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Health Board



<b>Meeting Date</b>	<b>24 January 2023</b>	<b>Agenda Item</b>	<b>5.2</b>
<b>Report Title</b>	<b>Report on Progress Against Population Health Actions in IMTP FY 2022/23</b>		
<b>Report Author</b>	Keith Reid, Executive Director of Public Health		
<b>Report Sponsor</b>	Keith Reid, Executive Director of Public Health		
<b>Presented by</b>	Keith Reid, Executive Director of Public Health		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	This paper provides an update to the Committee on progress against the three population health goals contained within the IMTP for FY (financial year) 2022/23.		
<b>Key Issues</b>	The paper identifies that despite some progress in the development of a population health strategy the Health Board is some way adrift from delivering on a range of current population health actions. The paper outlines some actions identified at accelerating progress in delivering current outcomes and identifies a number of barriers.		
<b>Specific Action Required (please choose one only)</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li><b>Consider: the account of progress and the issues raised</b></li> </ul>		

# Report on Progress Against Population Health Actions in IMTP FY 2022/23

## 1. INTRODUCTION

This report updates the Committee on the status of Population Health actions contained within the Recovery and Sustainability Plan / Integrated Medium Term Plan for FY 2022/23.

## 2. BACKGROUND

The IMTP (integrated medium term plan) contains a number of actions badged as 'Population Health'. These actions do not conform fully with the current 'Goals, Methods Outcomes' approach. Performance against those actions is not routinely reported within the Health Board by the usual performance dashboard although they are reflected in the Board Assurance Framework. Consequently, assurance is lacking on progress and/or any mitigating actions.

Three broad areas of work to establish the necessary conditions for delivery of a population health approach in SBUHB were set out in the IMTP. These are:

- the development of a population health strategy;
- building the necessary public health skills capability and capacity within the system locally; and,
- where currently possible, starting to implement actions or projects aimed at supporting population health.

It is important to state that while the Public Health team are leading on some aspects of this work, success in delivery is dependent upon the ability of the service delivery groups and wider partnerships to deliver operational activity that leads to the expected outcomes. The Local Public Health Team, as currently configured, has a role in facilitating and supporting the work but is not responsible for delivery en toto.

### **Development of a Population Health Strategy for SBUHB**

*Action - Co-design of public / population health strategy with communities and stakeholders to reduce health inequities, focused on addressing the root causes and used to inform service delivery within the HB, with sustainable development as the central organising principle – IN PROGRESS*

The Public Health Team have developed an outline public health strategy and engaged in several rounds of stakeholder conversations to assist in the process. A discussion document ready for consultation (internal and external) was presented to Independent Members in mid-December 2022. An amended document will be taken through SBUHB internal governance processes in Q4 for formal adoption by end of Q4. This will be supported by a public facing document and associated collateral that will be available to members of the public, partners and other interested parties. The document will include key findings, calls to action and will be presented in a "plain English" format. A procurement exercise was commenced in December 2022 to find a suitable external creative agency to support its development.

*Action - Establish a SBUHB Public Health Programme Board (or equivalent) as focal point for population health discussions & direction setting – IN PROGRESS*

Inaugural meeting held on 25 November - discussions focussed on the Terms of Reference of this group and on the necessary internal relationships for it to be effective. The draft Terms of Reference will be amended for further consideration. Governance arrangements in other LHBS are being examined to acquire any applicable lessons. Issues that require further consideration are the balance between oversight of operational delivery of population health activities and the shaping of priorities for action within the themes identified in the population health strategy.

*Action - Develop regional and local leadership & partnership functions and support to ensure delivery of a population health approach & plan – IN PROGRESS*

This action relates to the development of consistent and purposeful approaches carried from within the Health Board into our work in partnerships. To be effective this will require development of understanding of how population health approaches are designed and delivered in partnership settings. Responsibility for these approaches will sit across a number of corporate functions and will require co-ordination. This work aligns to but is broader than current intentions to commission services. Some discussions and collaborative working are taking place through the development of the Wellbeing Plans for each PSB area, and ways of working are being discussed with non-statutory partners. However, as an organisation, and as partnerships, we are far from agreed on a regional approach. The appointment of the Associate Director of Population Health Programme Development is another important enabling mechanism to move progress in this area (*interviewing for the role taking place mid-January 2023*).

*Action - Develop and lead local delivery of the population health workstream of the National Clinical Framework – IN ABEYANCE*

This workstream was flagged when there was an expectation that the National Clinical Framework was imminent. It is shelved pending clarification of the implementation of that programme.

### **Building capability within the local system**

*Action - Manage the safe transfer of the Local Public Health Team from PHW to SBUHB - ACHIEVED*

The LPHT transferred to direct employment by SBUHB on 1 October 2022.

*Action - Establish new regional (Hywel Dda + SB UHB) Healthy Weight; Healthy Wales (HW;HW) leadership team – IN PROGRESS*

Collaborative working has been established to support a joint approach to implementing some aspects of the regional response to the 'HW;HW' programme of Welsh Government. Recruitment of a regional coordinator (Principal Public Health Practitioner) is underway and it is anticipated to be appointed by end of January. The role will enable support to drive forward the whole systems working funded by a grant from WG administered through PHW.

*Action - Development of new Business Intelligence products to support 'HW;HW' system leadership work programme – IN PROGRESS*

There is a need to create products to support both the All Wales Weight Management Pathway reporting and inform work addressing obesity. However further work is needed at an internal level, but there is a lack of capacity in Digital, Public Health Teams and lack of pathway co-ordinator at SBUHB level.

As part of the HWHW grant funding, and following a procurement exercise, Leeds Beckett University have been appointed to develop a Systems Mapping and Social Network Analysis of Healthy Weight Systems, with an anticipated completion by end of Q4 22/23.

*Action - Develop a population health intelligence function and products, in collaboration with HB colleagues and key partners – IN PROGRESS*

There are ongoing discussions with colleagues in Digital internally around the development of business intelligence functions to support population health approaches. Despite willingness on both sides a lack of capacity in Digital has constrained progress in developing these approaches. Discussions with Swansea University continue over the possibility of a joint appointment between the Public Health Team and the University to develop intelligence approaches including use of resources available within the University to support population health programmes. This approach is being pursued as part of the recruitment and reconfiguration of the Public Health Team.

*Action - Provision of public health technical expert guidance & support – including the pan-cluster planning group (aligned to the Accelerated Cluster Development programme), PSBs, RPBs and other fora as indicated by capacity and need*

A nationally agreed programme to introduce a population segmentation approach to assist in tailoring health services to patterns of care consumption has not been funded for FY 2022/23. Discussions are underway at a national level to establish whether central funding for this programme is available. A programme of work across the Health Board in the areas of Health Needs Assessment and Health Equity Audit to support population health aspirations could be developed but currently there is no identified capacity to support such work. Scoping the extent of such work would assist in understanding the workforce requirements. There is an expectation from the Primary Care National Programme Board that support will be delivered in areas such as Health Needs Assessment to Pan Cluster Planning Groups from Local Public Health Teams but no additional resource is being made available to support this. Creating capability in this area will be fundamental to the successful development of the Health Board's commissioning approach.

### **Tackling Population Health challenges: Taking action to improve health outcomes and reduce inequalities through a focus on health behaviours**

*Action - Develop a regional HWW delivery plan and reporting mechanisms – IN PROGRESS*

*Action - Supporting the development of a SBUHB Tobacco Control approach in line with the emergent all-Wales Strategy – IN PROGRESS*

For existing or emergent areas of public health action directed by Welsh Government Public Health support continues to be inconsistent. These include new Ministerial Priorities in Tobacco Control and the Healthy Weight; Healthy Wales action plan. No additional SBUHB resources have been made available through the IMTP to support these 'must-dos'. Some grant funding is currently being sought from Welsh Government to support action but it will not be sufficient to deliver against all Welsh Government expectations. To mitigate the gap in the current planning process where these activities have not been considered as priorities for funding locally, a Consultant in Public Health Medicine has instigated a Clinical Advisory Group of key players across the organisation on weight management within SBUHB. The purpose is to create a draft weight management plan, including different options/ options appraisal, for Exec decisions by the end of Q4. Welsh Government has indicated an expectation that there should be dedicated management capacity for the development of the AWWMP (all-Wales Weight Management Pathway).

The Public Health team has adopted a similar approach to Tobacco control, instigating a Clinical Advisory Group led by a Consultant in Public Health Medicine, covering Help Me Quit in Hospitals, Maternal Smoking Cessation Services and Smoke-Free sites since the previous central group focused has fallen into abeyance on the departure of its leadership from SBUHB. SBUHB funding for tobacco control remains limited and the smoking cessation service, which sits within Primary Care and Therapies Service Group is under-resourced. The Ministerial priority to introduce smoking cessation interventions for all planned admissions represents a significant investment requirement. A grant application to Welsh Government for funding to support investment in stop smoking services has been submitted but there is an expectation that SBUHB will also directly fund this provision. The same pertains for maternal stop smoking provision – grant application submitted, we are in negotiations with Welsh Government to understand on what funding they will release to us but expectation that SBUHB funds will be available.

*Action - Healthy schools scheme delivery across Swansea Bay in line with national requirements - ACHIEVED*

The Healthy Schools Scheme team are grant funded by Public Health Wales to support delivery of the Health Schools Programme in early years and statutory educational settings. They work

closely with local authority colleagues to deliver this nationally mandated programme. The Team also transferred across to SBUHB employment on 1 October 2022. The Team are wholly employed in the delivery of the programme in line with the conditions attached to the grant award. There are some longstanding concerns about the grant and the future work under the programme that are not unique to SBUHB but are of note. The grant value is static meaning that the salary element of the grant will not cover the full pay of the Healthy Schools team in its current form beyond June 2024. This has been raised through a number of avenues with PHW/Welsh Government but we have been advised that there are no intentions to uplift the salary contribution. Secondly, an evaluation of the current scheme and its objectives and deliverables has been undertaken and the recommendations submitted to Welsh Government for consideration. It is unclear at this time as to what elements of the proposed restructure will be approved and timeframes but it is anticipated that there may be significant changes to the scheme.

*Action - Supporting the Implementation of the Integrated Public Health Approach to Tackling Substance Misuse by statutory agencies through the West Glamorgan APB – IN PROGRESS*  
Support in this area is restricted to the Director of Public Health acting as the current Chair of the Area Planning Board. Discussions are underway among the responsible authorities on how best to support the development of the Integrated Public Health Approach, which despite its moniker, is not reliant on public health leadership for success. Along with SBUHB, Public Health Wales is identified as a responsible authority in relation to substance misuse and historically some PHW resource was deployed in support of the APB (area planning board). The Public Health Team intends to recruit a new role to support the strategic development of this area – the role is currently awaiting Job Evaluation, with a decision anticipated by mid-February. The launch event for the Western Bay Substance Use Truth Commission took place on 7 December which created a collaborative space focussed on the collective response to the harms associated with substance use, what do we need to improve and how the Commission can help tackle these issues. A Joint PSB (Public Services Board) meeting specifically focused on Substance Use has been scheduled for 16 January which will include discussions on actions needed to create successful and sustainable partnership working across the region. A paper co-authored by the Senior Reference Group established by the PSB will be setting out a roadmap for development of a new way of commissioning and delivering substance misuse services. However, detailed worked to delivery this new approach will require SBUHB involvement and the full implications of that are not yet clear.

*Action - Co-design of a regional cross sector suicide & self-harm plan with partners – IN PROGRESS*

The Multi Agency Action Group on Suicide and Self-Harm has been chaired by a Public Health Consultant for a number of years now. However, this forum is one of a number of groups active in the mental health space that have a role to play in suicide and self-harm prevention. The Group has been in abeyance since a review was undertaken post-COVID to reflect the changed landscape and the need to understand its role & purpose. In addition, the national T2M2 strategy is being refreshed and this is intended to be used to inform a South West Wales regional strategy which in turn is expected to inform a Swansea Bay regional plan. Much work has been progressed, opportunistically. However, the focus to date has been on secondary prevention actions – in particular dealing more effectively with mental health crisis and/or postvention & bereavement impacts and risks. The Health Board Quality Initiative on Suicide Prevention has been internally focused and is solely focused on staff mental wellbeing. In recognition of this, further conversations have led to an appetite being expressed to develop the Health Board's strategic intent, in line with the Population Health Strategy (PHS) and with actions that adopt the 4-pillars approach. There is also work being commissioned by the RPB to develop a mental & emotional health strategy, due end of March. Hence it is not clear of the relationship or status of any suicide & self-harm prevention plan with regards to those other activities. Insight work

undertaken and the PHS development has further highlighted the importance of mental health, the significant and increasing mental health distress and the impact of this on the system as a whole. Hence recognition remains that whole of system action is required with a stronger focus on the preventative action and root causes and drivers that can help to improve impact of collective efforts. In addition to the initiatives above, Welsh Government sponsors a separate Regional Suicide and Self-Harm reduction infrastructure which sits across a South West Wales footprint. There is a need for better co-ordination of actions within SBUHB and across the Region and preliminary discussions have taken place on how approaches can be aligned. The level of resource and support required for effective and sustained action is not yet clear but is currently one of the limiting factors to progressing the work

*Action - Climate change and sustainability- developing a population health approach to climate change, including mitigation, adaptation and circular economy approaches – IN PROGRESS*  
A Consultant in Public Health has supported decarbonisation and sustainability actions in the Health Board by providing technical support to the SBUHB groups. This will continue. These initiatives are led from within the Planning and Strategy team. The same Consultant is also linking in with PSB subgroups and early discussions with Corporate Joint Committee on aligned agendas (transport, energy, economic development). A Public Health Practitioner is also working on the Connecting Green Infrastructure agenda with NPTCBC (Neath Port Talbot County Borough Council) colleagues with HB estates and primary care to develop GI that contributes to nature recovery, contributes to patient wellbeing, improve air quality and reduce environmental risks. To date, the sites currently in scope include, Cefn Coed Hospital, Baglan Resource Centre, The Forge and Mount Surgery in Tai Bach. NPTCBC Team state that the projects have such potential and value they are currently seeking a larger grant award from the Heritage Fund.

## **GOVERNANCE AND RISK ISSUES**

There is ongoing concern that 'Public Health' ('Population Health') initiatives or approaches, which naturally sit across all service groups or in partnership spaces, are not governed effectively at present. This sentiment was echoed in discussions through the inaugural Population Health Development Board. While there has been a willingness and enthusiasm to engage in discussions on becoming a population health-focussed organisation, there has been limited progress in the coordination of delivery of population health activities and system planning.

There is financial risk to SBUHB that delivering against Ministerial priorities is currently unfunded and that grant monies available (if applications are approved) are inadequate to ensure sustainable delivery. There is reputational risk to SBUHB given that our level of delivery against a number of Welsh Government population health initiatives is adrift of expectations. This was highlighted in the end of year JET (joint executive team) and again in the IQPD (integrated quality and planning delivery) forum recently.

## **FINANCIAL IMPLICATIONS**

Actions within the IMTP were all labelled as 'Cost Neutral' but the process for arriving at this designation is not clear. There are potentially significant investment requirements to support Ministerial priorities in the tobacco control and Healthy Weight; Healthy Wales spheres.

Initial applications for grant funding of up to £792K for this financial year were turned down by Welsh Government as they were not in support of our proposed plan, which deviate from the approach taken by other LPHT (local public health) teams, while failing to acknowledge that other HBs organisations teams are starting from a different position to us with an established LPHT and existing population health focussed structures (both internal to their HB and externally in partnership spaces). However, we believe our proposals give us the best chance of maximising opportunities to build improvements in population health. Further discussions are taking place with

Welsh Government but given the timescales, we are unlikely to secure some, if any, funding under this programme for the current financial year. A similar sum is available for FY 2023/24 against the same priorities. It should be noted that this envelope is inadequate to deliver all the current priorities. The development of detailed business plans to quantify the required investment has been hampered by a lack of business planning support to the Public Health Team and the service groups involved, although some planning support has been provided in the last month to enable discussions around embedding population health into GMOs and developing proposals for the Tobacco Control and Weight Management agendas via a Clinical Advisory Group led by a Consultant in Public Health.

The transfer of the Local Public Health Team from Public Health Wales is supported by a transfer of funds. The total envelope is £1.217M with the bulk of this being pay costs and some adjustment due for the pay uplift. This sum is hypothecated for the next 3 years. As indicated above there are vacancies in the team currently and an intention to restructure and recruit to a different and more appropriate skill mix. Consequently there is underspend this year.

### **RECOMMENDATION**

The Committee is asked to consider the account of progress against the 'population health' elements of the IMTP for 2022/23 and the issues raised.

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> <i>(please choose)</i>	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
<b>Health and Care Standards</b>		
<i>(please choose)</i>	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
<p>The paper outlines progress to date around population health initiatives. The absence of effective tobacco control approaches and comprehensive weight management approaches means that opportunities for patients to be supported to make changes that will reduce their risk of ill-health are not being offered.</p>		
<b>Financial Implications</b>		
<p>The paper identifies that investment is required in order to make progress in a number of areas of priority for Welsh Government or where there is already an identified high level of need in our communities. However, that investment is not quantified.</p> <p>The process for development of business cases in support of population health investment is not clear and the lack of support to develop such cases is highlighted.</p>		
<b>Legal Implications (including equality and diversity assessment)</b>		
No legal implications identified.		
<b>Staffing Implications</b>		
<p>Developments in support of Ministerial Priorities will require additional staffing and this will be addressed through the emergent business cases.</p> <p>The Public Health Team restructure intends to alter the skill-mix compared with the funded establishment and is likely to result in fewer staff of higher banding being employed. There is no intent to make current team members redundant.</p>		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
Public Health approaches incorporate a prevention ethos and delivery is contingent on collaboration among partners to deliver better outcomes for our population. A		



coproduction approach is integral to public health practice and seeks to involve communities and staff in designing services and programmes.	
<b>Report History</b>	No previous reports
<b>Appendices</b>	N/A