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Proposed initial actions emerging out of the PHS for the Health Board

Recommendation Number	Pillar	Population Health Priority Statement	Supporting narrative (to include why needed; what trying to achieve; what's needed / what action or resource required)	Organisational Action Recommendations
1.	1. Healthcare provider	Commitment to implementing an innovative, locally-adapted Population Health Management approach that enables targeted preventative action based on current and future healthcare need to inform service delivery and shift the focus 'left'.	Population Health Management involves combining primary care, secondary care and wider datasets to inform the development and targeting of services based on healthcare need, not demand. It enables preventative actions before healthcare needs escalate and more effective targeting of resources by incorporating factors such as patient activation and the patient's ability to benefit. There is an opportunity to develop an innovative local segmentation and risk stratification approach tailored to tackle local priorities based on learning from elsewhere in Wales and from other countries. And to drive down health inequities by ensuring a needs-based approach.	<ol style="list-style-type: none"> 1. Agree/secure funding for additional infrastructure and capability. 2. Baseline assessment of existing PHM intelligence capability & capacity 3. Population segmentation & risk stratification framework 4. Population segment specific action plan
2.	1. Healthcare provider	Implement the WG priorities on tobacco control as outlined in the Tobacco Control Strategy and Delivery Plan.	Delivering on the Tobacco Control Strategy for Wales is a ministerial priority for Health Boards. This includes: the continual improvement of the Help Me Quit Service to enable it to meet Welsh Government targets on smoking cessation and support of harder to reach groups; implementing a maternal smoking cessation service to support pregnant smokers to quit smoking; implementing a Help Me Quit in Hospital model across the Health Board to ensure that all patients who are smokers are offered timely smoking cessation support before, during and after their hospital stay; and enforcing the Smoke Free Hospital sites legislation.	<ol style="list-style-type: none"> 1. Agree sustainable funding to progress priorities in the Health Board delivery plan 2. Maximise externally available funding opportunities to develop smoking cessation services – augmenting not replacing local funding 3. Agree appropriate operational & performance management routes for delivery that work across the organisation 4. Establish Tobacco control baseline position
3.	1. Healthcare provider	Implement the WG priorities on healthy weight as outlined in Healthy Weight Healthy Wales strategy.	There are a number of healthy weight priorities which the health board must deliver. These include the implementation of weight management services for children and adults in line with the All Wales Weight Management Pathway and the implementation of a Whole System Approach to healthy weight.	<ol style="list-style-type: none"> 1. Secure sustainable model to resourcing service provision. 2. Establish baseline position around healthy weight priorities 3. Benchmark against existing LHBs in Wales 4. Develop detailed service specifications to support the implementation of the All Wales Weight Management pathway

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4.	1. Healthcare provider	Support the healthcare workforce to develop the skills required to support themselves and patients to mitigate the impacts of the wider determinants of health and to make changes that enable a healthy lifestyle and are focused on prevention.	<p>There is a need to embed a prevention ethos across the patient pathway and ensure there is greater investment in prevention across all areas of activity, which is evidence informed and focused on long-term outcomes.</p> <p>There is significant & broad support across the system for the approach, with a sense this is the first time that there has been an articulation which encompasses and recognises the collective efforts of all healthcare staff and is a way of binding/creating synergies. The approach in itself has helped to strengthen existing connections and develop new connections across the health system, which can be developed and strengthened to ensure the whole workforce is able to develop the capabilities to start embedding different ways of working in their routine, day-to-day activities and service planning & provision.</p>	<ol style="list-style-type: none"> 1. Scope out opportunities / priorities for workforce capability & capacity development in line with strategic priorities. 2. Population health informing changes to service design & delivery informing organisation quality improvement agenda. 3. Identification & development of relationships organisation wide to develop understanding, capability & capacity in PH
5.	2. Employer	Develop a whole systems approach that takes assertive action to create environments that are health improving / promoting & tackle racism, discrimination & health inequities for all our staff.	<p>Whilst there are a number of different areas that could form a focus initially, given the areas of work that are already underway within the health board, recognising the priorities identified by staff and some of the synergies with other plans and deliverables, the Health Board's initial focus would be to:</p> <ul style="list-style-type: none"> • Develop a food policy that addresses issues around the access to, promotion, affordability & sustainability of healthy food and drinks for all our staff as well as minimising waste • Implementing the health board's sustainable travel strategy - supporting a modal shift from private transport to active travel and public transport, active travel, as well as building on existing work to create/develop policies and incentives that enable more active and sustainable travel for our staff 	<ol style="list-style-type: none"> 1. Develop effective relationship with key partners embed population health principles that influence organisational behaviour and decision making: Procurement, Sustainability, Capital & estates 2. Stakeholder mapping & identification of key areas for influence
6.	2. Employer	Strengthen fair working practices that support all staff to maximise their health & wellbeing.	<p>Fair work is a key aspect of the Marmot objectives and therefore is a significant theme within the Population Health Strategy. As a Health Board we have stated our ambitions in terms of our workforce in our R&S plan for 2024-25. Many of these actions align well with the key principles within the Fair Work Commission. The actions below build on these, bringing in the social determinants of health approach in line with the PHS guiding principles. As an initial focus the HB will look to:</p> <ul style="list-style-type: none"> • Apprenticeships – to evaluate the schemes in order to get a better understanding of the population health benefits that accrue from it. • Monitor & review our policies and offering benefits that protect our staff from unmanageable debt / poverty 	<p>Suggested actions for the health board to take forward as an employer include:</p> <ol style="list-style-type: none"> 1. Scope current provision of benefits that protect staff from unmanageable debt / poverty ; provision and targeting of advice around changes to income that may have negative consequences. 2. Review standard job descriptions against pre-set criteria assessing their ability

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			<ul style="list-style-type: none"> Continue to develop a high quality and wide range of employment & skills development opportunities for all staff 	<p>to support a diverse workforce, environmental sustainability, and health equity.</p> <ol style="list-style-type: none"> Support employees to have a voice and be heard, Scope current staff engagement processes and identify any areas of potential inequity. Co-produce initiatives that enable staff to access and afford the systems that enable them to access work e.g. childcare, (low carbon) public transport
7.	2. Employer	Review our current approaches to improving our staff's mental health & wellbeing with a focus on the social determinants of health and inequity, as part of our development as a mental health literate and compassionate organization.	Mental health and wellbeing has been a consistent and strong theme that has come out from engaging with our stakeholders. It is closely linked to each of the Marmot principles, caused by the issues encountered but often also a causal factor for them. For example, those with mental health conditions are more likely to be in poverty or not in employment than those without any mental illness. We also know that we are seeing increasing numbers of our workforce either off sick or leaving employment due to stress, anxiety and depression. However, there is a strong evidence base of what works that we can draw on. There is much that we are already doing and the opportunity therefore is to build on this, working with our employees and drawing on their lived experiences to better what we currently do.	<ol style="list-style-type: none"> Better understand our current offer and practice, especially in areas with high levels of sickness due to stress/anxiety; or areas of high turnover. Continue to deliver and build on existing SBUHB Wellbeing initiatives
8.	3. Anchor institution	Review our internal procurement and commissioning processes to ensure that Foundational Economy and Circular Economy principles are embedded which maximise long-term population health benefits and are sustainable, including supporting local employers, minimising waste and reducing carbon emissions.	A key barrier to delivering change identified during engagement included the short term nature of funding and projects which leads to small scale, 'safe' initiatives in the absence of a long term vision with limited impact at a population level. There is a real desire to be able to plan for the longer term in terms of actions, as well as collaboration and sharing of resources across the health board and across organisations in order to deliver population health impact.	<ol style="list-style-type: none"> Develop principles and agreed processes ensuring key aspects of foundational economy & circular economy as well as equity as explicit and embedded
9.	3. Anchor institution	Reduce our impact on nature and wider environment protecting & enhancing biodiversity, as well as strengthen	The Health Board is a significant contributor of carbon emissions and has a key role in collective public sector ambition towards reaching net zero. The impact of climate change is a real and significant	<ol style="list-style-type: none"> Develop effective internal & external partnerships across

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		resilience to climate and nature risks alongside decarbonisation targets.	threat which is not distributed equally across the social gradient and our most vulnerable communities are unable to mitigate against this impact . Air pollution is affecting the health of our population with vulnerable groups and low-income families experiencing greater adverse health effects. As an anchor institution the Health Board has a significant role in driving action in this area and will as a consequence maximise population health benefits for current and future generations.	the locality to reduce impact on environment.
10.	3. Anchor Institution	Capitalize on opportunities to influence place-making agenda that enhances placemaking and supports nature recovery, as well as strengthen resilience to climate risks alongside mitigation strategies.	Partners agree that a place making approach is required in developing sustainable and healthy communities and to recognise that strong communities is much more than community cohesion, although there are some examples where some guidance and policy does not enable this approach. This aligns well with the neighbourhood based approaches within the Primary Care Clusters. The initial focus will be on developing an approach to: <ul style="list-style-type: none"> • engagement with LDP/planning • using our buildings / assets as community hubs; • ensuring protection for good quality play / green spaces; housing; cycle routes; employment & business creation for local people etc. • Effective collaboration with key strategic partners to mitigate against the impact and risks of climate change using One Health approaches 	<ol style="list-style-type: none"> 1. Establish an approach to responding to and influencing consultations that impact placemaking, planning & development. 2. Creating healthy and sustainable communities there is a need to ensure that health is contained in all policies and is included in regional and local development plans, therefore the Health Board has a key role in contributing to this development.
11.	4. Productive partnerships	Develop and improve our internal capability & ways of working across a range of external partnerships that focus on the wider determinants of population health & inequity through advocacy, guiding collective action.	During stakeholder engagement and discussions within the Population Health Development Board it was clear there isn't an established way of working on cross-cutting initiatives within SBUHB other than by setting up bespoke or ad hoc working groups. This is not sustainable nor systematic. There is a need to develop organisational ways of working to support the implementation of population health that recognises that it is not a 'service' group / entity and its implementation has to be owned and acted on by all parts of the Health Board. Business as usual process will therefore need to adapt to reflect this.	<ol style="list-style-type: none"> 1. Develop organisational ways of working to support the implementation of PH Strategy 2. Facilitation & integration of action across partners that recognises the roles that all can contribute to the broader collective goal. 3. Actively set out to develop SBUHB reputation as a trusted partner 4. Promote and develop a regional commitment to Health in All Policies
12.	4. Productive partnerships	Active and enduring commitment and involvement in key anti-poverty related fora across the region e.g. Swansea Poverty Truth Commission & the Neath Port Talbot Cost of Living project and to	There are longstanding inequalities in the standard of living across the Swansea Bay population, which has been worsened by the COVID-19 pandemic and risk further widening as further threats emerge, including the cost of living crisis and the increasing impacts of the climate emergency. There is widespread support from local	

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		use that learning to shape decisions & actions through partnerships that address the root causes.	<p>partners on tackling these persistent inequalities and there are a number of policies in Wales that can be utilised to progress this agenda, although it is worth noting that some of the key policy areas which are implicated in this objective are not currently devolved to Wales.</p> <p>Given the complex and inter-related nature of these issues, it is important there is clear integration of action across partners that recognises the roles that all can contribute to the broader collective goal.</p>	<p>5. Create a clear agenda and set of priorities to take into the partnership space (eg the PSBs)</p> <p>6. Engage with local communities in place based approaches eg building on Our Neighbourhood</p>
13.	4. Productive partnerships	Strengthen & build our partnerships and systems approaches with purpose – agree shared outcomes, aligning to & agreeing priorities to focus on to achieve maximum impact/benefit	We need to review and consider how we engage with partners. The Population Health Strategy has created a framework for SBUHB to agree internally on priorities for action. We also need to organise ourselves corporately to ensure consistent engagement with partners in external forums. The purpose being to agree as a collective on shared and common goals/objectives that support the implementation of the PHS, across all the pillars. This will require establishing new ways of working in partnerships. The challenge is to ensure that these agreed priorities are carried in a way that allows SBUHB aims to be pursued while respecting that partnerships inherently require pooling of sovereignty	