

- Population Health: Planning Objective 7a
- Executive Lead: Dr Ardiana Gjini – Executive Director of Public Health
- Reporting Officer: Dr Rob Green – Interim Deputy Director of Public Health
- Period of reporting 2023/24 Q3

Overall status: On Track

Aims of Planning Objective 7a:

- Develop and implement Public Health plans which empower and enable people to live healthy lives through the implementation of health improvement initiatives that address health and wellbeing through the life course
- Provide robust health protection and vaccination services for the community
- Maximise the population benefits of health and social care interventions through the implementation of Healthcare Public Health Approaches

Key national or local strategies/policies supported:

- A Healthier Mid and West Wales
- Well-being of Future Generations Act
- Socio-economic Duty
- Healthy Weight Healthy Wales
- Welsh Health Protection System Review Implementation Plan
- Towards A Smoke-Free Wales 2022-2024
- Welsh Government Substance Misuse Delivery Plan

Key Work Streams:

- Health improvement, including on key areas including tobacco; substance use and alcohol; healthy weight (including the Whole Systems Approach to Healthy Weight); suicide prevention.
- Early years, Children and Young People
- Health Protection and Immunisations
- Wider Determinants of Health, Partnerships and Promoting Equity in Health
- Healthcare Public Health and Screening

Key message:

- The Board is asked to note the progress of a wide range of programmes, supporting a wide range of agenda, contributing to improving the health of our communities, preventing ill-health and improving equity in health outcomes. These programmes and related evolving workstreams (eg supporting delivery of Public Services Board (PSB) Well-being plans) are an essential part of reducing future demands on Health and Social Care in Mid and West Wales.

Key achievements (highlights):

- Hywel Dda University Health Board (HDdUHB) only Health Board in Wales currently to have achieved the Welsh Government Tier 1 target of 5% of smokers making a quit attempt via smoking cessation service.
- Support for Mid and West Wales Early Years and Maternity Strategy, to be launched 1 of March 2024.
- Targeted clinics in provided in Primary Care to tackle inequity in childhood immunisations and increase overall coverage.
- Protecting vulnerable people in Adult Social Care with vaccine champion training for social care staff.

- Strengthening collaboration with Public Service Boards and regional partners.
- Over 3000 contacts made by the Community Development and Outreach Team October – December 2023.
- Completion of the 'A Regional Collaboration for Health' (ARCH) Health Needs Assessment to inform evidence-based regional planning.
- Strengthening excellent partnership arrangements with Area Planning Board to support multi-agency working reducing drug and alcohol related harms.

Highlights: Activities planned for next milestone and reporting period

- Finalisation of comprehensive Health Improvement Strategic Plan to 2026/27.
- Integration of Children and Young Peoples' programmes (Healthy Schools/Whole School Approach to Emotional Health and Wellbeing) and development of evaluation framework to strengthen local reporting and accountability.
- HDdUHB Tobacco Control Group to launch March 2024 to deliver local Tobacco Control Plan.
- Vaccine Equity Strategy to be finalised as the first step to long term strategic approach to reducing inequities in vaccine coverage.

- Workshop with Local Authority colleagues and wider stakeholders to inform design of local health protection model.
- Refresh of Health Board wide working to promote health equity and improve wider determinants of health and realignment of staff resource to support this work.
- Progression of the Whole Systems Approach to Healthy Weight work across the region.
- Police Naloxone Training - After an extended pilot and evaluation, full roll out to nearly 800 response officers, Police Community Support Officers (PCSOs) and Specials has been timetabled for January - March 2024 to enable police to reverse opiate overdoses.

Risks, Issues and Mitigations

- Ongoing risks around financial settlements from externally funded programmes and savings required across all HDdUHB directorates.
- Partnership work (eg work with schools) similarly challenged by partner capacity for collaboration given straightened budgets.

- Evolving demands on hypothecated funding (eg health protection) may limit scale/ambition of strategic working/service delivery.
- Failure to deliver preventative programmes at sufficient scale across the Health Board will ultimately result in increased demand and challenges to the achievement of the Board's long term strategic objectives.

Status: On Track

**Overarching aim:** Giving all our residents a healthy start to life is the best long-term approach for lifelong health and wellbeing and equitable outcomes

**Key Work Programmes:**

- Whole School Approach to Emotional and Mental Wellbeing (WSAEMW)
- Health Promoting Schools and Healthy Pre-schools
- Early Years Work

**Key objectives**

- Partnership working with Local Authority and school partners to cement collaboration between Public Health and education colleagues.

**Key achievements so far:**

- WSAEMWB Primary schools: (Pembrokeshire/Ceredigion only – Carmarthenshire run by Local Authority):
  - Completed Self-evaluation - 64.4% (Wales - 60%)
  - Action Planning - 36.8% (Wales - 32.1%)
- WSAEMWB Secondary schools (All LAs):
  - Completed self-evaluation - 100% (EOY Target 90%)

**Activities planned for next milestone and reporting period**

- Pilot the nationally redesigned 'Health Promoting Schools' minimum standards programme, due to commence in Autumn 2024.
- Integration of the Health Promoting Schools programme with the WSAEMWB programme in 2024-25 as part of the exit process from WG fixed term funding in March 2025.
- Continue to develop bespoke approaches to schools in the earlier stages of their journeys.
- Work to strengthen relationships with Local Authorities and increase local profile and oversight of programmes and agendas.

**Risks, Issues and Mitigations**

- School capacity to continue to support the programmes given current financial landscape – close working with Heads.
- Withdrawal of funding for the Whole School Approach to Emotional and Mental Wellbeing at the end of 2024-25 – work in 2024-25 to integrate programmes but reduction in capacity forecast for 2025-26.
- National review of Healthy Promoting Schools scheme has shifted the paradigm of the work with schools from a National Quality Award to a set of minimum standards. Transitional period for Programme Staff and Schools from 2024-25 onwards.
- Split delivery of Health Promoting Schools funding/delivery (Health Board in Pembrokeshire and Ceredigion, Local Authority in Carmarthenshire) limits consistency of approach across the region. Work ongoing to continuously improve collaboration across all three counties.

- Improved confidence of staff through professional learning, and enhanced staff wellbeing and professional esteem
- Health and well-being is embedded throughout the school in the policies, staff, ethos, environment, wider school community and not just the curriculum.
- Establish an Early Years Leadership Group within the Health Board
- Develop an Early Years Outcomes Framework and Data Dashboard to support ongoing monitoring and evaluation.
- Undertake Early Years Needs Assessment
- Support the national NYTH/NEST framework to create a wider whole systems approach to planning and delivering services to children and young people in a timely and effective manner

- Action Planning - 74.1% (EOY target 80%)
- Early Years Data Dashboard Complete
- Early Years Leadership Group established.
- Completion of Early Years Needs Assessment due March 2024
- System support provided to creation of Mid and West Wales Maternity and Early Years Strategy (launch March 2024).

- Circulate dashboard with partners and explore use to underpin key early years agendas (eg Maternity and Early Years Strategy)>
- Develop an evaluation framework to improve data capture and impact of the Health Promoting Schools programme and other Children and Young People (CYP) work.

- Fixed term funding settlements for programmes presents usual issues – most staff substantive, however some fixed term staff.
- Funding for Early Years Transformation (Pathfinders) Programme has been withdrawn nationally from 2024-25 at short notice, leading to significant uncertainty in early years work regionally and nationally.
- There is uncertainty around future Early Years governance – Maternity and Early Years Strategy Working Group to be reviewed following strategy launch.

Status: On Track

<p><b>Overarching aim:</b> Provide robust health protection and vaccination services to the community to protect from infectious disease</p> <p><b>Key Work Programmes:</b></p> <ul style="list-style-type: none"> <li>Health Protection System Development</li> <li>Preventing and responding to acute respiratory infections, including supporting vulnerable settings</li> <li>Deliver national Immunisation Framework including childhood immunisations</li> <li>Hepatitis B and C elimination plan</li> <li>Tuberculosis (TB) elimination plan and Llwynhendy action plan</li> </ul>	<ul style="list-style-type: none"> <li>Vaccine Equity Strategy</li> </ul> <p><b>Key objectives:</b></p> <ul style="list-style-type: none"> <li>Build a resilient Health Protection system across the Hywel Dda footprint, building on systems and successes from the pandemic</li> <li>Reduce morbidity and mortality associated with ‘flu, COVID-19 and other acute respiratory infections</li> <li>Improve childhood immunisation uptake, with a focus on MMR</li> <li>Improve vaccination uptake in underserved communities</li> </ul>
<p><b>Key achievements so far:</b></p> <ul style="list-style-type: none"> <li>Health Protection funding confirmed for 2024-25 enabling progression of a multi-agency HDdUHB health protection model.</li> <li>Testing in line with policy – plan to be able to scale up as required.</li> <li>Delivery of accelerated autumn vaccination programme.</li> <li>Continued pathway for anti-viral treatment, including triage, dispensing and administration.</li> <li>Supporting Infection prevention and control (IPC) work in secondary care site to reduce Health Care Acquired Infections (HCAIs), with a focus on aseptic techniques.</li> <li>Working with Child Health colleagues to respond to low childhood immunisations uptake areas with additional clinics supporting Primary Care.</li> <li>Vaccine Equity Strategy to be finalised end of February 2024.</li> <li>Llwynhendy TB: 400 residents contacted, 70 outstanding as uncontactable. Mop-up in progress. No active or latent TB identified. Review of findings to be agreed and consider closing incident.</li> <li>Llanelli Hep C cluster: Collaborative working with the Blood Borne Viruses (BBV) team to screen, test and vaccinate.</li> <li>Developing model across all 3 counties to progress successful integrated working as part of the Hep B/C elimination plan.</li> </ul>	<ul style="list-style-type: none"> <li>Training on importance of vaccination, how to access and dealing with vaccine hesitancy for range of groups, including doctors/midwives/nurses, homeless forums</li> <li>Working with Community Development Outreach Team (CDOT) team to promote vaccination in underserved communities (gypsy travellers, veterans, homeless and minority groups and offering vaccine outreach clinics.</li> <li>All 48 GP practices in Hywel Dda region now commissioned to deliver shingles vaccination programme</li> <li>Concerted communications programme with Primary Care to improve uptake of ‘flu vaccine in two to three year-olds, and pilot of immunisation at nursery</li> <li>Continued domiciliary childhood immunisation, with new database developed for tracking</li> <li>All eligible individuals offered COVID-19 vaccination by end November 2023, as per WG target</li> <li>Vaccine champion training complete in all three Local Authorities for social care staff</li> </ul>
<p><b>Activities planned for next milestone and reporting period</b></p> <ul style="list-style-type: none"> <li>Development of integrated Hywel Dda Health Protection model, adopting an all-hazards approach, costed and finalised against funding allocation (initial workshop scheduled for February 2024).</li> <li>Complete reporting for Llwynhendy TB incident and close</li> <li>Renewed focus on MMR vaccination uptake in context of increasing national measles risk, including implementation of targeted immunisations training for staff, catch up clinics and concerted comms effort</li> <li>Finalisation of vaccine equity strategy and commencement of action planning</li> </ul>	<ul style="list-style-type: none"> <li>Work to improve awareness of domiciliary vaccination for children further away from services</li> <li>Continued work to improve Shingles vaccination, including data monitoring and sharing at GP level, audit, training and clinical advice.</li> <li>Follow up on social care vaccine champion training with recipients to refine future programme</li> <li>Training on Hep B vaccination for nurses to support management of Hep C cluster, and collaborative working with BBV specialist nurses</li> </ul>
<p><b>Risks, Issues and Mitigations</b></p> <ul style="list-style-type: none"> <li>Evolving demands placed on Health Board health protection funding allocations pose a risk to the delivery of any agreed model</li> <li>Sustainable approach to training and competency of bank staff throughout year in order to build on step up response when required.</li> <li>Risk of vaccine preventable disease due to lower uptakes across immunisation programmes, risk particularly pertinent in context of measles/MMR</li> </ul>	<ul style="list-style-type: none"> <li>Challenging ‘flu and COVID-19 autumn season to date – likely ongoing challenges around achieving high uptake.</li> <li>Lower uptake rates at larger practices resulting in lower overall Health Board ‘flu uptake rates in two to three year olds (35.3% vs 42.0%).</li> <li>Uptake of COVID-19 vaccination among eligible individuals low, challenge remains around community receptiveness to this programme.</li> <li>Planning of COVID-19 programme dependent on Joint Committee on Vaccination and Immunisation (JCVI) and national decision making – leaving persistent risk around school forces, primary care, vaccination etc.</li> </ul>

**Overarching aim:** To empower and enable people to live healthy lives through the implementation of health improvement initiatives that address health and well-being through the life course

**Key Work Programmes and Objectives:**

**Tobacco Control**

- To tackle the ingrained health inequalities associated with smoking through focusing on where rates of smoking are highest, those with highest risk of taking up smoking and those who feel the health impact of smoking the most to reduce smoking prevalence to 5% by 2030 (currently 12.5%)
- Protecting future generations – Support a Smoke-free generation by increasing our efforts to prevent the uptake of smoking and vaping in children and young people
- Continue to create Smoke free environments and implement our Smoke-free Policy
- Support more smokers to quit through continued delivery and development of the hospital and community-based Smoking Cessation & Well-being Service Provision

**Healthy Weight**

- By September 2023, working with Swansea Bay UHB (SBUHB) and PSB partners, develop a whole system map at a strategic level to understand work going on across the West Wales region around the healthy weight agenda
- Work towards development of a fully staffed Level 3 Multi-Disciplinary Team (MDT) service meeting All-Wales Weight Management pathway for adults.
- Improve access to weight management support and interventions for adults in Hywel Dda
- Develop a costed model for the expansion of services at Level 2 of the pathway for adults
- Develop an agreed model of delivery for healthy weight provision for children and families at Levels 2 and 3, in line with the new Children, Young People and Families pathway

**Key achievements so far:**

- Tobacco**
- Hywel Dda is the only Health Board in Wales currently to have achieved the Welsh Government Tier 1 target of 5% of smokers making a quit attempt via smoking cessation service
  - Smoking prevalence in HDdUHB has reduced from 18% in 2019 to 12.5% in 2023
  - Promotion of the Smoking & Wellbeing service through increased ward visits in hospitals, development of maternity and wellbeing provision, has led to a 40 % increase in referrals in 2023 compared to the same period in 2022
  - Winner of the Wales Mental Health Award for best Wellbeing Service 2023
  - 86% increase in referrals from maternity services following establishment of maternity, smoking & wellbeing service in 2022. Smoking & Wellbeing practitioners and support workers also provide breast feeding support, foodwise courses and walking groups. CO monitoring by midwives has increased from 19.65 to 74%. With target 95%. Miscarriage rates in smokers dropped from 10.6% in 2022 to 6.6% in 2023 since programme commenced (initial figures awaiting confirmation).

**Tackling Drug & Alcohol Related harms**

- Blue Light Steering Group first meeting held in early February to work with change resistant drinkers to improve outcomes and demand on blue light services including police and hospitals
- Co-occurring training delivered to all substance misuse (SM) and Mental Health (MH) practitioners (with a wider roll out to Police in the future), based on the developed Co-occurring Framework. 207 staff from across SM and MH services have attended this training.

A regional veterans workshop held in January 2024 to further develop drug and alcohol misuse pathways for veterans

**Tackling Drug and Alcohol Related Harms** through implementation of multi-agency action plan on following strategic objectives in line with WG delivery plan:

- Prevention and Early Intervention – Maximising opportunities to improve health through tackling health behaviours linked to the leading causes of ill health
- Harm Reduction- Creating safe environments, changing attitudes and social norms and supporting behaviour change
- Treatment and Recovery - Ensuring evidenced based, accessible and effective treatment and recovery
- Co-occurring Substance Misuse and Mental Health
- Complex Needs – Mental Health, Substance Misuse and Housing
- Crime reduction and availability

**Pillars of Health - Nutrition, Physical Activity, Emotional well-being, Social Connections & Sleep**

- Lead on a work stream to promote the pillars of health across our population (with partners, staff and communities), in order to improve health and well-being

**Suicide and Self Harm**

- To work with partners to develop a multi- agency approach to the prevention of suicide and self –harm through implementation of an evidence based local action plan in line with national strategies and understanding of local need to ensure suicide prevention remains a strategic priority

- Police Naloxone Training - After an extended pilot and evaluation, full roll out to nearly 800 response officers, PCSOs and Specials has been timetabled for January - March 2024

**Health Weight**

- Whole Systems Approach to Healthy Weight: band 7 recruited, enabling move forward from system mapping to action planning
- Fully staffed Level 3 MDT is now in place and consists of a Clinical Pathway Lead, Medical Consultant, Dietitians, Clinical Psychologists, Assistant Psychologist, Physiotherapist, Occupational Therapists, Dietetic Assistant Practitioners, Therapy Assistant Practitioners and Administrators.
- Increase in capacity and range of interventions available at Level 2 of the Health Board WMS to reduce the number of people escalating to the Level 3 service and to ensure only the people with the most complex needs access the Level 3 WMS.

**Pillars of Health**

- Health Coaching in primary care – 73% increase in referrals compared to previous quarter. 14 GP practices across the Hywel Dda area participating
- Primary care 'lifestyle' clinic pilot - Commences 15 February 2024 for six weeks centred around the six pillars of health.

**Suicide & Self Harm**

- Training in primary care



**Status:** On Track

**Activities planned for next milestone and reporting period**

- Finalise Health Improvement and Wellbeing Strategic Plan
- Outline parameters for Health Economic evaluation to better demonstrate impact of Public Health on improving health outcomes for the population, reducing the leading causes of preventable ill health, reducing Health And Social Care service demand and associated financial costs savings due to delivery of Public Health measures.

**Tobacco**

- Continue to develop maternity and smoking service provision, including increased uptake of midwives CO monitoring (Target 95%)
- Hold first HDdUHB Tobacco Control Group, chaired by Director of Public Health to drive forward and deliver the local HDdUHB Tobacco control plan
- Continue to ensure implementation of Smokefree policy
- Further promote the HDdUHB Vaping pathway and evaluate impact

**Reducing drug and alcohol related harm**

- Tier 2 Re-tendering work stream to commence, with APB Executive Investment Workshop to be held in March 2024.
- Expansion of the Co-occurring MH and SM Framework to include:
  - Children and Young People
  - Police, Probation and Prison
  - Wider Health Board Services
  - Housing and Homelessness
- Work on the Evaluation of the Co-occurring MH and SM Framework to begin.
- Further development of Substance Misuse pathways for Veterans.

**Risks, Issues and Mitigations**

- Requirement for face-to-face CO monitoring at 4 week - lack of availability of venues and clinical space , increased travel time and costs for Smoking & Wellbeing staff venues for returning to CO monitoring
- Vacant posts in the Smoking Cessation & Wellbeing service as longer lengths for recruitment approval impacting on capacity
- Waiting list for access to health coach service provision
- Reduction in Prevention and Early Years Welsh Government Budget
- Estates risk in Llanelli due to lack of secure long-term base for Drug and Alcohol service provision and health improvement centre delivery
- The increasing demand for the Weight Management Service even with the introduction of self-referral means that people are experiencing longer waits to access the service than is desirable. We are mitigating this by ensuring people are

- Work with Community Safety Partnership, APB, Police and PSBS to tackle enablers of drug crime and drug use.
- Evaluation of prevention and early intervention service
- Evaluation of treatment outcomes of drug and alcohol service delivery
- Continue to roll out Blue Light project, deliver training and evaluate impact on health and financial cost savings
- Continue to lead Complex Needs Board and roll out multi agency Complex Needs workstream.

**Healthy Weight**

- Consolidate initial systems mapping exercise to identify key levers and potential points of action for preventing overweight and obesity in West Wales and move into action planning phase.
- Continue ongoing service evaluation across all interventions within the Level 3 Weight Management service for adults.

**Pillars of Health**

- Primary Care lifestyle clinics pilot commence on the 15 February 2024 for six weeks
- Mapping of interventions across primary, secondary and community settings for all age ranges
- Refine Pillars of Health app specification and tender
- Outline parameters for evaluation of health coach provision by Aberystwyth University
- Develop proposal for young person health coaching
- Multi agency Pillars of Health steering group and action plan developed

**Suicide & Self Harm**

- A training course for suicide prevention has been set up for Pembrokeshire Primary Care as part of the response to the Narberth cluster of suicides.
- Develop local multi agency action plan

signposted to self-directed resources while they are on the waiting list to access the WMS.

- There is currently a significant unmet need within the Health Board with no weight management service for children and young people. With 10000 children across the HDdUHB living with obesity, this represents a significant risk to their future life trajectory and future healthcare utilisation costs.
- There is increased capacity within the Health Board Weight Management pathways at Level 2 and work has been done to align with other funding streams such as the All Wales Diabetes Prevention Programme (AWDPP) but further work is needed to ensure there is alignment across the breadth of services that can be delivered within Level 2 across Primary Care and Community Services

**PO 7a SDODC Update: February 2024**  
**Strategic area: Wider Determinants of Health, Partnerships and Promoting Equity in Health**

**Status:** Partially met

**Overarching aim:** Strengthen working across the region to promote equitable health outcomes

**Key Work Programmes:**

- Public Service Board and Regional Partnership Board collaboration
- Community Development and Outreach Team (CDOT)
- Developing a shared approach to improving health equity across the Health Board
- Ongoing development of co-ordinated Social Prescribing system across HDdUHB

**Key objectives**

- Supporting the delivery of PSB Wellbeing Plans across each of the three Counties

- Building on existing strong partnerships between HDdUHB and PSB/ RPB partners through respective forums
- Build systems connections for collaborative working on wider determinants of health in the Hywel Dda region
- Increase engagement between the Health Board and underserved communities to facilitate identifying and tackling barriers to equitable health outcomes

**Key achievements so far:**

- PSB Well-Being Delivery Groups have been established in all three areas focusing on strengthening communities (by focusing on 'place-based' action) and reducing inequalities and poverty.
- Social prescribing software (Elemental) utilised in three counties and integrated into three pilot practices in Pembrokeshire, with training courses commissioned
- CDOT team engaged with 3,287 people between October – December 2023 on topics such as healthy eating, vaccination, health and wellbeing

- Winter Wellbeing event for Gypsy, Roma and Travellers resulting in increased referrals to smoking services.
- Development and distribution of interpreter cards for people who don't speak Welsh/English as a first language.
- Work with employers with high percentage of minority ethnic employees to connect with information and advice on health and healthcare access.

**Activities planned for next milestone and reporting period**

- Support launch of Pembrokeshire Poverty Strategy and Poverty Summit
- Develop clear model of support/collaboration across functions of PSBs
- Support Public Health Wales (PHW) development of “Shaping Places” programme to embed systems working in PSBs
- Explore with partners the right forum to take forward HDdUHB work on Equity in Health, building on previous progress of Poverty Group and Vaccine Equity Group, and follow up with creation of said forum.
- CDOT to run community engagement with midwifery team to explore models of support for those who are not aware of or accessing ante-/ postnatal care.
- Other work planned includes work with Probation Service, Cancer screening drop-in sessions, Gypsy and Traveller wellbeing events, work with barbers and nail bars.

**Risks, Issues and Mitigations**

- Ongoing challenge around capacity to provide strong consistent support across wide range of regional partnerships/subgroups and other fora. Current recruitment and internal team re-alignment will create some extra capacity here.
- Social prescribing work has been delayed by delays in the National Social Prescribing Framework, leaving some strategic uncertainty in this space.

<b>Status:</b> Predominantly on track, delays in progress against screening agenda	
<p><b>Overarching aim:</b> Provide high quality Public Health input to the development and delivery of healthcare programmes across Hywel Dda. To reduce morbidity and mortality by the early detection of disease through equitable screening programmes.</p> <p><b>Key Work Programmes:</b></p> <ul style="list-style-type: none"> <li>All-Wales plans to reduce inequalities in screening</li> <li>‘A Regional Collaboration for Health’ (ARCH) Health Needs Assessment</li> <li>Procedures of Limited Clinical Effectiveness Policy</li> <li>Sexual Health Services Needs Assessment and Strategy</li> </ul>	<p><b>Key objectives:</b></p> <ul style="list-style-type: none"> <li>Increase screening rates across three cancer screening programmes</li> <li>Reduce the strong social gradients in screening uptake</li> <li>Improve understanding of population health needs and lead or support the development and implementation of recommendations emanating from health needs assessments.</li> <li>Reduce the use of non-evidence-based healthcare interventions and improve value based care.</li> </ul>
<p><b>Key achievements so far:</b></p> <ul style="list-style-type: none"> <li>Working with the National PHW Screening Committee to address issues relating to uptake and equity is underway with a two phased approach for 2023-24 and 2024-25: Local plans have been developed to increase awareness; develop targeted campaigns; enhance accessibility and convenience; reduce barriers and stigma; improve use of technology and work with high-risk populations.</li> <li>Production of initial Procedures of Limited Clinical Effectiveness Policy and Interventions Not Normally Undertaken policies.</li> <li>Commencement of Sexual Health Services needs assessment to inform subsequent strategy and ensure</li> </ul>	<ul style="list-style-type: none"> <li>robust planning of future services appropriate to population need.</li> <li>Completion of the ARCH Health Needs Assessment and ratification through the tripartite arrangements between Hywel Dda University Health Board, Swansea Bay University Health Board and Swansea University.</li> <li>Socialisation of findings of ARCH Health Needs Assessment at local partnership fora.</li> </ul>
<p><b>Activities planned for next milestone and reporting period</b></p> <ul style="list-style-type: none"> <li>Continued work on the implementation of the local screening plan in collaboration with Public Health Wales</li> <li>Progress local implementation of Procedures of Limited Clinical Effectiveness policy and collaborate at All-Wales level to ensure consistency between Health Boards (ultimately developing clear Value-based Healthcare document).</li> <li>Continue leadership and, support of Transformation Projects ensuring these are undertaken based on population need, and evaluated to ensure effective delivery and resource use.</li> </ul>	<ul style="list-style-type: none"> <li>Complete sexual health needs assessment and subsequent services strategy, and ongoing rationalisation of sexual health service sites.</li> <li>Provide Public Health input into the Primary and Community Care Strategy.</li> </ul>
<p><b>Risks, Issues and Mitigations</b></p> <ul style="list-style-type: none"> <li>Contemporaneous data on screening performance limited by availability of data from PHW.</li> <li>Plans to improve screening coverage and equity are behind schedule due to work being paused during COVID-19, and recent staff absence</li> </ul>	