Getting the Basics Right

Establishing Electronic Staff Record (ESR) and Maximising Our Workforce Systems

A key priority for the organisation is full establishment of Electronic Staff Record, including roll out of Manager Self Service (MSS) and Employee Self Service (ESS), to include pay-impacting changes.

The Trust aims to reach the NHS Workforce Information System (WFIS) target of 80% implementation of MSS/ESS by the end of March 2016, and will continue to drive its use and maximise its impact through the life span of this plan.

This is a challenging plan in the timescale, however, during 2015/16, the Trust has achieved 80% of areas with self service functionality available to them, as well as significant improvements in the quality of data within ESR. Current developments also include the interface with the Occupational Health system, as well as maximising the use of Business Intelligence, to inform organisational decision-making and drive performance improvements.

The Trust has also implemented the E-Expenses system and will continue to maximise its benefits.

4.3.5 Workforce Plans for 3 and 10 Years

Work was started in the final quarter of 2015/16 to build a 10 year plan for the Public Health Workforce. This work is continuing through 2016/17 and beyond, and will include detailed analysis of our existing workforce and outline a longer term strategic workforce plan for Public Health Wales. This will complement the existing detailed three year Directorate Workforce Plans that have been developed, and improved upon significantly following recommendations from Internal Audit, in support of this Strategic Plan.

The 10 year plan will address the future shape and size of the workforce and changes needed over this period, and how these changes will be achieved. As part of this work, the Organisational Development Team are working with the nominated Director of Public Health (Aneurin Bevan University Health Board) to define the public health workforce of the future, which includes a wide range of people across the public, voluntary and third sectors as well as public health and NHS workforces. The objectives of this plan are to provide:

- a)** A vision for the breadth of the Public Health System in Wales, including an understanding of the Wider Public Health Workforce with a current and/or potential contribution to Public Health
- b)** Clarity around future career pathways and skills development for the Wider Public Health Workforce

- c)** A prevention oriented approach, embedding Public Health knowledge and capacity across the Wider Healthcare Workforce
- d)** Up skilling (capability) and up scaling (capacity) of the Wider Healthcare Workforce, supported by a Public Health Competency Framework flexible enough to meet the knowledge and skills requirements of all of the Wider Public Health Workforce
- e)** A vision for the Specialist Public Health Workforce of the future (covering a 10 year horizon, detailing key opportunities for the Public Health System and skills, capability and capacity requirements)
- f)** Assurance regarding the competence, standards, professionalism, talent management and succession planning across the Core Public Health Workforce, with specific leadership development as required (e.g. Consultants, Specialists and Practitioners) and maximising a variety of approaches to ensure increased accessibility.

Achievements to date

A draft stakeholder engagement strategy and project plan has been finalised and shared with Welsh Government, the Public Health Wales Executive Team and Directors of Public Health. Planned future work will include engagement with stakeholders across the NHS and Third / Public Sectors, along with a key Public Health contribution within the wider NHS Strategy/supporting Workforce Plan. In support of this an initial workshop on 'Describing the Future; Building the Narrative' was held in late 2016 with the Public Health System Leadership Group, which led to broad agreement of the objectives of the plan as articulated above, along with production of a draft Toolkit to support local 'building the narrative' conversations, to allow the System Leadership Group to commence initial discussions with their teams and stakeholders in preparation for more detailed planning.

Effective HR Advice and Case Management

We have made significant improvements between 2015 and 2016 in the way we manages our professional HR support to the organisation, reducing our caseload by 80% through efficient and effective management.

This work continues through late 2016/17 and into 2017/18, through development of Standard Operating Procedures, and continual modernisation of the People and OD team's input to the organisation on these issues. In addition, improvements in partnership working links with trade unions and staff organisations have impacted positively on the employee relations (ER) climate, leading to a reduction in employee relations activity.

Better Reporting of People Related Data

Alongside our programme to ensure maximisation of the use of ESR, we will also look to enhance the people data we make available to the organisation, ensuring we maximise the use of Business Intelligence solutions via MSS.

In addition to this, we are also enhancing our people scorecard, and our approach to performance management of people-related metrics, via our newly established People and OD Executive Team, and People and Organisational Development Committee.

Embedding 'My Contribution'

A new framework for performance management and appraisal called "My Contribution" was developed during 2015 and was put in place from April 2016. Feedback from a survey undertaken in 2014 indicated that, for the majority of staff that had an appraisal, the experience was a positive one. A number of areas for improvement were identified, however, which have been built into the new framework – with a view to focusing on quality, as well as ensuring all staff have had an appraisal.

We will continue to monitor the progress of our new approach through 2017 and beyond, and to ensure the quality of the process, linked to Pay Progression, when we implement this in April 2017.

Delivery of 'Statutory and Mandatory' Training

Compliance has generally improved or been maintained over the last year. We need to maintain this improvement as refresher deadlines arise and there needs to be a further effort to achieve over 90 per cent compliance across all areas.

Robust and effective management of sickness absence

We have made significant strides in managing sickness absence in Public Health Wales over the last year. This is as a result of pursuing the following actions to reduce sickness absence:

- Conducting sickness audits, which assess hot spot areas and compliance in respect of the management of sickness absence
- Sickness Management Panels, which will follow-up on these audits and develop detailed Action Plans for areas with low audit scores
- Increased focus on the Trust's Staff Health and Well-being agenda, with a view to a happier and healthier workforce and preventing sickness absence
- Increased level of case-management input and advice from the People Team

Part 4 – Our ways of working

- Ensuring enhanced support for staff who are absent from work due to long-term sickness via Occupational Health; counselling services; and supportive management practices engendered via training for managers, the newly released Sickness Absence “How To Guide”, and the Leadership and Management Development Programme.

Early indications from the Sickness Audit work suggested that there was room for improvement, particularly in respect of how short-term sickness was managed within Public Health Wales – and recommendations have been implemented to improve our approach in this regard.

In terms of Staff Health and Well-being, work in 2016/17 focused on:

- Enhancing web-based materials for promoting health and well-being
- Supporting staff back to work by developing a “welcome back” approach
- Continuing to target mental health issues by implementing a buddy scheme, and working with Time to Change Wales
- Taking forward internally the work which has come from the All Wales Well-being Steering Group (including promotion of national well-being campaigns).

And in 2017/18, we will:

- Continue to target stress/mental well-being issues through development and pilot of a programme of resilience and mindfulness training for staff
- Continue to support a new approach to both minimise preventable sickness absence, and welcome back staff returning from periods of sickness absence
- Establish a network for staff health and well-being ambassadors to support and drive a focus on health and well-being of staff across the organisation
- Work towards assessment for the Silver Corporate Health Standard
- Implement an Employee Assistance Programme for Staff
- Further enhance our web-based material for promoting well-being
- Develop and enhance metrics to measure success of well-being interventions

4.3.6 Attracting Great People

Simple, Effective and Timely Recruitment Processes

Through our Recruitment and Talent resource within the team, a new development in 2015/16, we are continually developing our recruitment processes, working with partners in NHS Wales Shared Services Partnership, to ensure they are simple, effective and timely.

Part 4 – Our ways of working

This work will continue to progress in 2017 and beyond, through standardising our operating procedures, enhancing our professional input to the recruitment process, and embedding the use of technology to support our recruitment processes.

Developing Our Employer Brand and a Compelling Offer to Attract New Talent

Alongside the work around recruitment processes, we are also developing our employer brand, via modern mediums such as LinkedIn and Twitter, to enable us to recruit the best talent, and to ensure we have a presence in the modern recruitment market.

We also intend to maximise the impact of the Our Space programme, to utilise our assets as an organisation to attract new talent.

Embedding Robust and Modern Recruitment Practice

Our key challenge will be to embed these modern approaches to recruitment in an environment which has previously relied upon internally driven systems, and to modernise approaches to ensure our outcomes are high quality.

We intend to do this via a combination of up-skilling managers, supporting recruitment to key posts, and sharing success stories – building continually upon some of our key successes around assessment centres, and to include values-based recruitment, linked to our work around values in late-2016/17.

Delivering Proactive Approaches to Better Manage Skill Shortages and Hard to Fill Posts

Perhaps the most significant element of this priority is how we develop creative, proactive approaches to areas of shortage, or hard to fill posts. We will need to consider alternative options alongside any recruitment solutions, such as skill-mix diversity, and new ways of working; however we also need to ensure that we are taking advantage of opportunities to maximise our brand and offer to attract candidates to these posts.

Significant work has recently been undertaken in Microbiology, working closely with the service to develop such an approach for Consultant Microbiologists. This work will continue in 2017 and beyond, intrinsically linked to Directorate Workforce Plans, and service developments in key areas, such as Genomics.

4.3.7 Creating a Modern Workplace

Policies and Practices that People Want to Use

Through 2016/17 we have continued to develop our approach to policies and practices, in order to take a more proactive and engaging approach to how we manage our people. At the start of 2015/16, the entirety of our people policy suite was out of date, and pre-dated the organisation from when it was last updated.

We have made significant progress, in partnership with our trade unions and staff organisations, toward modernising our policies, including, for example, development of a Flexible Working Toolkit (to go alongside the Our Space programme). The toolkit aims to improve our approach to flexible working via evidence, and promotion of its benefits. This approach is currently being shared with the All Wales Health & Well-being Group as best practice in this area.

This work will continue in 2017/18, with a view to concluding the modernisation of our policies and practices, and improving what it feels like for leaders, managers and our people to navigate our policies and practices.

Developing Constructive Relationships with Our Staff Organisation Partners

We intend to maintain our progress in 2017/18 in developing and improving our relationships with our trade unions and staff organisations.

During 2016/17, we have developed a Partnership Working Charter, which articulates “how we do partnership working around here”, and provides a framework for us to challenge ourselves, and our leaders and managers, in this regard.

We have also taken steps to modernise our approach to developing policies, previously done in isolation of our partners, by establishing policy workshops. We intend to develop this approach to enhance our consideration of equality issues as part of this process in early 2017/18.

In addition to this, we will also implement, from 2017/18, a fresh internal structure around partnership working, which allows for strategic discussion of plans with the Board, and early engagement of trade unions and professional organisations in proposed plans which affect our people. We also intend, as part of this work, to embed local partnership working in Directorates, in order to resolve issues at the most appropriate point, and improve relationships at this level.

Finalising and Embedding Values that Capture and Drive the Culture We Want to See

Work will be completed in 2017 to refresh the Public Health Wales values and to clarify the behaviours we wish to see in our organisation and from our people

These values have been based on the outputs of a series of staff engagement workshops held across 2016, which has ensured we are capturing a fully representative view of this central tenet of our organisational culture. The workshops will build upon the core principles launched by the Minister in February 2016.

It is intended that these values will also allow us to attract and recruit people who best align with our organisational needs, via values-based recruitment, as well as utilising our values to inform key organisational decision-making.

Responding Well to Staff Survey Results and Improving How it Feels to Work for Us

A fundamental strand of our plan is to build a positive work environment based on mutual respect and trust, characterised by high levels of collaboration and team work, and driven by excitement and ambition to exceed expectations. Clearly the engagement of our staff is key within this, so it is of vital importance that we respond properly and openly to our Staff Survey results, and put plans in place to ensure we improve in any areas identified.

There is a clear link to our values work here, in terms of identifying the culture we wish to see, and the behaviours which run alongside this for all of our people.

4.3.8 Growing our Skills and Talent

Professional Leadership Programmes

We have benefitted from significant investment in this area over recent years, with a full programme developed and implemented in 2015 for leaders and managers across the organisation. This programme has naturally come to its three year conclusion, so we intend to review our approach to Leadership & Management Development, with a view to implementing shorter, more focused modules, directed towards high-impact changes to practice.

This work will build upon, and indeed complement the outcomes of the previous approach, which has delivered more capable, confident managers who accept responsibility for creating the local environment in which their workforce can be successful.

Part 4 – Our ways of working

In addition, it is our intention to focus our input on areas of greatest need, aligned to the organisation's priorities and pressures. This new approach will be finalised in early 2017/18.

Coaching and Mentoring Programmes

We will, in 2017/18 and beyond, continue to develop our approach to coaching and mentoring, ensuring we build upon the work already delivered as part of the Leadership & Management Development Programme.

This will enable us to develop a coaching culture, and to enhance our manager capability, to impact positively upon culture, engagement and management of people issues.

Mapping the Professions, and Working with Heads to Develop Career Frameworks

A key element of our plan is to map the professions within the organisation, with a view to working with Heads of Profession to develop and enhance skills, and to implement career frameworks within professions.

Early work is concluding in 2016/17 to map the professions, after which further work will be undertaken in 2017/18 to develop our input, and to determine how we will implement career frameworks (including key areas such as scientific careers).

Talent Management and Succession Planning

Work has concluded in 2016/17 to develop a Public Health Wales approach to identifying talented individuals through the Workforce Planning cycle. This is in its infancy at present, and further work is required in early 2017/18 to ensure that this approach is understood, and that we are maximising the opportunities it presents.

This work will also clearly need to link in to leadership and management development, to ensure that we are nurturing our best talent, as well as continuing to attract individuals with growth potential.

Work Placements and Apprenticeships

Developing links with educational establishments and our communities is a key part of our plan.

In April 2017 the UK Government will introduce an Apprenticeship Levy, which will require us to dedicate 0.5% of our pay bill to apprenticeships, via direct payment to Government. This is a significant opportunity for us to improve our approach, and to engage with communities.

We are currently working with Welsh Government and the Workforce Education and Development Service (WEDS) to develop our approach to work placements, apprenticeships and accessing accredited learning funding. Our intention is to clearly link this to our professions and our workforce plans, to ensure the greatest impact upon the organisation.

4.3.9 Establishing a Diverse, Inclusive and Healthy Workforce

Achieving Bronze Health Standard, and, Over the Course of this Plan, Gold

Public Health Wales has developed an approach to staff health and well-being which began implementation in 2015. Our overall progress will be measured by assessment for recognition under the Corporate Health Standard, with Bronze assessment in early 2017/18 following on from our mock assessment in early 2016/17. Our aim is to achieve Platinum standard over the course of this plan.

Implementation of our Strategic Equality Plan

Our Strategic Equality Plan was approved by the Board in April 2016, and we have since developed a four year Implementation Plan. Our plan aims to fundamentally shift how we view equality as an organisation, and to challenge our assumptions in terms of how we operate.

Alongside this, we intend to enhance the quality of our equality and diversity data, in order to inform decision-making, and to enable us to truly challenge ourselves. Our overall aim is to be an organisation that is representative of its communities, and is inclusive and diverse in its demographics.

This will have clear links to our Board, our recruitment practices, and our organisational decision-making. We also intend to improve our approach to equality impact assessment, working with trade union / staff organisation partners, and maximise interactions and collaboration with assets such as the NHS Wales Centre for Equality and Human Rights, which is hosted by Public Health Wales.

Creating a Bi-lingual Organisation, with Thriving Welsh Language Culture, and Readiness for the Welsh Language Standards

Alongside the Welsh Language section of this plan, we also intend to develop our approach to the Welsh Language internally, to respond to the challenge set by the Well-being of Future Generations (Wales) Act 2015.

In order to achieve this, we intend to change our approach to the Welsh Language organisationally, to utilise the assets we have available to us. We will do this through engagement of our Welsh speaking staff, and development of a “One Step Forward” approach to improving general Welsh language skills, which aims to enhance skills at all levels.

Part 4 – Our ways of working

We will also, through investment in this area connected with our Regulatory Impact Assessment, ensure that we are prepared for the Welsh Language Standards.

Driving Further Improvement in Attendance Levels Through a Well-being Approach

As described above, our intention is to improve our attendance levels through enhancing our offer around staff health and Well-being.

This will include linking strongly with the national All Wales Health & Well-being workstream, as well as developing our Employee Assistance Programme proposal.

We also intend to improve access to services to support them through issues that arise through their lives (e.g. resources for new parents, financial advice, access to counselling services).

Scarce Skills, Recruitment Hotspots and Service Developments

We have identified, through workforce planning, a number of scarce skills where we are reliant on a small number of experts, many of whom are approaching potential retirement age, and where we anticipate some difficulty in replacing them. In some cases we only employ one or two people so there is no opportunity to create a critical mass and robust succession plans. In some areas we are reliant on health boards to provide services, under service level agreements and are concerned that they are also experiencing skills gap.

Fragile skill areas include: breast radiologists, radiographers, public health consultants specialising in Health Intelligence and Health Improvement and consultants in communicable disease control (CCDCs). There are known skills shortages across the system, including Endoscopist shortages in health boards (which the Trust is working with health boards to understand and mitigate risks) and insufficient numbers coming through the training schemes to fill the roles in the foreseeable future as the lead time to develop proficiency runs to several years. Increasing the number of Nurse Endoscopists is one potential solution being explored.

It is recognised that other roles, such as health protection nurses, currently have limited career development opportunities and are not fully used in the current system, so the opportunity to redefine these roles is being explored and implemented, and plans are being taken forward for career advancement.

Health Protection appointed a Lead Nurse in 2015/16, and work has been delivered with the CCDCs and Health Protection nurses to determine current and future priorities as part of the development of a divisional plan. Furthermore, discussions with Director of Nursing, and Health Protection nurses have taken place over development of Advanced

Part 4 – Our ways of working

Nursing Practice and two nurses have undergone development modules recently.

For consultant microbiologist roles there is an opportunity to establish a biomedical scientist interface around infection management. Specialist technical advice needs to be fully explored and incorporated into next iteration of workforce development plans. We are also utilising the Modernising Scientific Careers (MSC) programme to produce a new model for developing the healthcare science workforce with the aim to simplify existing complex models to ensure effective career pathways.

We employ a significant number of Biomedical Scientists and recognise the importance of developing new and enhanced skills incrementally, to meet the changing demands that will be required to deliver a modern-day Microbiology Service both in the medium and longer term future. We are committed to delivering the aspirations of the Modernising Scientific Careers Framework and any future best practice recommendations that assist us to make better use of the range of current and future potential skills. We have invested in a national training lead to support this work being taken forward.

Other scarce skills include evidence and knowledge analysts, where development plans for the function and people are now in place; public health researchers and policy advisors where we are building working relationships with academic centres to influence research areas.

We will also continue to explore new approaches to recruitment such as joint appointments with health boards where we are competing for the same skills. Examples include joint appointments made with the Police and Crime Commissioners Office and Sport Wales.

In addition to these areas, a number of service developments will take place over the course of this plan, which will be supported via a combination of recruitment, workforce modernisation and workforce planning. These include:-

- Supporting the modernisation of Human Papilloma virus (HPV) testing services;
- Continuing to develop our Adverse Childhood Experiences resource;
- Welsh language officer and translation resource;
- Continuation of the modernisation review of Microbiology Services and modernising scientific careers, both as mentioned in further detail (see page 102)
- Continuation of the development of the Wellbeing of Future Generations Hub

4.4 Governance

4.4.1 Introduction

Our Board is accountable for setting our strategic direction, ensuring itself that there are robust systems of governance and internal controls are in place and overseeing the delivery of our strategy by holding the executive to account.

As the accountable officer, the Chief Executive has responsibility for ensuring the implementation of the strategy set by the Board in a high quality, safe and effective way, maintaining appropriate governance arrangements throughout the organisation.

Together, the Chief Executive and Board ensure a sound system of internal control which supports, facilitates and ensures the achievements of our strategy, aims and objectives.

The Board functions as a corporate decision making body, with Executive and Non-Executive Directors being full and equal members, and sharing corporate responsibility for all decisions.

The Board seeks assurance that we are executing our strategy and achieving the outcomes intended through a well governed system of effective performance and delivery. It does so in a number of ways including:

- receiving and scrutinising service, workforce and financial performance reports
- seeking assurance that the provisions of the Well-being of Future Generations (Wales) Act 2015 and any other relevant statutory requirements have been taken into account
- engaging with service users, stakeholders and staff
- receiving reports from internal and external audits informed by agreed risk based annual work plans
- receiving assurance from its Committees and the information contained within the Board Assurance Framework
- reporting on governance in line with NHS Wales guidance

The Board has ultimate responsibility for the delivery of this plan. Implementation is the responsibility of the Executive Team. This responsibility is both a collective corporate responsibility and individual delegated responsibility through the respective executive portfolio areas.

Reporting to members of the Executive Team, operational responsibility for delivery of the plan rests with our divisional directors and other senior managers. They are held to account for delivery through regular performance review meetings. These focus on performance against the plan, managing our risks and developing our staff to enable effective delivery and achievement of our outcomes.

4.4.2 Our planning approach

Public Health Wales developed a new three year strategic plan in 2015, which set out our strategy, and the specific actions, for how we would make the maximum impact for our population through the delivery of our priorities. It was informed by a number of strategic drivers, including:

- The health and well-being of the people of Wales - our 'state of the nation.'
- The legislative and strategic policy context in Wales.
- Specific service development requirements.
- Engagement with our partners and stakeholders.

As we enter the final year of our existing three year plan, we have undertaken a review of our existing strategy and priorities to ensure they remain fit for purpose as part of our annual planning cycle. This has included a look back at the priorities we agreed and plans we put in place and a look forward and 'horizon scan' of the strategic challenges and opportunities facing Wales over the next five to ten years.

An overview of our planning process, key planning drivers and our work to develop a more integrated planning approach is provided below. This has been informed by the development of our previous strategic plans and has been further strengthened through this planning cycle.

4.4.3 Refreshing our plan

As part of Public Health Wales' annual planning cycle and the development of a refreshed Strategic Plan, we have undertaken a review of our existing strategy and priorities.

This has required us to look back at the priorities we agreed and plans we put in place and look forward and 'horizon scan' the strategic challenges and opportunities facing Wales over the next five to ten years.

Through this process, we have agreed that the priorities we set in 2015 are right for the final year, however, in some cases, we have refined, the strategic objectives that sit under each priority. This is in light of the strategic issues identified during our review phase of the plan, our experiences implementing the first two years of the plan and also by wider environmental, social and legislative factors, particularly the Well-being of Future Generations (Wales) Act 2015.

An overview of the changes made to our strategic objectives is included in appendix 5.5.

Strategic drivers

The **State of the nation** section provides an overview of current, and projected, health and well-being challenges and identifies the impact these will have, particularly on the future delivery of services. We have used this to inform the development of our plan and as the foundations, and rationale for the systems shift proposed to deliver real improvements.

Part 4 – Our ways of working

This approach is further informed by the **legislative and policy context** set for Wales, in particular, the Well-being of Future Generations (Wales) Act 2015, Public Health (Wales) Bill and Taking Wales Forward. The move towards a greater focus on prevention, a commitment to reduce inequalities, long term planning and a shift towards primary care has helped support and shape the development of our plan and shaped the focus of the actions we will deliver for each of our priorities.

An **assessment of our recent progress and performance**, particularly in relation to service developments, has informed key aspects of this plan and our priorities. This assessment has been based on:

- service performance and trajectories
- service pressures and challenges
- engagement with service users and a commitment to coproduction
- quality improvement

Our finance and workforce position and future challenges within these areas have also informed the development of this plan. The plan reflects the challenges we face and action we will take, from a service, workforce and financial perspective, as part of the integrated approach we have adopted. This is reflected in:

- the rationale for why we have selected priorities
- areas of specific workforce focus from an organisational and service perspective
- our areas for investment and allocation of resources to deliver our priorities, as part of our wider financial plan

Engagement with our partners

Significant engagement was undertaken with health boards and trusts during 2014 to develop a small number of shared public health priorities, which are reflected within the content of this plan. This was the first time, during the lifetime of the current NHS Wales planning arrangements, that organisations came together in this way to discuss the key public health challenges and opportunities that we face in Wales.

We also engaged extensively with partners and stakeholders from the wider public health system in Wales, including police, local authorities, Natural Resources Wales and Sport Wales. This engagement has demonstrated both the strategic alignment around prevention and opportunities for joint action and working. This approach is reflected in the content of this plan, including specific actions within our strategic objectives.

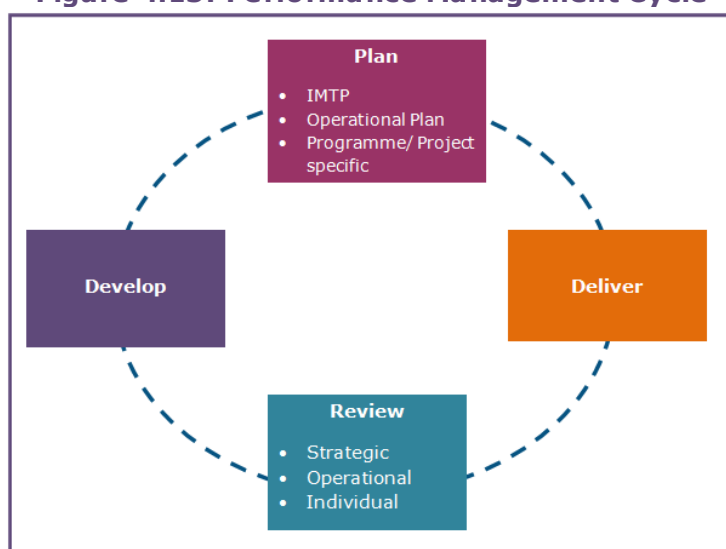
As part of the development of the 2017/18 – 2019/2020 plan, we have also engaged with other NHS organisations, Welsh Government and the wider public sector, over both the strategic direction and specific action we will undertake to deliver each of our priorities. We have also shared a draft version of the plan with our partners, as part of our commitment to supporting better alignment around priority areas. This has been done in

parallel with the further development of the Memorandum of Understanding, particularly around specific services, that we developed with other health bodies in 2016.

4.4.4 Integrated planning arrangements

We have developed these plans through the implementation of our integrated approach, which incorporates service, workforce and financial planning. The diagram below provides an overview of the four key stages of our planning cycle which involves a number of key stages, and gateways, to support the development of robust and fully integrated plans. These are set out in our internal arrangements and guidance.

Figure 4.13: Performance Management Cycle



4.4.5 Our plans

The section below provides an overview of the planning structure in place within Public Health Wales. It demonstrates the 'line of sight' and alignment between our strategy through to the specific individual objectives set for members of staff.

Strategic Plan (three year plan)

Our overarching Strategic Plan (otherwise known as our Integrated Medium Term Plan) will guide our action, and the resources we allocate, over the next three years. It articulates what we will achieve over three years and how we will use our skills and resources in order to have maximum impact on health and well-being.

Operational Plan (annual plan)

Our Operational Plan describes the specific actions that we will undertake to deliver each priority and strategic objective, by quarter, during 2017/18.

Programme and project specific plans

Programme and project plans will be in place for the major developments and changes detailed within this plan. These will be monitored at an organisational and divisional level, dependent upon the nature, and associated risks, of the specific development.

'My contribution'- connecting our people to our mission

My Contribution is our process for helping staff see how their role fits into the organisation and how what they do has a real impact on the success of Public Health Wales. An effective performance management system is key to supporting Public Health Wales realise its vision and achieve its objectives. We should all be clear of what's expected of us in our roles and how this contributes to the success of our teams and Public Health Wales.

4.4.6 Overarching agreement with health boards

During 2015/16, Public Health Wales engaged with NHS colleagues to develop an all-Wales Memorandum of Understanding. The Memorandum of Understanding sets out the organisational-specific relationship between Public Health Wales and NHS Health Boards and Trusts.

The purpose of the Memorandum of Understanding is to:

- provide robust governance arrangements for managing the relationship that reflects our various 'touch points' and enables a more business-focused approach to how we work together
- have a single process for the escalation and resolution of issues for both parties
- have clarity over the commissioned, provided and supportive functions between the two organisations
- summarise services provided and reference to specific detailed Service Level Agreement/Commissioning Documents

Memorandums of Understanding were signed in April 2016 that set out the overarching governance relationship between organisations and the agreed service specifications for Screening, Microbiology and Health Protection.

Further work has been undertaken in 2016/17 to develop service specifications for Health and Well-being, NHS Quality Improvement and Patient Safety/1000 Lives Improvement Service and Policy, Research and International Development.

Further detail on the agreement is included in appendix 6.

Agreements with other partners

In recognition of the need to work with partners outside of the health care sector, the organisation has also entered into Memorandums of Understanding with the South Wales Police and Crime Commissioner, and Community Housing Cymru.

Part 4 – Our ways of working

The Memorandum of Understanding with Community Housing Cymru will ensure that the organisations work together to develop joint solutions to common problems. Two priority areas are falls prevention and homelessness.

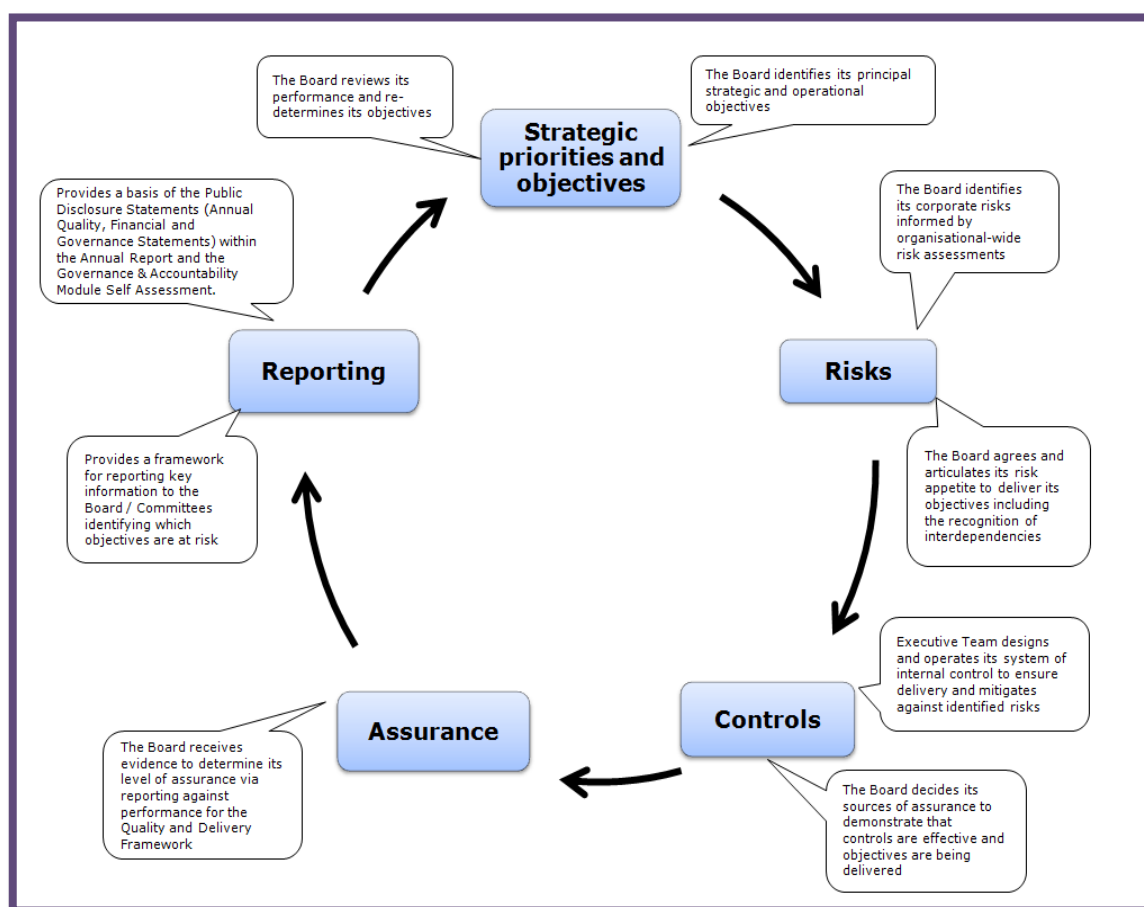
These organisations are also two of the partners working with Public Health Wales as part of the Cymru Well Wales initiative.

Whilst the Memorandums of Understanding outline very similar arrangements to those specified above regarding agreements with health organisations, it is important to receive assurance that governance arrangements are appropriate. This will be the subject of a particular focus in 2017/18.

4.4.7 Board Assurance Framework

We use an assurance framework system and process to monitor, seek assurance and ensure shortfalls are addressed through the scrutiny of the Board and its committees. The content of the assurance framework is illustrated in figure 4.14.

Figure 4.14: Assurance Framework

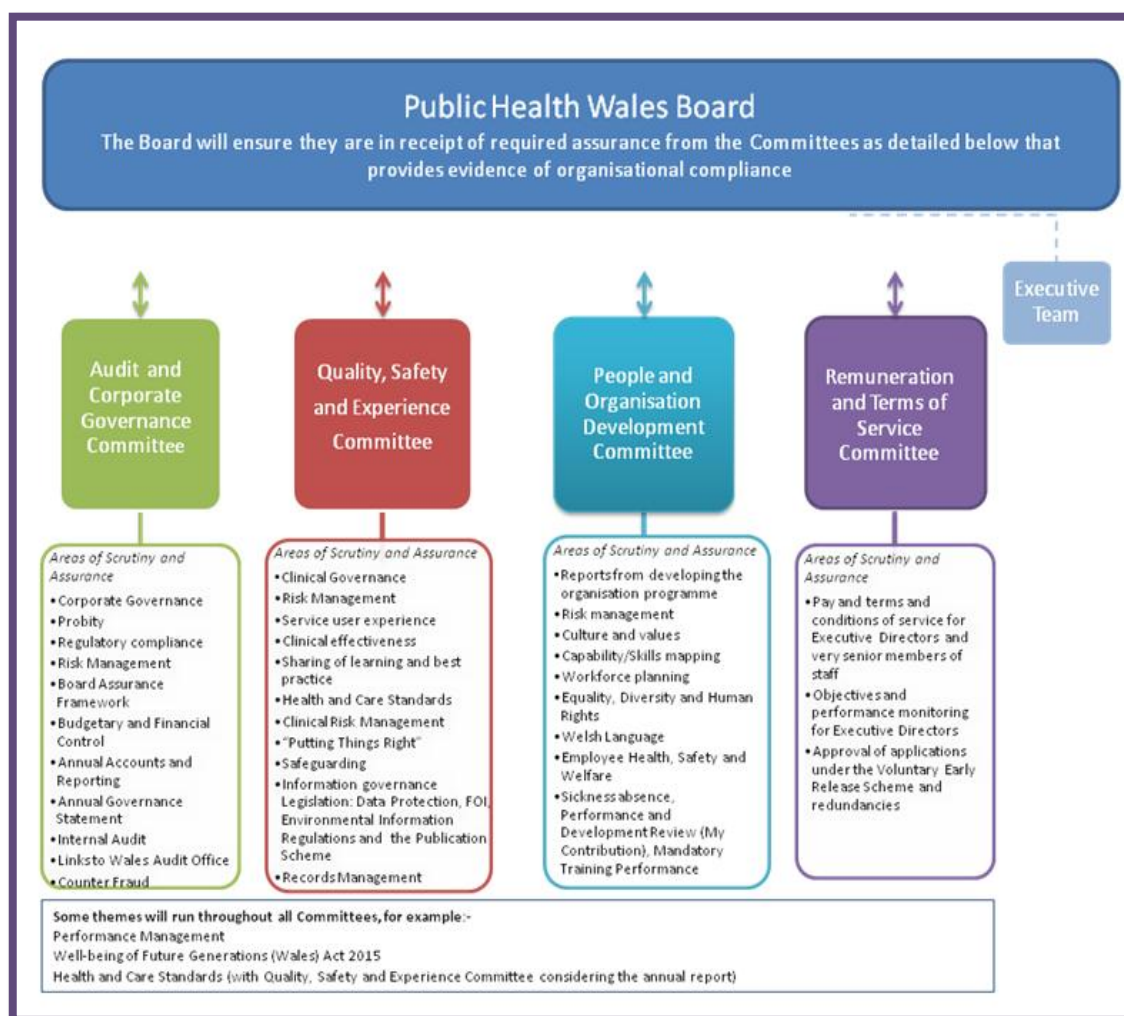


The Board has established four standing committees, each chaired by a Non-Executive Director, with roles in relation to the system of governance and assurance, decision making, scrutiny, development discussions, an assessment of current risks and performance monitoring. As the

Part 4 – Our ways of working

organisation does not have Funds Held on Trust (Charitable Funds) in its own right, or responsibility for delivery of mental health services, it is not required to have a Charitable Funds Committee or Mental Health Act Committee. The current committee reporting framework is shown in figure 4.15.

Figure 4.15: Current Committee Reporting Framework



4.4.8 Performance Management and Reporting Framework

We have developed and further strengthened our performance management and reporting arrangements, based on the following principles:

- production and consideration of timely and robust performance information
- development and embedding of an improvement culture within the organisation
- a commitment to, and clear focus upon, outcomes and quality
- clear lines of accountability for delivery
- clear and agreed performance metrics
- clear performance review arrangements

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- rewards and sanctions

Aims and purpose

The aims and purpose of our performance arrangements are to ensure that:

- clear lines of accountability are in place as part of our governance and assurance framework
- information is provided that promotes and informs action to address areas of underperformance
- relevant information on our key services and functions is provided to support decision making
- information is provided as part of an integrated approach to provide a comprehensive overview of the organisation's performance
- significant risks to delivery of agreed targets are identified and managed proactively and effectively
- resources are allocated effectively in line with our strategy and priorities

Performance cycle

The Framework is based upon the cycle outlined below, which aims to support the ongoing active management of performance, based on clear plans and actions, and continual improvement of our programmes and services.

Figure 4.16 - Performance Management Cycle



4.4.9 Performance reporting arrangements

Public Health Wales produces a monthly corporate performance report, which is considered by the Executive Team and Board (bi-monthly), and is

Part 4 – Our ways of working

underpinned by more detailed programme and project specific indicators and reports.

Our monthly corporate report consists of:

- overview of performance, including against key public health targets
- summary of key performance issues and the actions that will be undertaken to address these
- summary of progress against our Operational Plan (quarterly)
- performance dashboard that provides a summary of overall progress against our key performance indicators
- specific detail on service performance, including current performance and trajectories
- exception reports, where required, providing the reasons for underperformance and action that will be taken to improve

Table 4.17 - Summary of reporting arrangements

Reported to:	Reporting	Frequency
Welsh Government	• Latest monthly performance report • Finance reports • Service/programme specific information (as required)	Quarterly
Board	• Latest monthly performance report • Finance Report	Bi-monthly (report circulated via email in alternative months)
Executive Team	• Latest monthly performance report • Finance Report • Recovery Plans	Monthly dedicated performance meeting
Directorate/Divisional Performance review and management team meetings	• Latest monthly performance report • Finance Report • Operational Plan progress updates • Division/programme specific detail (as required) • Key workforce information	Monthly

4.4.10 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.

Therefore, the organisation is committed to investing and strengthening its risk management arrangements at a strategic and operational level. A Risk Management Framework was developed during 2015/16 and implementation continued during 2016/17. The aim is to move Public Health Wales to an improved level of compliance against nationally recognised standards during the three year lifetime of this plan. By implementing the framework, the appropriate management of risk will play a prominent part in helping the organisation meet its strategic objectives.

This dynamic process will enable the organisation to measure key strategic risk performance, establish its risk profile and instigate thematic analysis through the use of the Board Assurance Framework, Corporate Risk Register and local risk registers.

4.4.11 Strategic risks

Public Health Wales recognises that risk is both a dynamic and evolving - process, it is therefore our expectation that strategic risk will change over the lifetime of the plan. The strengthened systems and processes of risk management within Public Health Wales will ensure that these risks are actively managed and mitigated accordingly.

At the time of writing the plan, the following strategic risks have been identified for the delivery of this plan. These risks inform the Board Assurance Framework for Public Health Wales. Each risk will have clear controls in place and mitigating actions to minimise the risk, and will be reviewed on an ongoing basis and amended accordingly.

Table 4.18 –Strategic risks

Risk Descriptor	
Public Health Wales will:	
1	There is a risk that we will find ourselves without the workforce we require to deliver on our strategic priorities
2	There is a risk that we will fail to effectively respond to new and emerging Government priorities brought about by a dynamic and evolving political agenda.
3	There is a risk that we will suffer a disruption to our key products and services of such a magnitude that it will compromise the organisation's ability to deliver on our strategic priorities.
4	There is a risk that we will fail to achieve population health gains through ineffective organisational and system leadership (including supporting the implementation of the Well-being of Future Generations (Wales) Act 2015)

5	There is a risk that we will fail to fulfil our statutory functions as laid down in the Public Health Wales NHS Trust (Establishment) Order 2009, to the required quality, performance and compliance standards.
6	There is a risk that we will not comply with our statutory and regulatory obligations to such a degree that we fail to achieve our strategic priorities
7	There is a risk that we will fail to influence key partners to the depth required to enable us to provide the required leadership to progress essential cross sector work.
8	There is a risk that we will find ourselves without the financial resources required to deliver on our strategic priorities.

4.4.12 Information Governance

Public Health Wales is an organisation which relies heavily on information and data to provide statutory functions, report on performance and deliver on strategic objectives. It is therefore recognised that further assessments and changes are required to ensure we are better able to provide the necessary levels of assurance and compliance in managing and handling data/information. We are assessing and improving our state of readiness against required compliance on the General Data Protection Regulation and will be assessing ourselves against the Information Governance tool kit standards. This includes aiming to incrementally improve our Information Governance arrangements year on year; repeating our self-assessment at a minimum of an annual basis, together with putting all standards of Caldicott principles into practice.

Increased leadership, focus and assessment will ensure that we improve on our current systems and processes, assessing ourselves against UK recognised standards in order to ascertain the progress being made.

Our annual Information Governance statement will provide an overview of Public Health Wales compliance with information governance acts and national standards.

4.4.13 Financial controls, reporting and audit arrangements

Our financial control framework is set out within the Standing Financial Instructions adopted by our Board. The Standing Financial Instructions set out the regulation of financial proceedings and business and are designed to achieve probity, accuracy, economy, efficiency, effectiveness and sustainability in the conduct of business. They translate statutory and Welsh Government financial requirements for the NHS in Wales into day to day operating practice. Together with the adoption of Standing Orders and Reservation and Delegation of Power, they provide the regulatory framework for our business conduct.

Internal Audit provides the Board, through the Audit and Corporate Governance Committee, with a flow of assurance on the system of internal control. An annual programme of audit work is commissioned,

and delivered in accordance with public sector internal audit standards by the NHS Wales Shared Services Partnership. The scope of this work is agreed with the Audit and Corporate Governance Committee, and is focused on significant risk areas and local improvement priorities approved by the Board.

The overall opinion by the Head of Internal Audit, NHS Wales Shared Services Partnership, on governance, risk management and control is a function of this risk based audit programme. It contributes to the picture of assurance available to the Board in reviewing effectiveness and supporting our drive for continuous improvement.

The Auditor General for Wales is the statutory external auditor for the NHS in Wales. The Wales Audit Office undertakes the external auditor role for Public Health Wales on behalf of the Auditor General.

Financial reporting for Public Health Wales follows a firm monthly cycle. The financial position is reported to the Welsh Government by the fifth working day following the end of the month, with a full monitoring return submitted on the 8th working day. A financial performance report is produced on a monthly basis and presented to each Board meeting.

4.4.14 Stakeholder engagement and support

Public and stakeholder engagement is fundamental to our work in protecting and improving the health and well-being of the population and reducing inequalities. We provide a number of national programmes, services and functions the success of all which are dependent on the support and active involvement of partner organisations, community group representation and individuals (as appropriate) from across Wales. It is important that our work is underpinned by a number of central principles. These include having a strong evidence base and a better understanding of the lived experience of the public/differing community groups and service users, gained through involvement and collaboration as identified in the Well-being of Future Generations (Wales) Act “five ways of working”. The purpose of which is to better shape our priorities and policy development, including where we need to influence change and improve how we deliver functions and services.

Feedback gained through a range of methods including complaints, compliments, service user experience, consultation/engagement events and lessons learnt is used to inform decisions Public Health Wales makes about the way we are run and continue to develop.

Specifically, we engage the public and/or stakeholders when:

- considering options for a decision that will have a significant or widespread impact on any community
- planning or significantly changing a national or local service or project that faces the public or stakeholder(s)
- developing organisational strategy or policies that will be visible to service users or impact upon them

- required by law to consult

Having undertaken a review of how we engage the public and service users between 2016 and 2017, we will be implementing key recommendations to improve our approach, so that we are clearer about what approaches need to be taken depending on the purpose of the involvement and engagement. We will ensure the 'Involvement' approach as referred to in the "five ways of working" within the Well-being of Future Generations (Wales) Act 2015, is incorporated within the improvements we intend to make.

4.4.15 Welsh language

Central to our vision to achieve a healthier, happier and fairer Wales is a commitment to be connected to, and driven by the needs of the people of Wales. We are building a depth of understanding about what people need in order to achieve improvement in public health and well-being, and to reduce inequalities. We are unequivocal in our view that this includes meeting the language needs of Welsh speaking individuals and the population of Wales in the design and delivery of our strategic objectives.

Our long term goal is to ensure that anyone who engages with Public Health Wales can do so as easily in Welsh as in English. This includes service users, the public, our staff, and colleagues in the wider public health workforce. Since Public Health Wales came into being in 2009 we have implemented various statutory and government requirements which have contributed to the achievement of our goal. While much good work has been done, we acknowledge that our progress has not been as substantial as we had planned. We also acknowledge that we need to refresh our approach and work differently if we are to achieve our goal in relation to the Welsh language. Major new requirements relating to the Welsh language provide an opportunity to do this:

- From 2017 we will be subject to new Welsh Government Welsh Language Standards (Health Sector) Regulations which present new requirements, not only in relation to delivering our public services, but also in relation to opportunities for our own staff and other colleagues in the wider public health workforce to use the Welsh language in work.
- The Well-being of Future Generations (Wales) Act 2015 puts in place a well-being goal relating to the protection and promotion of the Welsh language, and a requirement for Public Health Wales to contribute to the achievement of that goal.
- Welsh Government's revised Strategic Framework for Welsh Language Services in Health, Social Services and Social Care: More Than Just Words, requires NHS bodies in Wales to implement an action plan to plan, actively offer and deliver quality services in Welsh.

In order to meet these challenges we are effecting a step change in our thinking and approaches, and starting to work in a different way. We are

broadening our single corporate Welsh language action plan approach to include comprehensive Welsh language planning – including bilingual workforce planning – at directorate / division level across our organisation. This approach requires clear accountabilities and performance management arrangements at this level. We will ensure that there are robust systems of governance and internal control in relation to the implementation of directorate / divisional action plans by holding the executive directors to account. We will review internal systems and arrangements to support directorates and ensure quality, consistency and value for money. For example, we will review translation and interpretation arrangements and Welsh language policy support.

The People and Organisational Development Committee, Executive Team and Public Health Wales Board will receive regular progress reports.

4.4.16 Equality

One of the ambitions of Public Health Wales is to mainstream the public sector equality duty across all of our functions, including our role as an employer. The way in which we will do this is set out in our strategic equality plan and objectives for 2016-20. Implementation plans will be developed with each of the directorates and equality-related actions will be reflected in operational plans. Directorates will be responsible for monitoring and reporting progress against their plans, and for demonstrating their commitment to meeting the general and specific duties. They will also work to create a culture of positive action in relation to equality which goes beyond their legal obligations.

Our governance framework in relation to equality will ensure that Public Health Wales considers, promotes and challenges equality practice. We have a role in monitoring our progress against our strategic equality plan and objectives to ensure legal compliance. We will report our progress annually to the Board and fulfil our statutory duty by publishing an annual equality report.

4.4.17 Equality objectives for 2016-2020

We will:

- engage with communities and individuals of all ages, including those who represent groups with protected characteristics and actively use their insights to inform and direct our work
- communicate our messages in ways that are accessible to all members of the community including people with protected characteristics
- make sure all our policies and decisions reflect all groups of people fairly and are relevant to everyone
- build a closer working relationship between Public Health Wales and other partners to enhance information gathering and analysis that better identifies the needs of people with protected characteristics
- be recognised as a fair, inclusive and innovative employer

Part 4 – Our ways of working

Public Health Wales will continue to work towards being a fully inclusive organisation both in terms of the people who use our services and the workforce it supports. Engaging with people who have experienced discrimination and prejudice as a result of having a protected characteristic is essential if we are to understand the different needs of our communities in Wales. We will continue to work with and learn from a broad range of stakeholders including equality organisations, support groups and people with a protected characteristic(s) to challenge our thinking and understanding of inequalities. The way in which we design and deliver services will be done co productively, involving people from different communities in the process. We will be open and transparent in our approach to the way we work and provide opportunities for people from diverse communities to be involved. Our staff also need to have the opportunity to be more actively involved in advancing equality and we must provide opportunities through staff networks for them to actively contribute.

Equality impact assessment is a key process for the organisation as it considers equality-related impacts, both positive and negative, at the beginning of a planning process and not at the end. It ensures decisions are based on evidence and any impacts are considered in a fair and inclusive way. The meaningful involvement of communities through effective engagement is essential as it helps to build strong relationships and demonstrates transparency and accountability in policy and decision making. It also ensures that we pay “due regard” to the need to eliminate discrimination, advance equality of opportunity and foster good relations. We will be working with our staff to improve the quality of equality impact assessments and will be scrutinizing assessments to ensure all aspects of equality have been explored.

We are working to promote participation and access to our services by ensuring our communications are accessible and our services are inclusive. We will actively work to implement the All Wales Standards for Accessible Communications and Information for People with Sensory Loss, and ensure that reasonable adjustments are made to deliver equality of access to our services and events for disabled people. This also includes making sure that people and our staff know where to go to get information and to get their views heard. We will ensure our staff are sensory loss aware so they are in a position to support people using our services.

In line with legal requirements, and as a responsible employer, we have identified a gender pay objective and will formalise a plan to analyse our pay and workforce structure through the lens of gender equality. Improving the workforce equality information we collect relating to pay, training and employment is essential to better understand where we are as an organisation and where we need to be moving forward. We also need to reinforce the importance of collecting this information with our staff and service areas so they fully understand the importance of this. Equality aspects must also continue to be considered when commissioning

and procuring services so that the goods and services meet the need of the different users.

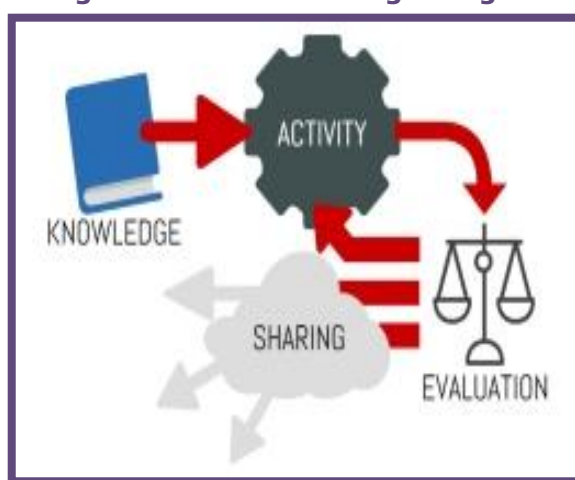
4.4.18 Health and Safety

In 2016 the Health and Safety function transferred to the Operations and Finance Directorate following a review of arrangements. The organisation is currently working through the actions required in response to the findings of the review. The People and Organisational Development Committee has a role in seeking assurance on behalf of the Board.

4.5 Achieving Quality and Impact

The organisation has developed a Quality and Impact Framework which will play an integral part in delivering our strategic priorities. Our vision is to be a quality and impact focused organisation which has robust measures in place to assure us that the work we are doing is of high quality, has a positive impact on the health, well-being and protection of the people of Wales and is safe and reliable. In order to achieve this vision we need to continually improve what we do through responding to feedback and using knowledge, from research evidence, evaluation, innovation and experience, appropriately and transparently.

Figure 4.19 – Knowledge Diagram



We have identified a number of goals that will be necessary to make our vision a reality. These relate to:

- Transforming the culture of the organisation
- Strengthening the workforce (by providing the right education, training and support for our staff)
- Monitoring impact
- Raising standards, achieving impact and outcomes
- Measuring improvement and the quality of our work
- Working collaboratively

We have developed an implementation plan for the Quality and Impact Framework which sets out the strategic objectives, and associated deliverables, to achieve these goals. More detailed implementation plans, such as for knowledge mobilisation and Research & Development, developed by the teams responsible, will deliver core elements of these strategic objectives. Implementation of the Framework will therefore be a truly cross-organisational, integrated, collaborative endeavour.

Quality and impact indicators, covering the five domains of quality and impact, will be developed in partnership with teams and will enable us to monitor progress with achieving our goals. These will be reported on

Part 4 – Our ways of working

regularly as part of the wider organisational performance management process. Good practice guides will be produced to support the use of the Quality and Impact Indicators. Initial monitoring of the Framework will focus on the Health and Care Standards, considering these against our Quality and Impact Framework House (this is a pictorial representation of five domains/ pillars that support quality and impact). Good practice guides will be produced to support the use of the Quality and Impact Indicators.

A Quality Management Group has been established which will support the executive team in monitoring the implementation of the Framework and in establishing robust quality and impact assurance mechanisms. These include undertaking “Deep Dives” (where specific focus and scrutiny is placed on an area/ topic) where appropriate, self assessing against the Health and Care Standards and as specific Directorate level indicators are developed, these will also be reported and scrutinised. The Quality Management Group, reports to the Executive Team, who by exception, escalate items that need to be further scrutinised by the Quality and Safety Committee or Board.

One core element of implementation of the Framework will be the development of mechanisms to engage staff in sharing knowledge and learning from research, evidence, innovation, improvement activities and evaluations (currently given the working title of a Quality Hub). Other cross-organisational initiatives, which also aim to build capacity and capability so that we can improve quality and achieve impact, include a workforce training and development programme covering research, evidence, evaluation and improvement methodologies and the development of an evaluation framework.

Also central to the work that we do and pivotal to our operational plan is listening to views and feedback from the users of our services, programmes and functions, our staff and the general public, about how we can improve the quality and impact of our work. Our Annual Quality Statement focuses on informing the public and users of our services, programmes and functions about challenges we face and how we have addressed these. Over the past four years we have developed our approach to publishing this document; involving members of the public on our Editorial Board and producing our final document in British Sign Language, audio (Welsh and English), subtitles (Welsh and English), Easy Read and achieving the Plain English crystal mark. We will continue to build on this work during the coming year with the development of a children and young persons’ version of the Annual Quality Statement. We are the only organisation in Wales to have produced the document in these various formats.

4.5.1 Research and Development

Research and Development - Research governance

All Public Health Wales research should be conducted within well designed studies and in full accordance with the Research Governance Framework for Health and Social Care in Wales (2009). The Public Health Wales Research and Development Office has implemented due process to ensure proportionate risk review and appropriate research governance is achieved for research within Public Health Wales. The Research and Development Strategic Group provides oversight for research conduct and governance within Public Health Wales, and leadership for research within the organisation.

Research and Development - Research in Public Health Wales

Public Health Wales is committed to developing a culture of research, encouraging an active research community across the organisation and with external partners, to support the strategic priorities and generate new evidence to inform policy and practice. In light of this, Public Health Wales launched its Research and Development Strategy in November 2015 [include link] and outlines four key themes to achieve this goal;

- develop and support research capacity within Public Health Wales
- facilitate the generation of new knowledge
- develop and strengthen collaborative relationships
- effectively engage the public in population health research and communicate research findings

This strategy supports the Quality and Impact framework through its emphasis on research and development, improvement, innovation and impact.

Key developments include the launch of a fund to pump-prime innovative new research activity; and development of an open tender for externally commissioned research aligned with Public Health Wales objectives. A focus in this Integrated Medium Term Plan will be to achieve a clear research agenda across Public Health Wales, alongside development of an active research community with external partners, including Higher Education Institutions, Medical Research Council, Centres of Excellence for Public Health and e-Health research, Welsh Government, health boards, the other NHS Trusts in Wales, Health and Care Research Wales infrastructure, third sector organisations and agencies such as police, education, housing and social services, as well as international organisations and networks.

Fostering an environment which develops research capacity and supports research capability, facilitates the generation of new knowledge, develops and strengthens collaborative relationships, and effectively engages the public in population health research is essential. These components will help us to identify and address gaps in the knowledge needed to achieve evidence-informed public health policy and practice.

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A focus on delivering scientifically robust, high quality, translational and innovative research within Public Health Wales, in collaboration with our partners within and beyond Welsh borders, will contribute to inform and influence policy and practice to improve the health and well-being of the Welsh population.

Health intelligence

A good understanding of our health challenges and opportunities for effective intervention is essential to inform public health action. Using this information, while innovating and evaluating, is a core element in our approach to knowledge mobilisation. Health intelligence services and teams play a key role in prudently providing and promoting the best available public health intelligence (evidence and data analyses) in a way that inspires, informs and maximises the impact of public health action.

These services are also core to one of the basic statutory functions “*to undertake the systematic collection, analysis and dissemination of information about the health of the people of Wales...*” As a national public health agency, we have an essential role in the surveillance of disease and related states of health to allow us to respond in a timely manner – relating to communicable disease, environmental hazards, cancer, congenital anomalies and wider states of health and well-being.

During the last year, across Wales, Public Services Boards have been producing their first Well-being assessments and plans under the *Well-being of Future Generations (Wales) Act 2015*. Public Health Wales have a key role in helping provide the intelligence needed to inform these. During the last year, across the public health system, we have been supporting this work, including with the first release of indicators of the Public Health Outcomes Framework.

To help ensure we are ready to work in our changing environment, exploiting modern approaches to delivery in a strategically joined up manner, we have commissioned a strategic review of intelligence functions of the organisation. During the coming year we will be in a position to receive the recommendations and implement the changes we need.

4.6 Our digital approach

4.6.1 Our offer

To provide first-class informatics systems and services to our staff and to support them in delivering world-class services to improve the health and well-being of the people of Wales.

We will do this through full engagement with staff, the delivery of, our *Public Health Wales Digital Strategy 2017 – 2021*, corresponding *Public Health Wales Strategic Outline Programme 2017 – 2021* and the wider NHS Wales strategic direction for informatics.

Our approach will be to stabilise, energise and transform:

Stabilise

We will initiate a programme of informatics workforce, governance and technical projects designed to produce a solid platform from which we can then begin to implement the strategy.

Energise

Rollout our 'quick wins' such as computing on-the-go to give staff and early glimpse of what the future can be like. Assure adequate training and support exists to maintain the momentum.

Transform

With a solid technical and service infrastructure and an energised workforce (both those delivering and receiving the service) we can really progress any transformational changes that require informatics systems or services.

4.6.2 Alignment with National Strategies, Programmes and Products

We will align ourselves with national strategies, such as the Digital Health and Care Strategy (2015) as well as membership of core national boards, groups and programmes.

Our digital strategy and SOP is founded on the four work streams in the national strategy:

- Information for you
- Supporting the professional
- Improvement and innovation
- Planned future

Part 4 – Our ways of working

We will continue to work with the Welsh Government, NWIS and our strategic IT partners including Natural Resources Wales and Public Health England to ensure that we are able to take full advantage of the opportunities and emergent technologies.

4.6.3 Development areas

Our major areas of development over the next three years are designed to drive forward the national IT agenda in concert with the requirements of this Integrated Medium Term Plan and following the core work streams above:

Information for you - An infrastructure which enables the public to fully engage with our organisation in the manner which best suits them and at a time convenient to them.

Supporting the professional - A collaborative infrastructure which delivers information and knowledge easily, when and where it's needed and which engenders a seamless fusion of interaction and innovation.

Improvement and innovation - Responsive, real-time, analytics delivering information at the time and place it's needed, and fully interoperable across all our systems and services, able to seamlessly interface with external information sources in any format and at any time.

A planned future - An organisation which is able to ensure development of its informatics services within a timetable that meets its needs and as required by its mission, organisational vision and Integrated Medium Term Plan. We will do this in concert with the Welsh Government, our colleagues in NWIS and other trusted partners, and be fully cognisant of the 'once for Wales' approach so that we do not inappropriately divert national informatics resources for the public.

4.6.4 Supporting our priorities

Public Health Wales runs within a complex digital ecosystem due to the breadth and depth of a diverse business portfolio. Our digital strategy is designed to support our priorities by a flexible and dynamic IM&T infrastructure and corresponding IT support services.

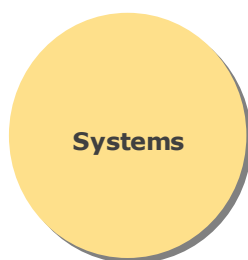
This is founded in six core delivery areas:

Systems

Public Health Wales has several key specialist systems supporting its priorities (such as Information Bureau for Infectious Diseases – IBID, and National Breast Screening System – NBSS.) There is a significant variation in the technologies used and the way in which those systems are developed and maintained.

Part 4 – Our ways of working

We will:



- Deploy a core set of technologies, including mobile application development, and begin a programme of transitioning non-compliant systems to the core. This will significantly decrease our support and maintenance burden enabling us to make best use of our resources.
- Being a process of re-developing all our screening systems to a common platform which will increase flexibility for the workforce, decrease our overall 3rd party support charges and enable citizen engagement services.

Citizen engagement

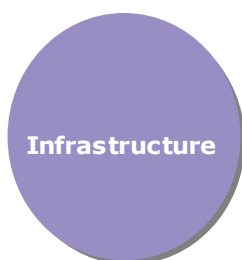
The drive from central government is digital empowerment for the citizens of Wales. Public Health Wales must play its part in delivering to that policy whilst not forgetting the 'digitally disadvantaged'. This strategy recognises there are those citizens that cannot, or do not wish to, engage electronically with our systems and services. The Trust will need to set out arrangements for them separately to this strategy. We expect a national solution for a patient portal but will not wait for that to be developed. We will:



- Test our services by providing early adoption of emails and texts for communications such as screening invitations.
- Look to develop secure ways for patients to directly interact with our systems in a way we can easily integrate into a national solution. This will be through all appropriate channels, including web interfaces and application development
- Provide a rich, context-sensitive intelligence to offer citizen's information and signposting that is specific to their need. Business requirements will be the driver for these initiatives and it is anticipated that this will be done in co-production with users of the services

Infrastructure

We have a diverse, unstructured, technical platform with several support providers. We will:



- Define technical standards and initiate a programme to minimise our technical foot-print to ensure we operate within a coherent, lean framework.
- Ensure that our applications have consistency and have interoperability as a core requirement. Cloud technologies afford a different way of working and we will embrace their utility without prejudice in favour of traditional 'on premises' services.

Public Health Wales Workforce, Informatics Workforce & Informatics Governance

The core principle of an effective informatics service is trust; our service users have to trust that the team are competent to do the job and also trust them to do it a way which is consistent with organisational culture. We will focus on this through the team's 'Building Trust' programme.

To address workforce requirements, we will:



- Learn from the way we interact as a newly formed team
- Set up an Informatics Steering Group; a governance body that will agree and prioritise informatics developments and services. This will be service led, preferably by a clinical informaticist lead
- Develop effective IT training services to ensure staff feel comfortable using the tools available to them

Collaboration

An effective organisation has, amongst other things, a collaborative culture both internally and externally. It will also have the tools available which will make that collaboration a natural part of the daily work. We will:



- Provide services such as a Customer Relationship Manager (CRM), enterprise project management and document management services that integrate closely together and allow information exchange across many stakeholders using many devices and settings.
- Ensure that our office applications interface with those systems through services such as Skype for Business and AirWatch. To do this, we will assess new IM&T infrastructures such as public/private cloud services and mobile computing development and integration.

Data and information

Public Health Wales has a vast wealth of data, often siloed and rarely mined to its full potential. This is partly historical, partly technical and partly strategic. We will:



- In concert with the service, assess ways of accessing, analysing, interpreting and publishing information from the considerable amount of data we hold and data we have access to from other sources.
- reassess our Business Intelligence tools in the light of an information strategy to ensure we have information services that are best fit for the organisation and that also integrate with other core systems such as the Customer Relationship Manager (CRM)

4.7 Innovation

We recognise that innovation is key to achieving prudent healthcare and the goals of the Well-being of Future Generations (Wales) Act 2015, in addition to supporting the changes we must make to meet the financial challenges facing NHS Wales and truly deliver measurable improvements for our service users.

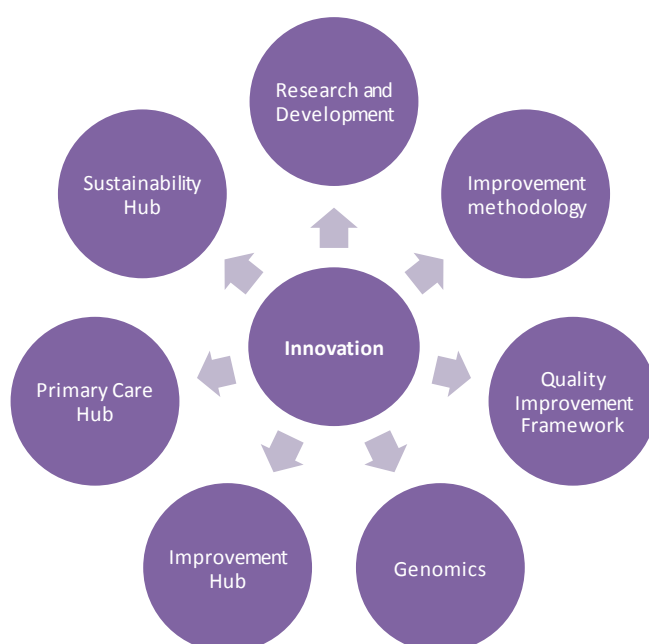
Innovation means a purposeful approach to finding and applying new and better ways of doing things – and this approach can be applied to the delivery of health and care services. This follows research, translating new knowledge into better practice, and it works alongside improvement to fully exploit the potential value of new technologies.

To truly embed a culture of innovation, under the leadership of the Director of NHS Quality Improvement and Patient Safety, we will develop an Innovation Strategy in 2017/2018 applicable to all levels of the organisation and which addresses how we work internally and externally. This strategy will include technology, but also new care pathways and service models. Some of our innovation will come from our own invention and application, but most will come from identifying good practice from elsewhere, if adopted at pace and at scale.

Working with others, particularly universities and industry, will be a key part of our approach to innovation, and we will support health boards, trusts and key partners to adopt this approach as well.

The strategy will utilise the infrastructure within Public Health Wales to maximise a culture of innovation that permeates across all areas of work:

Figure 4.20: Innovation Infrastructure



Part 4 – Our ways of working

The Innovation Strategy will also build on innovations that are already underway in Directorates within the organisation, including:

- Implementation of new technologies and changes to service design, including genomic sequencing
- Implementing recommendations from the Transforming Health Improvement Review, which involves putting programmes in place to deliver effective system interventions
- Supporting Primary Care Pacesetter Projects within clusters that are fostering and developing innovation.
- Implementing new screening tests where these have been shown to improve outcomes or reduce the harm
- Piloting and implementing successful methods to improve participation and reduce inequalities in screening
- Developing innovative research, such as Making a Difference and the various Adverse Childhood Experiences Reports
- Supporting NHS Wales with innovations that can transform quality improvement ideas into action at a local and national level.
- Implementing our Quality and Impact Framework to create an organisational culture that encourages and supports innovation and learning, including the development of a Quality Hub which will enable staff to lead and engage in sharing innovation projects to improve quality outcomes and impact.

We will continue to be ambitious in our approach to innovation through the delivery of this plan. We will find and apply new and better ways of delivering health and care services, and also support health boards, trusts and partners to do the same.

— Part 5 —

Appendices



5.1 Appendix 1 - Delivery Framework

This section of our plan details Public Health Wales' delivery framework for 2017/18. The delivery framework details the key service, quality and resource indicators we will use to monitor our internal performance.

The framework will be underpinned by a series of more detailed performance indicators for each key service and programme. Performance trajectories for 2017/18 have been developed and are detailed in appendix 2.

Service Delivery		
Indicator	Standard/ Target	Frequency
Stop Smoking Wales		
Percentage of smoking population treated by Stop Smoking Wales	5% annual (SSW contribution 2.01%)	Quarterly Cumulative
Percentage of treated smokers who are Carbon Monoxide-validated as successful	40% annual	Quarterly (a quarter in arrears)
Number of clients that became a treated smoker ¹	9,897	Monthly/Quarterly
Percentage of treated smokers who have a Carbon Monoxide reading at four weeks	80%	Quarterly (a quarter in arrears)
Average waiting time for an appointment in this month (days)	14 days	Monthly
Percentage of treated smokers who Quit smoking at four weeks (Self reported)	50%	Quarterly (a quarter in arrears)
National Exercise Referral Scheme		
Number of 16 week consultations	6,492	Quarterly
Number of referrals	23,184	Quarterly
Number of 1st consultations	16,228	Quarterly
Healthy Working Wales ²		
Organisations completing a Corporate Health Standard mock assessment	Performance indicators and trajectories to be agreed with Welsh Government	Quarterly
Private sector organisations completing a mock assessment		Quarterly
Organisations completing a full assessment		Quarterly
Private sector organisations completing a full assessment		Quarterly
Organisations achieving a Small Workplace Health Award		Quarterly
Number of Workboost interventions delivered		Quarterly
Welsh Network of Healthy Schools		
Schools achieving level 1-5 award	180	Progress against annual target reported quarterly

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Schools achieving the National Quality Award	35	Progress against annual target reported quarterly
Smoking Prevention Programme		
Number of secondary schools targeted	62	Progress against annual target reported quarterly
Breast Test Wales³		
Uptake	>=70%	Quarterly
Coverage	>=70%	Quarterly
Normal results sent within two weeks of screen	>=90%	Monthly/Quarterly
Assessment appointments within three weeks of screen	>=90%	Monthly/Quarterly
Percentage women invited within 36 months of previous screen	>=90%	Quarterly
Bowel Screening Wales³		
Coverage	60%	Quarterly
Waiting times for screening test results	>=95%	Monthly/Quarterly
Waiting time for colonoscopy	>=90%	Monthly/Quarterly
Cervical Screening Wales³		
Coverage	80%	Quarterly
Laboratory turnaround times: within three weeks	95%	Monthly/Quarterly
Waiting time for results: within four weeks	95%	Monthly/Quarterly
Waiting time for colposcopy appointment (all Cervical Screening Wales direct referrals with abnormal cytology)	90%	Monthly/Quarterly
Abdominal Aortic Screening³		
Uptake	>=80%	Quarterly
Surveillance uptake: small	>=90%	Monthly/Quarterly
Surveillance uptake: medium	>=90%	Monthly/Quarterly
Newborn Hearing Screening³		
Percentage offered screening	99%	Quarterly
Percentage entering screening programme	95%	Quarterly
Percentage of babies who complete programme (within four weeks)	90%	Monthly/Quarterly
Babies completing assessment procedure by three months of age	85%	Monthly/Quarterly
Newborn Bloodspot Screening³		
Newborn bloodspot screening completeness of offer (all babies)	>=99%	Quarterly
Newborn bloodspot screening coverage (newborn babies)	>=95%	Quarterly
Operational Plan 2017/18		
Progress against Operational Plan actions	Red/Amber/Green update & supporting exception report	Quarterly

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Microbiology		
Clinical Pathology Accreditation status and move to ISO 15189	Accredited	Quarterly
External Quality Assessment performance (Bacteriology)	>=95%	Quarterly
External Quality Assessment performance (Virology)	>=95%	Quarterly
External Quality Assessment performance (Specialist and Reference Units)	>=95%	Quarterly
External Quality Assessment performance (Food, Water and Environmental Laboratories)	>=90%	Quarterly
Turnaround time compliance (Bacteriology)	>=95%	Quarterly
Turnaround time compliance (Virology)	>=95%	Quarterly
Turnaround time compliance (Specialist and reference units)	>=95%	Quarterly
Turnaround time compliance (Food, Water and Environmental Labs)	>=95%	Quarterly
Turnaround time compliance urgent samples (Bacteriology/Virology)	>=95%	Quarterly
Non processed samples (Bacteriology)	<=1.5%	Quarterly
Non processed samples (Virology)	<=1.9%	Quarterly
Non processed samples (Specialist and Reference Units)	<=0.3%	Quarterly
Public Health Indicators		
Indicator	Standard/Target	Frequency
Healthcare Associated Infections⁴		
Clostridium difficile rate (per 100,000 population)	≤72/month (equivalent to rate of 28 per 100,000 population)	Monthly/Quarterly
Staph aureus bacteraemia rate (per 100,000 population)	≤51/month (equivalent to rate of 20 per 100,000 population)	Monthly/Quarterly
Vaccination and Immunisation⁵		
Uptake of all scheduled childhood vaccinations at age four	>=95%	Quarterly
Influenza vaccination uptake among 65 year olds and over	>=75%	Monthly (data available during flu season)
Influenza vaccination uptake among under 65s in high risk groups	>=75%	
Influenza vaccination uptake among pregnant women	>=75%	
Influenza vaccination uptake among healthcare workers	>=50%	

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Quality		
Indicator	Standard/Target	Frequency
Evidence of lessons learned from patient experience framework ⁵	Report	Quarterly
Number of written concerns/complaints received	N/A	Monthly/Quarterly
Written concerns/complaints responded to within target timescales	100%	Monthly/Quarterly
Number of serious untoward incidents (SUIs) reported	N/A	Monthly/Quarterly
Percentage of serious incidents assured within the agreed timescales ⁶	90%	Monthly/Quarterly
Number of new Never Events	0	Monthly/Quarterly
The average rating given by the public (aged 16+) for the overall satisfaction with health services in Wales ⁷	85%	Quarterly
Percentage of NHS employed staff who come into contact with the public who are trained in an appropriate level of dementia care ⁸	95%	Bi-annually
Number of Patient Safety Solutions Wales Alerts that were not issued within the agreed timescales ⁹	0	Quarterly
Number of Patient Safety Solutions Notices that were not assured within the agreed timescales ⁹	0	Quarterly
Workforce and Resources		
Indicator	Standard/Target	Frequency
Workforce		
Sickness absence rate	<=3.25%	Monthly (rolling 12 month period)
Non medical staff undertaking Professional Appraisal Development Review in past 12 months ⁵	85%	Quarterly
Medical staff undertaking performance appraisal within the last 15 months	100%	Monthly/Quarterly
Statutory and mandatory training ⁵	>=95% (statutory only)	Quarterly
Percentage of staff undertaking performance appraisal	85%	Bi-annually
Percentage of NHS employed staff who have completed safeguarding training	95%	Monthly/Quarterly
Percentage of NHS staff who have been checked by the Disclosure and Barring Service	100%	Monthly/Quarterly
Undertaking performance appraisal who agree it helps them feel valued	70%	Bi-annually
Undertaking performance appraisal who agree it helps them improve how they do the job	70%	Bi-annually

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Percentage of staff who are engaged	70%	Bi-annually
Percentage of staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	80%	Bi-annually
Resources		
Financial position ¹⁰	Report	Monthly/Quarterly
Forecast year end position ¹⁰	Report	Monthly/Quarterly
Public sector payments policy compliance ¹⁰	95%	Monthly/Quarterly
Progress against capital programme ¹⁰	Report	Monthly/Quarterly

5.2 Appendix 2 - Performance Trajectories

5.2.1 Health improvement

Health Improvement	Target	Planned 17/18											
		Q1			Q2			Q3			Q4		
Stop Smoking Wales													
The percentage of adult smokers who make a quit attempt via smoking cessation services	5% annual (SSW contribution 2.01%)	0.56% (2,769)			0.48% (2,376)			0.36% (1,779)			0.60% (2,973)		
The percentage of those smokers who are co-validated as quit at four weeks	40% annual	40%			40%			40%			40%		
Number of clients that became a treated smoker ¹	9,897	923	923	923	792	792	792	593	593	593	991	991	991
Percentage of treated smokers who have a CO reading at four weeks	80%	80%			80%			80%			80%		
Average waiting time for an appointment in this month (days)	14 days	14	14	14	14	14	14	14	14	14	14	14	14
Percentage of treated smokers who quit smoking at four weeks (Self reported)	50%	50%			50%			50%			50%		
Smoking Prevention Programme													
Number of schools targeted	62	62											
Welsh Network of Healthy School Scheme													
Schools achieving level 1 – 5 award	180	180											
Schools achieving the National Quality Award (NQA)	35	35											
Healthy Working Wales ²													
National Exercise Referral Scheme performance													
Number of 16 week consultations	6,492	1,623			1,623			1,623			1,623		

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Number of referrals	23,184	5,796	5,796	5,796	5,796
Number of 1st consultations	16,228	4,057	4,057	4,057	4,057

5.2.2 Microbiology

Microbiology services	Target	Planned 17/18			
		Q1	Q2	Q3	Q4
Clinical Pathology Accreditation status	Accredited	Accredited	Accredited	Accredited	Accredited
External Quality Assessment performance (Bacteriology)	>=95%	97%	97%	97%	97%
External Quality Assessment performance (Virology)	>=95%	100%	100%	100%	100%
External Quality Assessment performance (Specialist and Reference Units)	>=95%	100%	100%	100%	100%
External Quality Assessment performance (Food, Water and Environmental Laboratories)	>=90%	98%	98%	98%	98%
Turnaround time compliance (Bacteriology)	>=95%	96%	96%	96%	96%
Turnaround time compliance (Virology)	>=95%	97%	97%	97%	97%
Turnaround time compliance (Specialist and Reference Units)	>=95%	98%	98%	98%	98%
Turnaround time compliance (Food, Water and Environmental Labs)	>=95%	97%	97%	97%	97%
Turnaround time compliance urgent samples (bacteriology/virology)	>=95%	97%	97%	97%	97%
Non processed samples (Bacteriology)	<=1.5%	1.8%	1.6%	1.5%	1.4%
Non processed samples (Virology)	<=1.9%	1.8%	1.8%	1.8%	1.8%
Non processed samples (Specialist and Reference Units)	<=0.3%	0.3%	0.3%	0.3%	0.3%

5.2.3 Screening

Screening programmes ³	Target	Planned 17/18			
		Q1	Q2	Q3	Q4
Breast screening uptake	>=70%	71%	71%	71%	71%
Breast screening coverage	>=70%	74%	74%	74%	74%
Breast screening: normal results sent within two weeks of screen	>=90%	95%	95%	95%	95%
Breast screening: assessment appointments within three weeks of screen	>=90%	75%	80%	85%	90%
Breast screening: percentage women invited within 36 months previous screen	>=90%	80%	85%	90%	95%
Bowel screening: coverage	60%	52.5%	53%	54%	60%
Bowel screening: waiting times for screening test results	>=95%	95%	95%	95%	95%
Bowel screening: waiting time for colonoscopy	>=90%	85%	85%	90%	90%
Cervical screening: coverage	80%	78%	78%	79%	80%
Cervical screening: lab turnaround times: within three weeks	95%	98%	98%	98%	98%
Cervical screening: waits for results: within four weeks	95%	98%	98%	98%	98%
Cervical screening: waiting time for colposcopy appointment (all CSW direct referrals with abnormal cytology)	90%	92%	92%	92%	92%
Abdominal aortic aneurysm screening: uptake	>=80%	80%	80%	80%	80%
Abdominal aortic aneurysm surveillance uptake: small	>=90%	90%	90%	90%	90%
Abdominal aortic aneurysm surveillance uptake: medium	>=90%	90%	90%	90%	90%

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Newborn hearing screening: percentage offered screening	99%	99%	99%	99%	99%
Newborn hearing screening: percentage entering screening programme	95%	95%	95%	96%	96%
Newborn hearing screening: percentage of babies who complete the Newborn Screen within four weeks	90%	90%	90%	90%	90%
Newborn hearing screening: percentage of babies completing the assessment procedure for New Born Hearing Screening by three months of age	85%	85%	85%	85%	85%
Newborn bloodspot screening: completeness of offer (all babies)	>=99%	98%	98%	99%	99%
Newborn bloodspot screening: coverage (newborns)	>=95%	95%	95%	96%	96%

5.2.4 Health Protection

Healthcare Associated Infections ⁴	Target	Projected 17/18											
		Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
The rate of laboratory confirmed c.difficile cases per 100,000 population	≤72/month (equivalent to rate of 28 per 100,000 population)	80	78	76	74	72	<=72	<=72	<=72	<=72	<=72	<=72	<=72
The rate of laboratory confirmed S.aureus bacteraemias (MRSA and MSSA) cases per 100,000 population	≤51/month (equivalent to rate of 20 per 100,000 population)	70	66	62	58	54	<=51	<=51	<=51	<=51	<=51	<=51	<=51

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Vaccination and Immunisation		Target	Projected 17/18			
			Q1	Q2	Q3	Q4
The percentage of children who received the following scheduled vaccinations at age 4:	5 in 1 age 1	95%	96.7	96.9	96.7	97.3
	MenC age 1		97.2	97.3	96.7	97.6
	MMR1 age 2		96.2	95.8	95.6	96.4
	PCV age 2		96.5	96.3	95.6	96.8
	HibMenC Booster age 2		95.5	95.9	95.2	96.0
Percentage uptake of the influenza vaccine in the following groups:	65 year olds and over	75%	69.7			
	Under 65's in at risk groups		47.8			
	Pregnant women		75.6			
	Healthcare workers	50%	48.3			

5.2.5 Quality

Quality	Target	Projected 17/18			
		Q1	Q2	Q3	Q4
Percentage of serious incidents assured within the agreed timescales ⁶	90%	90%	90%	90%	90%
Number of new Never Events	0	0	0	0	0

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The average rating given by the public (aged 16+) for the overall satisfaction with health services in Wales ⁷	85%	85%	86%	86%	87%
Percentage of NHS employed staff who come into contact with the public who are trained in an appropriate level of dementia care ⁸	95%	To be incrementally increased throughout 2017/18			
Number of Patient Safety Solutions Wales Alerts that were not issued within the agreed timescales ⁹	0	100%	100%	100%	100%
Number of Patient Safety Solutions Notices that were not assured within the agreed timescales ⁹	0	100%	100%	100%	100%
Percentage of NHS employed staff who have completed safeguarding training	95%	87.5%	90%	92.5%	95%
Percentage of NHS staff who have been checked by the Disclosure and Barring Service	100%	100%	100%	100%	100%
Percentage of staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	80%	80%		80%	

5.2.6 Workforce

Workforce	Target	Projected 17/18											
		Q1			Q2			Q3			Q4		
Percentage of sickness absence rate of staff	<=3.25%	3.5%	3.5%	3.2%	3.2%	3.2%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%	3.5%
Percentage of staff undertaking performance appraisal	85%	85%						90%					
Percentage of staff completing statutory and mandatory training	95%	87.5%			90%			92.5%			95%		
Percentage of those who are undertaking performance appraisal who agree it helps them feel valued	70%	70%						70%					

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Percentage of those who are undertaking performance appraisal who agree it helps them improve how they do the job	70%	70%	70%
Percentage of staff who are engaged	70%	70%	70%

Additional notes

1. Annual target of 2.01% of an adult smoking population of 492,360, derived from 19.3% (smoking prevalence from 2015 Welsh Health Survey) and 2015 MYE (over-16 years) from StatsWales.
2. Discussions currently taking place with Welsh Government in relation to the funding for this programme for 2017/18 onwards. The development of performance trajectories are subject to the successful conclusion of these discussions. Following confirmation of funding, performance indicators and trajectories will be developed with Welsh Government.
3. Performance indicators are subject to change in light of ongoing indicator review.
4. C.difficile and S.aureus bacteraemias targets finish on 31 March 2017. Targets and trajectories will be updated following confirmation of targets by Welsh Government.
5. Currently reported outside existing performance report. Work to be undertaken during 2017/18 to rationalise.
6. Due to the small number of SUIs involved, the percentage assured within the agreed timescales can fluctuate considerably if a response falls outside the agreed timescales.
7. Due to the nature of the public facing services provided, Public Health Wales does not have one system to capture service user experience. A variety of methods are therefore used to capture feedback from users of our services.
8. Training has only recently been launched, therefore training data is not currently available. Uptake to be incrementally increased throughout 2017/18.
9. The majority of the patient safety notices are not applicable to Public Health Wales.
10. Reported through monthly finance report.

5.3 Appendix 3 - Delivery Plans

Delivery Plan	Actions Public Health Wales will undertake in 2017/18
Cancer Delivery Plan for Wales 2016-2020	• Plan and implement the introduction of Human Papilloma Virus primary testing in Cervical Screening Wales • Implement Faecal Immunochemical testing in Bowel Screening Wales • Continue to deliver the national screening programmes for cancer • Support the Cancer Network with the implementation of the Innovation Bids. • Support pathway improvements and innovations in priority pathways as directed by the Cancer Network. • Support pathway improvements to improve early detection and treatment as part of the Cancer Network's work programme in this area. • Develop a Memorandum of Understanding for collaborative working in relation to cancer intelligence needs with the Welsh Cancer Network. • Continue to develop its dashboard of population statistics and other key metrics • Continue to support the radon in schools awareness campaign. • Continue to work with Welsh Government to identify other sectors where a similar radon awareness programme could apply. • provide a radon awareness presentation to The National Assets Working Group (NAWG) whose membership a comprehensive range of public sector asset managers • Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards • Implement: ○ a revised pre-school settings scheme ○ the agreed national level action to support implementation of Making Every Contact Count in Wales ○ a revised Health and Work Programme building on the existing Healthy Working Wales Programme ○ an agreed programme of support for communities and voluntary organisations through our Healthy and Well Communities Programme ○ the recommendations of the review of the National Exercise Referral Scheme ○ in conjunction with health boards, the agreed new model for smoking cessation in each area of Wales ○ the next phase of the 10 Steps to a Healthy Weight Programme ○ a new social marketing programme to address childhood obesity ○ a social marketing programme to increase uptake of NHS help to quit smoking ○ joint programme to promote active travel to school ○ agreed action to promote physical activity in Wales with a focus on active travel • Support Further Education and Higher Education in Wales in taking action to promote health and wellbeing among students and staff • Establish improved mechanisms for monitoring and evaluation of activity • Deliver the JustB/Byw Bywyd Programme in target schools • Establish an alcohol prevention partnership across sectors and agree priorities for action to reduce alcohol related harm • Develop a programme of work on illicit and illegal tobacco in conjunction with local authorities, Welsh Government and

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	other partners in line with the revised Tobacco Control Action Plan • Secure agreement with partner agencies and organisations on priority areas for health promotion information to avoid duplication and ensure consistency of messages • Agree with Welsh Government a future approach to the development, production and dissemination of printed health improvement literature Work with local information services and local libraries to develop a system for health information provision in local communities • Develop a revised approach to the provision of health information for parents in the Early Years • Establish a behaviour change and public information team • Develop options for quality assurance of health information with partner agencies
Primary Care Services	• Detail is provided in strategic objective 3A and 3B on the agreed actions Public Health Wales will undertake in 2017/18. • Additional actions we will undertake include: ◦ Deliver a primary care medications patient safety programme targeting initial high impact areas. ◦ Support the development of a national system of reporting and learning from error embedded within primary care clusters. ◦ Support Primary Care Cluster Pharmacists through the development of a 'Community of Practice'
Heart Disease Delivery Plan up to 2016	• Lead and manage the implementation of the First 1000 Days Collaborative Programme • Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards • Support Further Education and Higher Education in Wales in taking action to promote health and wellbeing among students and staff • Support NHS Wales to make progress against the UNICEF Baby Friendly Scheme in key settings • Establish improved mechanisms for monitoring and evaluation of activity • Implement: ◦ the recommendations of the review of the National Exercise Referral Scheme ◦ in conjunction with health boards, the agreed new model for smoking cessation in each area of Wales ◦ the agreed national level action to support implementation of Making Every Contact Count in Wales ◦ a revised Health and Work Programme building on the existing Healthy Working Wales Programme ◦ an agreed programme of support for communities and voluntary organisations through our Healthy and Well Communities Programme ◦ a revised pre-school settings scheme ◦ the next phase of the 10 Steps to a Healthy Weight Programme ◦ a new social marketing programme to address childhood obesity ◦ a social marketing programme to increase uptake of NHS help to quit smoking ◦ joint programme to promote active travel to school ◦ agreed action to promote physical activity in Wales with a focus on active travel • Deliver the JustB/Byw Bywyd Programme in target schools • Establish an alcohol prevention partnership across sectors and agree priorities for action to reduce alcohol related harm • Develop a programme of work to promote mental well-being, emotional literacy and resilience among young people • Develop a programme of work on illicit and illegal tobacco in conjunction with local authorities, Welsh Government and other partners in line with the revised Tobacco Control Action Plan
Together for Health: A	• Provide strategic advice and support to Welsh Government and Health Boards on implementation of national priorities

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National Oral Health Plan for Wales 2013-18	outlined in the WG document – Taking Oral Health Improvement and Dental Services in Wales Forward in Wales (soon to be published) • Work with internal staff/teams and externally with Chief Dental Officer/WG, Health Boards, Cardiff University School of Dentistry, Shared Services Partnership and others to implement key Dental Public Health review recommendations • Provide advice and support to Health Boards on implementation of the national All Wales mouth care bundle for older people in primary care settings. • Support DGH and community hospitals to implement the national All Wales Mouth care bundle. • Support Health Boards to develop robust training programmes for educational providers to ensure consistent evidence based oral health input to all pre-registration nurse courses in Wales, and to address training for Health Care Support Workers. • Support Postgraduate Medical and Dental Education for Wales (PGMDE) with Improving Quality Together (IQT) for dental teams
Diabetes delivery plan up to 2016	• Implement: ◦ the recommendations of the review of the National Exercise Referral Scheme ◦ Implement, in conjunction with health boards, the agreed new model for smoking cessation in each area of Wales ◦ the next phase of the 10 Steps to a Healthy Weight Programme ◦ a new social marketing programme to address childhood obesity ◦ a social marketing programme to increase uptake of NHS help to quit smoking ◦ joint programme to promote active travel to school ◦ agreed action to promote physical activity in Wales with a focus on active travel ◦ a revised pre-school settings scheme ◦ the agreed national level action to support implementation of Making Every Contact Count in Wales ◦ a revised Health and Work Programme building on the existing Healthy Working Wales Programme ◦ an agreed programme of support for communities and voluntary organisations through our Healthy and Well Communities Programme • Deliver the JustB/Byw Bywyd Programme in target schools • Establish an alcohol prevention partnership across sectors and agree priorities for action to reduce alcohol related harm • Develop a programme of work to promote mental well-being, emotional literacy and resilience among young people • Develop a programme of work on illicit and illegal tobacco in conjunction with local authorities, Welsh Government and other partners in line with the revised Tobacco Control Action Plan • Lead and manage the implementation of the First 1000 Days Collaborative Programme • Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards • Support Further Education and Higher Education in Wales in taking action to promote health and wellbeing among students and staff • Support NHS Wales to make progress against the UNICEF Baby Friendly Scheme in key settings • Establish improved mechanisms for monitoring and evaluation of activity
Eye Health Care delivery plan for Wales 2013-2018	• Work with partners to deliver an awareness campaign linked to National Eye Health Week • Work with partners and eye health professionals to develop an eye health promotion and public education strategy for the general public, at risk groups and children. • Link opportunities to promote eye health through other health improvement awareness campaigns.

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	• Provide specialist public health and professional support and advice on eye health. • Develop website to promote prevention work with community opticians
Respiratory Health Delivery Plan up to 2017	• Develop a programme of work on illicit and illegal tobacco in conjunction with local authorities, Welsh Government and other partners in line with the revised Tobacco Control Action Plan • Implement: ○ in conjunction with health boards, the agreed new model for smoking cessation in each area of Wales ○ a social marketing programme to increase uptake of NHS help to quit smoking ○ the agreed national level action to support implementation of Making Every Contact Count in Wales ○ a revised pre-school settings scheme ○ a revised Health and Work Programme building on the existing Healthy Working Wales Programme ○ an agreed programme of support for communities and voluntary organisations through our Healthy and Well Communities Programme ○ the recommendations of the review of the National Exercise Referral Scheme ○ the next phase of the 10 Steps to a Healthy Weight Programme ○ a new social marketing programme to address childhood obesity ○ joint programme to promote active travel to school ○ agreed action to promote physical activity in Wales with a focus on active travel • Deliver the JustB/Byw Bywyd Programme in target schools • Lead and manage the implementation of the First 1000 Days Collaborative Programme • Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards • Support Further Education and Higher Education in Wales in taking action to promote health and wellbeing among students and staff • Support NHS Wales to make progress against the UNICEF Baby Friendly Scheme in key settings • Establish improved mechanisms for monitoring and evaluation of activity • Establish an alcohol prevention partnership across sectors and agree priorities for action to reduce alcohol related harm • Develop a programme of work to promote mental well-being, emotional literacy and resilience among young people
Public Information	• Establish a Behaviour Change and Public Information team which will work closely with colleagues in Communications. • Work with partners to make it easier for the public to recognise trusted quality assured health promotion information and to more effectively exploit digital technology in place of print material, where it is appropriate to do so.
Achieving Excellence – The quality delivery plan for the NHS in Wales 2012-2016	• Provide strategic support on national quality and patient safety policy development - including support for the implementation of the refreshed Quality Delivery Plan.
Stroke Delivery Plan up to 2016	• Implement: ○ the next phase of the 10 Steps to a Healthy Weight Programme ○ a new social marketing programme to address childhood obesity ○ joint programme to promote active travel to school ○ agreed action to promote physical activity in Wales with a focus on active travel ○ the agreed national level action to support implementation of Making Every Contact Count in Wales ○ a revised pre-school settings scheme

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	○ a revised Health and Work Programme building on the existing Healthy Working Wales Programme ○ an agreed programme of support for communities and voluntary organisations through our Healthy and Well Communities Programme ○ the recommendations of the review of the National Exercise Referral Scheme ○ in conjunction with health boards, the agreed new model for smoking cessation in each area of Wales ○ a social marketing programme to increase uptake of NHS help to quit smoking ● Lead and manage the implementation of the First 1000 Days Collaborative Programme ● Deliver the Welsh Network of Healthy School Schemes to agreed targets and quality standards ● Support Further Education and Higher Education in Wales in taking action to promote health and wellbeing among students and staff ● Support NHS Wales to make progress against the UNICEF Baby Friendly Scheme in key settings ● Establish improved mechanisms for monitoring and evaluation of activity ● Establish an alcohol prevention partnership across sectors and agree priorities for action to reduce alcohol related harm ● Develop a programme of work on illicit and illegal tobacco in conjunction with local authorities, Welsh Government and other partners in line with the revised Tobacco Control Action Plan ● Deliver the JustB/Byw Bywyd Programme in target schools ● Develop a programme of work to promote mental well-being, emotional literacy and resilience among young people
Mental Health Delivery plan 2016-2019	● Details on the actions Public Health Wales will undertake during 2017/18 to deliver the Mental Health Delivery Plan 2016-2019 can be found here.
Liver Disease	● Leadership and work with and support the viral hepatitis subgroup group in developing and delivering a HCV elimination strategy in line with World Health Organisation agenda ● Specific projects include: ○ Delivery of the point of care testing pilot for BBVs supported by LDIG funding ○ Appointment and outputs from a BBV research nurse ● Leadership and support to the raising awareness and prevention subgroup ● Provide secretariat to a number of Liver disease implementation group meeting and subgroup meetings ● Support the work of the Liver Disease Implementation Group and other subgroups as appropriate
National Planned Care Programme	● Support the National Planned Care programme to develop sustainable services and improve patient experience including the four initial specialties – ophthalmology, orthopaedics, ENT and Urology.
Antimicrobial resistance	● Public Health Wales have led the development of the Antimicrobial Resistance Plan and have agreed a number of actions including: ○ Deliver a programme of support to enable health boards and trusts to make improvements in Healthcare Associated Infection initial high impact areas - C.difficile disease, Antimicrobial Resistance and Gram negative Healthcare Associated blood stream infection, Staph. aureus blood stream infection and Healthcare Associated Infection and surgical site infection in Surgical Practice ○ Infection prevention and control in both acute and community settings will be improved through the implementation of clear, unambiguous and easily accessible policies and procedures ○ Implement an action plan for the infection prevention management of patients with Carbapenemase-producing Enterobacteriaceae to identify cases and contain further spread of carbapenemase-producing Enterobacteriaceae (CPE) ○ Promote antimicrobial stewardship and support the expansion of the antimicrobial pharmacist role in primary and

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	secondary care ○ Support health boards/Trusts to deliver a multifaceted intervention programme to reduce antibiotic prescribing in highest-prescribing 10% of practices. ○ Work with the NHS informatics Service to develop an audit programme of antimicrobial prescribing for patients presenting with specific infections in primary care ○ Develop resource material for staff and prescribers in care homes ○ Work with the AWMSG and partners to refine primary care antimicrobial prescribing indicators and develop prescribing indicators for secondary care ○ Building on the UK resistance alerts disseminated about: azithromycin-resistant gonococci; carbapenem-resistant Gram negatives; and plasmid-mediated linezolid resistance Public Health Wales will develop alert systems for action ○ Public Health Wales will work with Antimicrobial Management Teams and Health Board/Trust Medical and Nurse Directors to implement the prescribing competencies developed by ARHAI¹ for all antibiotic prescribers in secondary care ○ Review with WAPSU publication of antimicrobial usage with stakeholders (in both primary and secondary care) and implement findings of review ○ Develop web tools to facilitate annual and local point prevalence surveys ○ Develop targeted surveillance of carbapenemase-producing bacteria ○ Develop, with the support of Welsh Government, a genomic platform to support molecular epidemiological studies
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¹ ARHAI - the Advisory Committee on Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) provides practical and scientific advice to the Government on minimising the risk of Healthcare Associated Infections.

5.4 Appendix 4 - Shared Public Health Priorities

Health Board	Alignment with Public Health Wales IMTP	Early years	Primary care and community care	Healthcare outcomes
Aneurin Bevan University Health Board	Prevention and improving population health service change plan is informed and consistent with Public Health Wales IMTP and Public Health Wales strategy map is reflected.	Reducing inequalities in children (part of wider reducing inequalities and prevention strategic change programmes). This includes working with Public Health Wales on prevention of smoking and smoking cessation (particularly during pregnancy), reducing teenage conceptions and vaccination and immunisation.	- Primary care, networks and community services strategic change programme - Strengthening primary and community care that support delivery of care closer to home with a focus on prevention and integration of the care pathway	- Urgent and emergency care - Planned care - Incorporating prudent healthcare principles into all service developments is a focus
Abertawe Bro Morgannwg University Health Board *	- Shared priorities and work being undertaken between Public Health Wales with health board on prevention and wellbeing programmes reflected in the plan and 'Excellent health' priority aligned with those set out in Public Health Wales' IMTP. - Strategic aim for healthier communities which includes reducing inequalities, reducing smoking rates, increasing immunisation rates and physical activity	Incorporated into priority area Healthier communities to reduce health inequalities	- System shift to primary care to reflect population needs, support the reduction in inequalities in care, improve clinical outcomes and support improved efficiency - Targeting <i>C. difficile</i> infection and antibiotic resistance in primary care	- Delivery of priorities for stroke services - Reducing rates of <i>C Difficile</i> and <i>Staph. Aureus</i> Rates - Sustainable and improved unscheduled and planned care systems - Delivering prudent healthcare part of 'purpose' of health board and principles are incorporated into the transformational change programmes
Betsi Cadwaladr University Health Board*	- Aligned with Public Health priorities for 2016/17. - Improvement of the health of the population and reduction of inequalities as a key component of its core purpose	- Targeting vulnerable groups eg. Maternal smoking - Childhood vaccination and immunisation - Childhood obesity	- Establish 'Well North Wales' community development model - Prevention and reduction of the impact of chronic diseases	- Making Every Contact Count (MECC) and Brief Intervention Training - Focus on prevention including vascular and diabetes risk and management identification programme

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Health Board	Alignment with Public Health Wales IMTP	Early years	Primary care and community care	Healthcare outcomes
Cwm Taf University Health Board	- Largely aligned priorities and objectives with those set out in the Cwm Taf IMTP - Working together to improve population health - Strategic focus on health harming behaviours	Indirectly supporting work on Adverse Childhood Experiences through role of Safe, Stable and Nurturing Relationships and Environments (SSNREs)	Supporting evolution of cluster hubs, improving performance and promoting co-production	- Patient safety - Quality - Prudent healthcare - Healthcare associated infections - Quality improvement capacity - Safeguarding - Piloting early cancer diagnosis pathway
Cardiff and Vale University Health Board*	- Shared priorities and work being undertaken between Public Health Wales and with health board on prevention and wellbeing programmes reflected in the plan - First order priorities aligned with priorities for Public Health Wales	- Early years and maternal health a service priority, includes childhood vaccination and reducing prevalence of childhood obesity - Reducing health inequalities through 'Families First' and 'Flying Start'	- Strengthening and development of primary care clusters - Oral and eye health referenced as priorities	- Planned and unplanned care - Reducing healthcare associated infections - Prudent healthcare - Implementation of Liver Plan a key focus
Hywel Dda University Health Board*	Alignment with Public Health Wales strategy and shared priorities and public health focus is included in the plan	Early years feature across the strategic objectives for the UHB including within the risk taking behaviour Strategic Objective and the Overweight and Obesity Strategic Objective. Promoting immunisations and vaccinations	- Lifestyle advocacy in Primary Care - Providing care closer to home - Proactive care	10 Strategic priorities - Principles of prudent healthcare underpin all plans
Powys Teaching Health Board	- Tobacco, physical activity, nutrition and obesity recognised within plan - Reducing health inequalities and improving health - Good alignment across shared priorities however there is little alignment with regard to priority 6- improving the quality, safety and effectiveness of the services we deliver.	Adverse childhood experiences	- Support and develop primary care services - Approach to social prescribing	- Prudent healthcare - Planned care - Mental health - Unscheduled care - Healthcare associated infections - Medicines management

* Information based on content set out within health board plans developed for 2016/17.

5.5 Appendix 5 - Changes to Strategic Objectives

Original Strategic Objective		Amended strategic objective
Priority 1: Working collaboratively and providing system leadership to improve our population's health		
1A	Led, in partnership with the Welsh Local Government Association, strategic approaches to aligning action across sectors to improve population outcomes in agreed priority areas and reduce inequalities in healthy life expectancy now and for future generations	No Change
1B	Delivering action to improve health, taking settings and systems based approaches	Delivering action to increase the proportion of schools, pre-school settings, workplaces, communities and NHS settings which take effective action to promote health.
1C	Led and enabled collective action on the leading lifestyle causes of avoidable early ill health, disability and death (tobacco, obesity and nutrition; physical inactivity; substance use and mental well-being)	Led and enabled collective action on the leading health harming behaviours and key protective factors (tobacco, obesity and nutrition; physical inactivity; substance use and mental well-being)
1D	Influenced system wide action through a focus on common outcomes and intelligence	No Change
1E	Modernised approach to the delivery of health information for the public to support an informed and prudent public	No Change
Priority 2: Working across sectors to improve the future health and well-being of our children		
2A	Mobilised system wide action to improve outcomes in the early years, with a focus on the first 1000 days	No Change
2B	Supported health boards and Welsh Government to implement the <i>Healthy Child Wales Programme</i> .	Led and mobilised action across Wales to prevent and mitigate the impact of Adverse Childhood Experiences
Priority 3: Developing and supporting primary and community care services to improve the public's health		
3A	Worked with health boards and other partners to support a sustainable primary and community care system fit for future generations	No Change
3B	Well-being agendas are aligned between public health teams, primary care clusters and public service boards	No Change

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3C	Developed the Primary, Community and Integrated Care Division of Public Health Wales to be able to support and deliver rapid, transformational change	Removed
Priority 4: Supporting the NHS to improve outcomes for people using services		
4A	Enabled the NHS to apply the principles of prudent healthcare to achieve measurable improvements in priority areas	Enabled the NHS to work across the whole system to support quality improvements underpinned by the principles of prudent healthcare
4B	Worked with health boards and trusts to achieve demonstrable improvements by reducing harm and improving patient safety	Worked with NHS Wales to use patient safety as a driver for higher quality health care
4C	We will have reduced healthcare associated infection rates in NHS Wales and provide strategic leadership and deliver responsive and flexible support with the aim of increasing immunisation uptake rates in Wales	No Change
4D	Led improvements in prescribing and medicines management in NHS Wales, delivering equitable, safe and preventative care for patients	No Change
4E	We will have increased quality improvement capacity and capability within NHS Wales and its partner organisations	No Change
4F	We will have developed and enhanced service that leads across the broader spectrum of safeguarding people	Deliver strategic leadership across NHS Wales on safeguarding people and collaborate with regional partnerships in line with key legislative drivers.
Priority 5: Influencing policy to protect and improve health and reduce inequalities		
5A	A policy capability in Public Health Wales that supports and informs multi sectoral public health working at local, national and international levels – working in collaborations and increasing international investment in Wales.	We will be able to inform and support policy development and cross-sectoral working locally and nationally linking in research and learning from international good practice, and will have embedded the Well-being of Future Generations (Wales) Act 2015 within the organisation as a “way of working”.
5B		Research and evaluation will be embedded in Public Health Wales, through developing and supporting research capacity, generating new knowledge, strengthened collaborative relationships and improved communication to ensure new knowledge is transferred into policy and practice.

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5C		Stronger international impact, links and role in global health; effective cross-organisational and cross-NHS engagement; and leading expertise in investment for health, well-being and sustainable development nationally and internationally.
Priority 6: Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver		
6A	A fully integrated Public Health Services Directorate.	No Change
6B	Developed an integrated Health Protection Service (combining Microbiology and Health Protection) that will deliver a more efficient and effective response to public health threats.	No Change
6C	Provide expertise to support Wales contribution to global health	Now under Strategic Objective 5C
6D	Developed an all Wales microbiology network, based on a three region model managed by Public Health Wales, that brings together high quality clinical and technical expertise and is underpinned by the application of current and emerging technology.	Developed a high quality all Wales microbiology network, based on a three region model managed by Public Health Wales
6E	Ensured that all our screening programmes are meeting or exceeding national standards, using the best available technology to maximise clinical outcomes and have embedded service user engagement	By the end of 2019/20 we will have ensured that all our screening programmes are using the best available technology to maximise clinical outcomes with embedded service user engagement, and continue to meet or exceed national clinical and timeliness standards

5.6 Appendix 6 - Service Provision between Public Health Wales and Health Boards

Services provided to health boards by Public Health Wales	Services provided to Public Health Wales by health boards
Microbiology - infection management, diagnostics, specialist services and UK reference services	Bowel Screening Wales – delivery of colonoscopy, radiology, histology and surveillance services
Health protection - national and local advice and support, including delivery of specific services and programmes	Breast Test Wales – provision of diagnostic surgical biopsies, histological testing and medical sessions
1000 Lives improvement service	Cervical Screening Wales – delivery of cytology, histology and colposcopy services
Local Public Health Teams are available to support implementation of shared priorities	Newborn Hearing Screening Wales - audiological assessment, facilities and support
Health intelligence – provision of evidence and data analysis	Abdominal Aortic Aneurysm Screening – clinical facilities, vascular networks and referral pathway to medical imaging or vascular laboratories
National Safeguarding Service for Wales	Maternal and child screening programmes – governance leads for maternity services
Primary care development support (via Primary Care Development and Innovation Hub)	National bloodspot laboratory (provided by Cardiff and Vale University Health Board)