



PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL
STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 April 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Public Health Directorate Health Improvement Strategic Plan
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Dr Ardiana Gjini – Executive Director of Public Health
SWYDDOG ADRODD: REPORTING OFFICER:	Dr Rob Green – Interim Deputy Director of Public Health Joanna Dainton, Head of Health Improvement and Wellbeing

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

This Strategic Plan outlines the actions planned over the next two years as part of the continued development of the health improvement work of the Public Health Directorate, alongside an overview of work to improve the wider determinants of health and promote health equity.

These plans are a key component of the Health Board's work to promote good health and prevent ill health, which will be essential as we face the challenges presented to our care system by rising levels of ill health.

The plan contains actions across the following domains:

- Healthy Weight
- Tobacco
- Alcohol and Substance Use
- Suicide Prevention, supporting Mental Health and regional suicide prevention teams
- Wider Determinants of Health and Health Equity
- Holistic approaches to support healthy lives.

The Strategic Development and Operational Delivery Committee (SDODC) is asked to receive assurance that evidence-based plans are in place aligned to Strategic Objective 4, which will prevent ill health and contribute to the long-term sustainability of service delivery. Going forward, long term commitment to a focus on prevention and population health will be essential.

Cefndir / Background

Summary

The Health Improvement Strategic Plan outlines our work over the next two years towards six key objectives that, with sustained investment, will form the cornerstone of helping more of our residents live healthy, happy lives. This work is part of a wider shift to prevention that will be required if we are to reverse the long-standing increases in ill health, and which pose a

significant risk to the future sustainability of our service delivery.

Included in this Strategic Plan are metrics and outcomes that are key to understanding our progress and informing the shape and scale of future plans.

The new Health Improvement and Equity Oversight Group, reporting to the Population Health and Oversight Group, will oversee the delivery of this plan and support a joined up, pan-Hywel Dda approach to our future work in health improvement and the wider determinants of health.

Our objectives are as follows:

- Objective 1: Supporting Children and Young People to Live Healthy Lives
- Objective 2: A Smoke-Free Mid and West Wales: Hywel Dda University Health Board (HDdUHB) Tobacco Control Strategy
- Objective 3: Healthy Weight: Taking a Whole Systems Approach
- Objective 4: Reducing the Harm Caused by Drug and Alcohol Use
- Objective 5: Developing Holistic Approaches to Supporting Healthier Lives
- Objective 6: Working in Partnership to Address the Wider Determinants of Health and Improve Health Equity

Issues of Significance to the Health Board

The Health Board faces the combined challenges of increasing levels of ill health, and an ageing population. Since 2009/10 the number of adults with diabetes in Wales has risen by 40%¹, it is forecast that 1 in 11 adults will be living with diabetes by 2035/36. In England the number of people living with major illness is projected to increase by more than a third by 2040².

Healthcare need and demand are set to continue to increase, in the context of ongoing financial, staffing and estates challenges.

In order to mitigate against these challenges, a long-term strategic shift to prevention is required to stem increasing levels of ill health and multi-morbidity.

Smoking, poor diet, physical inactivity and harmful alcohol use are leading risk factors driving the UK's high burden of preventable ill health and premature mortality. All are socioeconomically patterned and contribute significantly to widening health inequalities³.

The current position of the Health Board is outlined below:

- 17.5% of adults drink more than national guidelines
- 13% of adults smoke
- 29% of children aged 4 - 5 overweight or obese
- 63% of adults are overweight or obese
- 10 years more life in good health for someone from our wealthiest communities vs poorest

National / local objectives involved

The Strategic Plan supports local delivery against the following national or local strategies and action plans:

- Healthier Mid and West Wales: Strategic Objective Four: The best Health and Wellbeing for our Communities

¹ [Diabetes prevalence – trends, risk factors, and 10-year projection - Public Health Wales \(nhs.wales\)](https://www.nhs.uk/publications/diabetes-prevalence-trends-risk-factors-and-10-year-projection/)

² [Health in 2040: Projected patterns of illness in England \(health.org.uk\)](https://www.health.org.uk/news/articles-and-reports/health-in-2040-projected-patterns-of-illness-in-england)

³ [Addressing the leading risk factors for ill health - The Health Foundation](https://www.healthfoundation.org.uk/press-releases/addressing-the-leading-risk-factors-for-ill-health)

- Hywel Dda University Health Board 2024/24 Planning Objective 10: Population Health
- Well-being of Future Generations Act (2015)
- Socioeconomic Duty
- Public Service Board Well-being plans
- Smokefree Wales 2030
- Welsh Government Substance misuse delivery plan
- Healthy Weight: Healthy Wales
- Welsh Government draft suicide and self-harm prevention strategy

Asesiad / Assessment

Assessment of the Health Board's current position

The Health Board currently delivers a range of health improvement activities, both within the Public Health directorate, and in other areas such as Primary Care and Therapies. This plan unifies the health improvement work of the Public Health Directorate within a single vision, in the context of the wider work being undertaken around the Health Board.

Excellent work is currently being done in a range of areas:

- Smoking cessation: HDdUHB is the only Health Board to achieve the national target of 5% of active smokers engaging with smoking cessation services, and won a national award at the Mental Health and Wellbeing Awards.
- Substance use services: Pioneering role out of Naloxone (antidote to opiate overdose) with local police force, alongside mobile community delivery under the 'spike on a bike' model. Development of innovative early help and intervention service.
- Children and young people: Hywel Dda region has the highest rate of engagement with the Whole School Approach to Emotional and Mental Well-being.

A key aim of the new governance structures for Population Health is to strive for a system wide vision for health improvement and equity, which will provide the foundations for a shared strategic direction and help maximise the population health gains. Over the course of this strategic plan we will be developing this unified vision for health improvement to strengthen future planning and delivery.

Organisational risks

The Health Improvement Strategic Plan is a key component of the shift to prevention that is required across the Health Board. Failure to deliver preventative interventions at sufficient scale will mean a larger burden on ill health and subsequent demand on services in the future. It will also result in a less healthy workforce with direct impact on staffing for the Health Board, and indirect impacts on the regional economy.

Evidence base to help inform decision making

The Strategic Plan covers a wide range of evidence-based, health improvement activities, a number of which are either recommended or mandated national programmes delivered according to local needs and priorities. The following resources are available for comprehensive overview of each domain:

- Investing in children and young people key component of reducing health inequalities and working on wider determinants of health – Fair Society, Healthy Lives (Marmot Review).

- Importance of multi-component tobacco control programmes in preventing tobacco-related morbidity and mortality – World Health Organisation (WHO) Framework on Tobacco Control.
- Importance of multi-component substance use programmes in preventing drug-related morbidity and mortality, and wider community impacts – Independent review of drugs by Professor Dame Carol Black.
- Evidence for multi-component programmes to reduce harms from alcohol – Burton R et al. A rapid evidence review of the effectiveness and cost-effectiveness of alcohol control policies: an English perspective. Lancet. 2017.
- Emerging evidence for a 'Whole Systems Approach to Health Weight' – National Institute for Health and Care Research (NIHR) Embracing system-wide approaches to support healthy weight.
- Rising burden of ill health facing UK: Health in 2040: Projected Patterns of Illness in England (Health Foundation).
- The evidence and context for suicide prevention programmes is summarised in the current consultation document for the Welsh Suicide Prevention Strategy.

Argymhelliad / Recommendation

The Strategic Development and Operational Delivery Committee is asked to **RECEIVE ASSURANCE** that plans are in place for the delivery of health improvement activities related to 2024/25 Planning Objective 10: Population Health, and any relevant successor planning objective for 2025/26, in order to support the long term achievement of Strategic Objective 4 (The best health and wellbeing for our individuals, families and communities).

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 To receive an assurance on delivery against all relevant Planning Objectives falling in the main under Strategic Objectives 4 (<i>The best health and wellbeing for our individuals, families and our communities</i>) and 5 (<i>Safe, sustainable, accessible and kind care</i>), in accordance with the Board approved timescales, as set out in HDdUHB's Annual Plan.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	3. Effective 4. Efficient 5. Equitable 6. Person-Centred
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply

Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Putting people at the heart of everything we do 3. Striving to deliver and develop excellent services 4. The best health and wellbeing for our individuals, families and communities
Amcanion Cynllunio Planning Objectives	7a Population Health
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	<ul style="list-style-type: none"> Investing in children and young people key component of reducing health inequalities and working on wider determinants of health – Fair Society, Healthy Lives (Marmot Review) Importance of multi-component tobacco control programmes in preventing tobacco-related morbidity and mortality – WHO Framework on Tobacco Control Importance of multi-component substance use programmes in preventing drug-related morbidity and mortality, and wider community impacts – Independent review of drugs by Professor Dame Carol Black Evidence for multi-component programmes to reduce harms from alcohol - Burton R et al. A rapid evidence review of the effectiveness and cost-effectiveness of alcohol control policies: an English perspective. Lancet. 2017. Emerging evidence for a 'Whole Systems Approach to Health Weight' – NIHR Embracing system-wide approaches to support healthy weight Rising burden of ill health facing UK: Health in 2040: Projected Patterns of Illness in England (Health Foundation)
Rhestr Termiau: Glossary of Terms:	Health Improvement:
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol:	N/a

Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	All work delivered from existing budgets. Failure to deliver preventative approaches at sufficient scale would pose a long-term threat to financial position of the Health Board
Ansawdd / Gofal Claf: Quality / Patient Care:	N/a
Gweithlu: Workforce:	N/a
Risg: Risk:	N/a
Cyfreithiol: Legal:	N/a
Enw Da: Reputational:	N/a
Gyfrinachedd: Privacy:	N/a
Cydraddoldeb: Equality:	Equality Impact Assessment

Equality Impact Assessment (EqIA) Screening Template

The Equality Impact Assessment Screening Template is a short exercise that involves looking at the overall proposal and deciding if it is relevant to the Public Sector Equality Duty, and other key areas.

The questions in the Screening Template below will help you to decide if the proposal is relevant to the Equality Act 2010 and whether a detailed EqIA is required. The key question is whether the proposal is likely to have an impact (either positive or negative) on any of the protected characteristics.

Quite often, the answer may not be obvious, and staff, service-user or provider information will need to be considered to make a preliminary judgment.

There is no one size fits all approach, but the screening process is designed to help fully consider the circumstances and to inform evidence-based decisions.

Note: If the proposal is of a significant nature and it is apparent from the outset that a full Equality Impact Assessment (EqIA) will be required, then it is not necessary to complete the Screening Template and you can proceed to complete the full EqIA.

What to do:

In general, the following questions all feed into whether an EqIA is required:

- How many people is the proposal likely to affect?
- How significant is its impact?
- Does it relate to an area where there are known inequalities?

At this initial screening stage, the point is to try to assess obvious negative or positive impacts.

You will need to provide sufficient information within the template to justify the assessment of impact.

If a negative/adverse impact has been identified (actual or potential) during completion of the screening tool, a full EqIA must be undertaken.

If no negative / adverse impacts arise from the proposal, it is not necessary to undertake a full EqIA however, the decision and justification must be clearly recorded.

On completion of the Screening Template, staff should:

- Check that all sections of the template are fully completed.
- Ensure that the Project/Policy owner has signed off the Screening Template.
- Send a copy of the completed template along with the related policy to the Diversity & Inclusion Team for them to review – email this to Inclusion.hdd@wales.nhs.uk

Date of commencement of Screening Assessment:	10/04/2024
Screening conducted by (name and email address):	Dr Rob Green Robert.green@wales.nhs.uk
Title of programme, policy or project being screened:	Health Improvement Strategic Plan

Description of the programme/policy/project being screened (including key aims and objectives)

The Public Health directorate's Health Improvement Strategic Plan contains a range of planned activities across key domains (tobacco, drugs, alcohol, healthy weight, suicide prevention, children and young people, health equity). The aims of the plan are to reduce health inequalities, promote health equity and improve health.

Evidence considered (including staff and population data, relevant research, expert and community knowledge etc.)

The Strategic Plan is informed by a wide range of evidence and guidance, including:

- Investing in children and young people key component of reducing health inequalities and working on wider determinants of health – [Fair Society, Healthy Lives \(Marmot Review\)](#)
- Importance of multi-component tobacco control programmes in preventing tobacco-related morbidity and mortality – [WHO Framework on Tobacco Control](#)
- Importance of multi-component substance use programmes in preventing drug-related morbidity and mortality, and wider community impacts – [Independent review of drugs by Professor Dame Carol Black](#)
- Evidence for multi-component programmes to reduce harms from alcohol - [Burton R et al. A rapid evidence review of the effectiveness and cost-effectiveness of alcohol control policies: an English perspective. Lancet. 2017.](#)
- Emerging evidence for a 'Whole Systems Approach to Health Weight' – [NIHR Embracing system-wide approaches to support healthy weight](#)
- Rising burden of ill health facing UK: [Health in 2040: Projected Patterns of Illness in England \(Health Foundation\)](#)

Individual services are informed by user feedback, people with lived experience and regular reviews of performance data.

A key component of the plan will be developing a better understanding of how we deliver on health inequalities

Assess which protected characteristics will potentially be affected by the proposal: (please ✓ which impact)

Group	Positive Impact	Negative Impact	No Impact
Age Is it likely to affect older and younger people in different ways or affect one age group and not another?	✓		
Disability Those with a physical disability, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	✓		
Gender Reassignment Consider the potential impact on individuals who either: <ul style="list-style-type: none"> • Have undergone, intend to undergo or are currently undergoing gender reassignment. • Do not intend to undergo medical treatment but wish to live in a different gender from their gender at birth 			✓
Marriage / Civil Partnership Marriage and Civil Partnership means someone who is legally married or in a civil partnership.			✓
Pregnancy and Maternity Maternity covers the period of 26 weeks after having a baby, whether or not they are on Maternity Leave	✓		
Race / Ethnicity People of a different race, nationality, colour, culture or ethnic origin including non-English / Welsh speakers, gypsies/travellers, asylum seekers and migrant workers.	✓		

Religion or Belief The term 'religion' includes a religious or philosophical belief.			✓
Sex Consider whether those affected are mostly male or female and where it applies to both equally does it affect one differently to the other?			✓
Sexual Orientation Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.	✓		

Consider the potential impacts of the programme/policy/project on the following wider determinants:

Additional Determinants	Positive Impact	Negative Impact	No Impact
<p>Armed Forces Community Consider members of the Armed Forces and their families, whose health needs may be impacted long after they have left the Armed Forces and returned to civilian life. Also consider their unique experiences when accessing and using day-to-day public and private services compared to the general population. It could be through ‘unfamiliarity with civilian life, or frequent moves around the country and the subsequent difficulties in maintaining support networks, for example, members of the Armed Forces can find accessing such goods and services challenging.’</p> <p>For a comprehensive guide to the Armed Forces Covenant Duty and supporting resource please see: Armed-Forces-Covenant-duty-statutory-guidance</p>	✓		
<p>Socio Economic Duty Consider those on low income, economically inactive, unemployed or unable to work due to ill-health. Also consider people living in areas known to exhibit poor economic and/or health indicators and individuals who are unable to access services and facilities. Food / fuel poverty and personal or household debt should also be considered.</p> <p>For a comprehensive guide to the Socio-Economic Duty in Wales and supporting resource please see: more-equal-wales-socio-economic-duty</p>	✓		
<p>Welsh Language Please note opportunities for persons to use the Welsh language and treating the Welsh language no less favourably than the English language.</p>			✓

Summary of Potential Impacts Identified (Protected Groups)

Positive Impacts

A core component of the strategic plan is promoting health equity and reducing unavoidable inequalities in health currently experience by communities in Hywel Dda.

Work to reduce smoking, protect people from harms of drugs and alcohol, improve healthy weight, etc will have a particular focus on those from poorest background and underserved communities.

If the plans are successful, the health gains will predominantly fall to those from poorest backgrounds and underserved communities.

Negative Impacts

There are no anticipated negative impacts

Has the screening identified any negative impacts?		No
If yes, a full Equality Impact Assessment will need to be undertaken.		

If No negative impacts were identified, please give full justification here

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If the plans are successful, the health gains will predominantly fall to those from poorest backgrounds and underserved communities.

To note: Any actions taken as a result of the Health Improvement Strategic Plan will be subject to equality impact assessment as appropriate to ensure that individual assessments are carried out for key changes to service delivery (e.g. recommissioning of drug and alcohol services).

Screening Completed by:	Name	Dr Rob Green
	Title	Interim Deputy Director, Public Health
	Contact details	Robert.green@Wales.nhs.uk
	Date	10/4/24
Screening Authorised by: (Project / Policy Owner)	Name	
	Title	
	Contact details	
	Date	
Seen by Diversity & Inclusion Team:	Name	Helen Sullivan
	Title	Head of Partnerships Diversity and Inclusion
	Contact details	01554 899053
	Date	10 th April 2024