



**PWYLLGOR STRATEGAETH A CHYNLLUNIO
STRATEGY AND PLANNING COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 June 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Deep Dive: Healthy Domain Metrics Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Dr Ardiana Gjini, Executive Director of Public Health
SWYDDOG ADRODD: REPORTING OFFICER:	Bethan Lewis, Assistant Director of Public Health Strategic Business and Operations; Dr Michael Thomas, Consultant in Public Health Medicine

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of this paper is to provide the Strategy and Planning Committee (SPC) with assurance through a Deep Dive on Healthy Domain Metrics, bringing together progress against Population Health Escalation Metrics since September 2025 and key insights from the Population Health Dashboard.

Cefndir / Background

The Healthy Domain Metrics integrates Population Health Escalation Metrics, which assess system maturity, delivery confidence, and performance, with Population Health Dashboard intelligence, which provides insight into health outcomes, drivers of ill health, and inequalities.

The Escalation Metrics were launched in September 2025 with formal assessment of all care groups / directorates in the Health Board. The foundation indicators included staff uptake of influenza vaccination, business continuity plans, and inpatient smoking status. There is a phased approach to introducing additional indicators.

The Our Population Health Dashboard was formally launched in February 2026 to provide teams with a shared, system-wide view of key health trends, challenges, and opportunities for prevention. The dashboard brings together insightful and accessible data to help make informed decisions and prioritise interventions where they can make the greatest impact. There is a phased approach to the dashboard launch building on the available data as work progresses to improve accessibility to wider datasets.

Asesiad / Assessment

Escalation Metrics – Progress Since September 2025

There has been measurable progress in system maturity and oversight since implementation of the escalation metrics for Population Health. Governance and reporting are now more structured, regular, and consistent, providing greater clarity and transparency for performance

management. Accountability across programmes has been clarified, enabling more defined ownership of delivery. The system has also strengthened its ability to identify underperformance and respond through escalation, resulting in increased visibility of risks and delivery challenges.

Business Continuity Plan compliance shows an improved position between September 2025 and April 2026. There has been strong improvement in some areas, particularly Operational Allied Health and Health Sciences, Nursing, Medical and Primary Care with all areas now engaged.

Staff flu uptake improved across most areas when comparing with uptake at the end of 2024/25 programme and March 2026, the end of 2025/26 timescale. The strongest increases were seen in Finance, Nursing, Community and Integrated Medicine, Public Health, and Estates and Facilities. However, uptake reduced in Strategy and Planning, Workforce and Organisational Development, and Medical, which may require targeted follow-up ahead of the next vaccination campaign.

Smoking metrics remain requiring ongoing support and engagement. Recording of smoking status generally has been strong, however referrals to Help me Quit (HMQ) and provision of Replacement Therapy (NRT) remaining low along with informing patient on admission of Health Board no smoking policy. These indicators currently impact on Community and Integrated Medicine and Planned and Specialist Care Clinical Care Groups (CCGs) only due to reliance on Welsh Nursing Clinical Record (WNCR) data with the ambition of scoping opportunities across Mental Health and Learning Disabilities inpatient areas and Maternity.

Population Health Dashboard – Key Insights

An overview of the Our Population Health dashboard can be found within Appendix 1. Key insights have been identified for the purpose of this deep dive.

While life expectancy and healthy life expectancy are at similar levels to the All-Wales average, we know that not all of the population have an equal experience. There are pockets of deprivation often masked by measures that do not fully take account of rurality, particularly with reference the access to services and support that can improve the health and wellbeing of the population.

The region already has an ageing population, with this projected to increase over the next twenty years. The increase in the number of older people is likely to lead to a rise in the prevalence of chronic conditions such as circulatory and respiratory diseases and cancers.

In terms of the priority health areas, cancer incidence rates are gradually declining with Ceredigion have the highest cancer mortality rates for the three Local Authority area. Carmarthenshire has the highest number of cardiovascular deaths. In terms of the prevalence of atrial fibrillation, heart failure and secondary prevention of Chronic Heart Disease (CHD) Amman Gwendraeth, South Ceredigion and Taf Tywi GP Clusters have the higher rates in the region. Diabetes prevalence is highest in Amman Gwendraeth, South Pembrokeshire and Llanelli clusters. Pembrokeshire has the highest prevalence for Chronic Obstructive Pulmonary Disease (COPD) in the region. In terms of mental health, Ceredigion reports the highest sense of life being worthwhile, lowest levels of anxiety and the highest percentage of life satisfaction among the three counties, exceeding the Wales average. Hywel Dda University Health Board (HDdUHB) has a lower rate of hospital admissions related to illicit drug use than the Wales average.

Vaccination rates are higher than the Wales average, with slight regional variation. Maternal obesity within HDdUHB is higher than the Wales prevalence rates, the percentage of women smoking during pregnancy is lower, and the breast-feeding rates are higher. Overall teenage conception rates across HDdUHB are below the Wales average overall; however rates in Pembrokeshire remain comparatively high.

In terms of risk factors, Carmarthenshire has the highest prevalence of smoking of all three counties. The latest data indicates that HDdUHB has the highest prevalence rates of overweight and obesity among children aged four to five in Wales. The proportion of young people aged 11 to 16 achieving at least 60 minutes of daily physical activity over the past seven days is comparable to the Wales average. All three counties have a higher percentage of young people aged 11 to 16 reporting alcohol consumption than the All-Wales average. In addition, 16.8% of adults exceed the recommended alcohol consumption guidelines, with the highest levels observed in Pembrokeshire.

Actions and Next Steps

As we progress into the 2026-27 work has begun on expanding the escalation metrics to include the additional indicator of Level 1 Making Every Contact Count (MECC) training for new and existing staff, and to scope the inclusion of uptake of the Measles, Mumps, Rubella (MMR) vaccine in healthcare staff. Work is also underway to strengthen a renewed focus on scaling prevention activity, with the longer-term indicators including outcomes relating to cancer, respiratory diseases, diabetes and cardiovascular disease (CVD).

In parallel, work is underway to enhance real-time population health intelligence and strengthen outcome tracking, enabling a clearer understanding of impact over time. Through a Population Health Intelligence Group, the inclusion of further datasets into the Our Population Health Dashboard will be prioritised and enabled. This will ensure our approach to benchmarking against the Wales average and best-performing Health Boards is being used to inform improvement and accelerate adoption of effective interventions.

Argymhelliad / Recommendation

The Committee is asked to:

- **RECEIVE ASSURANCE** from the Healthy Domain Metrics Report regarding the progress made in strengthening escalation metrics and system maturity, acknowledge the ongoing challenges in improving outcomes and reducing inequalities
- **SUPPORT** the prioritisation of targeted, prevention-focused action to improve population health outcomes.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference:
Cyfeirnod Cylch Gorchwyl y Pwyllgor:

3.1.13. Consider population health and wellbeing assessments and other key information that underpins the strategic planning process to ensure the robustness and best fit of developing plans.

3.1.14. Seek assurance on plans, systems and processes to deliver health improvement and increase health equity and seek assurance on the work of the Health Board to reduce avoidable health inequalities.

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)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	10 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

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termiau: Glossary of Terms:	All noted within body of report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Strategaeth a Chynllunio Parties / Committees consulted prior to Strategy and Planning Committee:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)

Ariannol / Gwerth am Arian: Financial / Service:	While this is an assurance report, it has service and value implications through its focus on prevention, targeted improvement and use of intelligence to prioritise action. Strengthening escalation metrics and population health insight supports more effective deployment of resources, earlier intervention and better targeting of services to population need.
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Ansawdd / Gofal Claf: Quality / Patient Care:	<p>This report supports quality and patient care by strengthening oversight of prevention and population health measures, improving visibility of variation, inequalities and underperformance. This enables more targeted action to improve outcomes, patient experience and equitable access to services across Hywel Dda.</p>
Gweithlu: Workforce:	<p>This report has workforce relevance through its focus on staff health improvement, prevention capability and compliance with key escalation measures. It highlights the need for targeted support to improve staff vaccination uptake and training, strengthening the workforce contribution to prevention and population health outcomes.</p>
Risg: Risk:	<p>The report identifies ongoing risks relating to variation in performance, health inequalities, prevention delivery and the maturity of population health intelligence, which require continued oversight and targeted improvement action.</p>
Cyfreithiol: Legal:	<p>No legal impacts identified.</p>
Enw Da: Reputational:	<p>This report has reputational relevance as it demonstrates the Health Board's oversight of population health improvement, prevention and inequalities. Continued progress in these areas supports organisational credibility, while failure to respond to identified variation or underperformance could carry reputational risk.</p>
Gyfrinachedd: Privacy:	<p>No privacy impacts identified.</p>
Cydraddoldeb: Equality:	<p>EqIA screening is not required for this assurance report; however, the content has a clear equality and health inequalities focus, highlighting variation in outcomes, deprivation, rurality and access to services, and supporting targeted action to improve equity across the population.</p>

Strategy and Planning Committee

Executive Summary: Deep Dive Healthy Domain Metrics Report

Sefyllfa / Situation

This report presents the findings of the Health Needs Assessment (HNA) for the population served by Hywel Dda University Health Board (HDdUHB). The HNA provides a comprehensive overview of population health, inequalities, risk factors, and future demographic pressures.

The purpose of this report is to inform the Committee of the key findings and emerging themes from the HNA, to support understanding of current and future population health needs and to inform future strategic discussions, service planning, and prevention priorities.

Some overarching information is also captured within the Our Population Health Dashboard which enables all Health Board staff to view some of the HNA information in an easily accessible format.

Cefndir / Background

The HNA has been developed to support strategic planning and ensure that services are aligned to population need. It reflects the three prevention priorities across the HDdUHB region outlined in the 20four7 model:

- Focusing on the 20% most vulnerable populations
- Addressing four key modifiable risk factors
- Reducing the burden of seven priority health conditions.

Overall life expectancy and healthy life expectancy in HDdUHB are broadly comparable to the Wales average. However, inequalities persist, particularly within rural communities where deprivation may be less visible but continues to impact access to services and health outcomes.

The Our Population Health Dashboard was formally launched in February 2026 to align with the implementation of the 20four7 model and provide our Clinical Care Groups (CCGs), Directorates, and wider teams with a shared, system-wide view of key health trends, challenges, and opportunities for prevention. The dashboard brings together insightful and accessible data to help make informed decisions and prioritise interventions where they can make the greatest impact. There is a phased approach to the dashboard launch building on the available data as work progresses to improve accessibility to wider datasets.

Asesiad / Assessment

This HNA report describes the health and wellbeing needs of the population served by HDdUHB.

The findings show that whilst life expectancy and healthy life expectancy are at similar levels to the all Wales average, we know that not all of the population have an equal experience. There are pockets of deprivation often masked by measures that do not fully take account of rurality, particularly with reference to access to services and support that can improve the health and wellbeing of the population.

The region already has an ageing population, with this projected to increase over the next 20 years. The increase in the number of older people is likely to lead to a rise in the prevalence of chronic conditions such as circulatory diseases, respiratory diseases and cancers. Meeting the needs of these individuals will be a key challenge for the Health Board and its partners.

Carmarthenshire has the highest number of cardiovascular deaths. In terms of the prevalence of atrial fibrillation, heart failure and secondary prevention of Chronic Heart Disease (CHD), Amman Gwendraeth, South Ceredigion and Taf Tywi GP Clusters have the higher rates in the region. Diabetes prevalence is highest in Amman Gwendraeth, South Pembrokeshire and Llanelli clusters. Pembrokeshire has the highest prevalence for Chronic Obstructive Pulmonary Disease (COPD) in the region.

In terms of the priority health areas, Ceredigion has the highest cancer mortality rates for the three local authority areas, although cancer incidence rates are gradually declining.

In terms of mental health, Ceredigion has the highest sense of worthwhile, lowest sense of anxiety and the highest percentage of life satisfaction of the three counties, and higher than the Wales average. HDdUHB has a lower rate of hospital admissions related to illicit drug use than the Wales average.

Vaccination rates are higher than the Wales average, with slight regional variation. Maternal obesity within HDdUHB is higher than the Wales prevalence rates, the percentage of women smoking during pregnancy is lower, and the breast-feeding rates are higher. Teenage conception rates for HDdUHB are below the Wales rate overall, though Pembrokeshire has a higher rate.

In terms of risk factors Carmarthenshire has the highest prevalence of smoking of all three counties. The latest prevalence rates for children aged four to five with overweight or obesity are the highest in Wales in HDd UHB. Young people aged 11 to 16 reporting at least sixty minutes of physical activity every day for the last seven days is similar to the All Wales figure. All three counties have a higher percentage of young people aged 11 to 16 reporting alcohol consumption than the All Wales average. 16.8% of adults drink more than the recommended guidelines with Pembrokeshire having the highest consumption.

The HNA and Our Population Health Dashboard provides an overview of key health indicators and lifestyle risk factors across the Hywel Dda region, highlighting important regional, local, age-related and gender differences. Clearly the HNA describes a

number of important health indicators and describes variation across the three counties and primary care clusters. These findings will enable actions to be taken to reduce risk factors and improve quality of life, together with addressing health inequalities. The comprehensive HNA may also be used to support effective planning of services across the region to ensure they truly meet the needs of the population.

Population Health Intelligence

Lead Director:

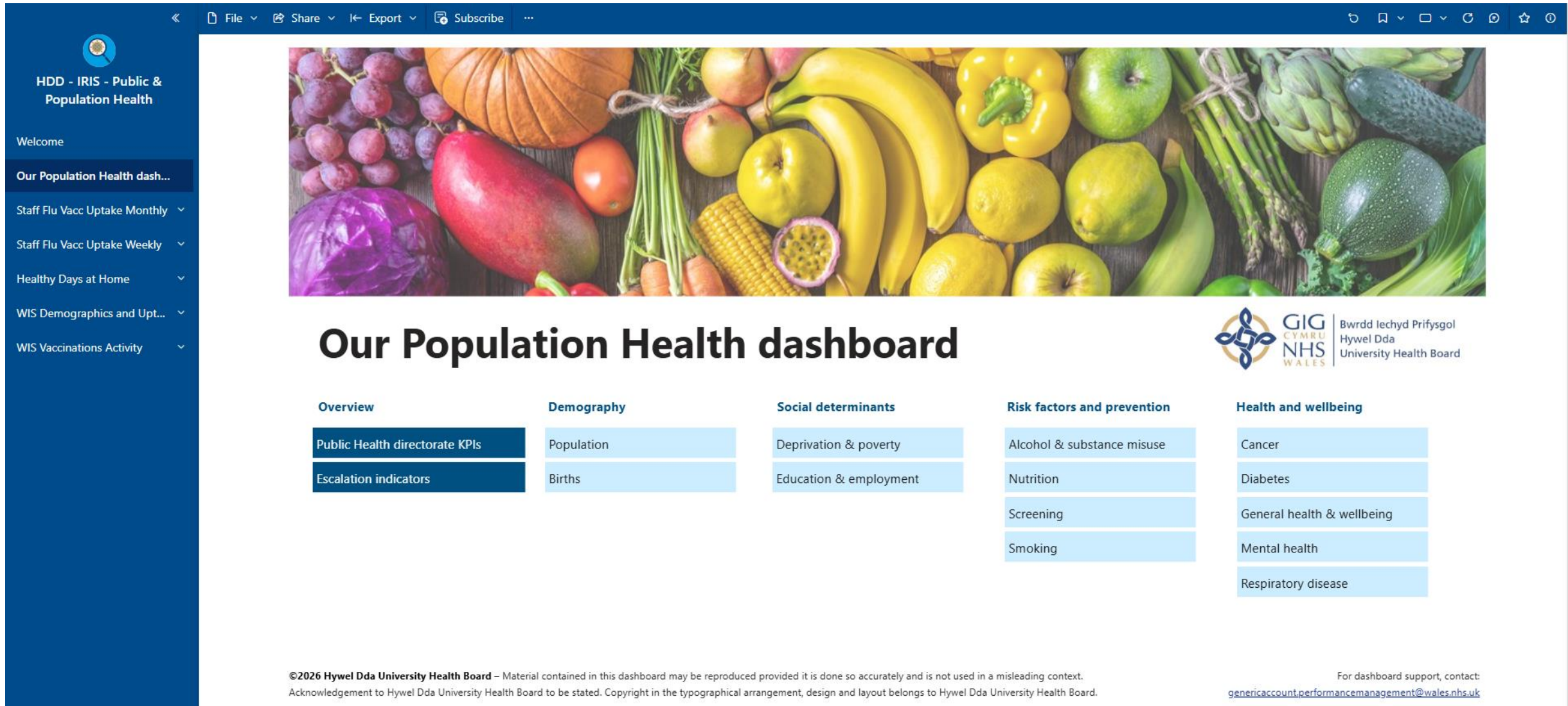
Dr Ardiana Gjini, Executive Director of Public Health

Reporting Officers:

Bethan Lewis, Assistant Director of Public Health Strategic Business and Operations

Dr Michael Thomas, Consultant in Public Health Medicine

Our Population Health dashboard - Power BI



The screenshot shows a Power BI dashboard interface. At the top, there is a navigation bar with options like 'File', 'Share', 'Export', and 'Subscribe'. On the left, a sidebar menu lists various reports under the heading 'HDD - IRIS - Public & Population Health'. The main content area features a large banner image of fresh fruits and vegetables. Below the banner, the dashboard title 'Our Population Health dashboard' is displayed, followed by the GIG CYMRU NHS WALES logo and name. The dashboard is organized into five columns, each with a category header and a list of sub-items:

- Overview**
 - Public Health directorate KPIs
 - Escalation indicators
- Demography**
 - Population
 - Births
- Social determinants**
 - Deprivation & poverty
 - Education & employment
- Risk factors and prevention**
 - Alcohol & substance misuse
 - Nutrition
 - Screening
 - Smoking
- Health and wellbeing**
 - Cancer
 - Diabetes
 - General health & wellbeing
 - Mental health
 - Respiratory disease

At the bottom of the dashboard, there is a copyright notice and contact information for support.

Comprehensive Health Needs Assessment completed as part of the Pharmaceutical Needs Assessment April/May 2026

- Provides an up-to-date overview of the health needs of the population served by Hywel Dda University Health Board (HDdUHB)
- Detailed view of the area and its population
- Focuses on:
 - The health needs of the population in the seven priority health domains where early intervention can improve outcomes, reduce system pressure and support healthier lives.
 - The four modifiable behavioural risk factors which together drive a substantial proportion of preventable illness, early death and health inequality
 - Health Issues that relate to different section of the population
- Can be used to inform planning, delivering, and reviewing pathways, services and treatments.

Population Health Intelligence

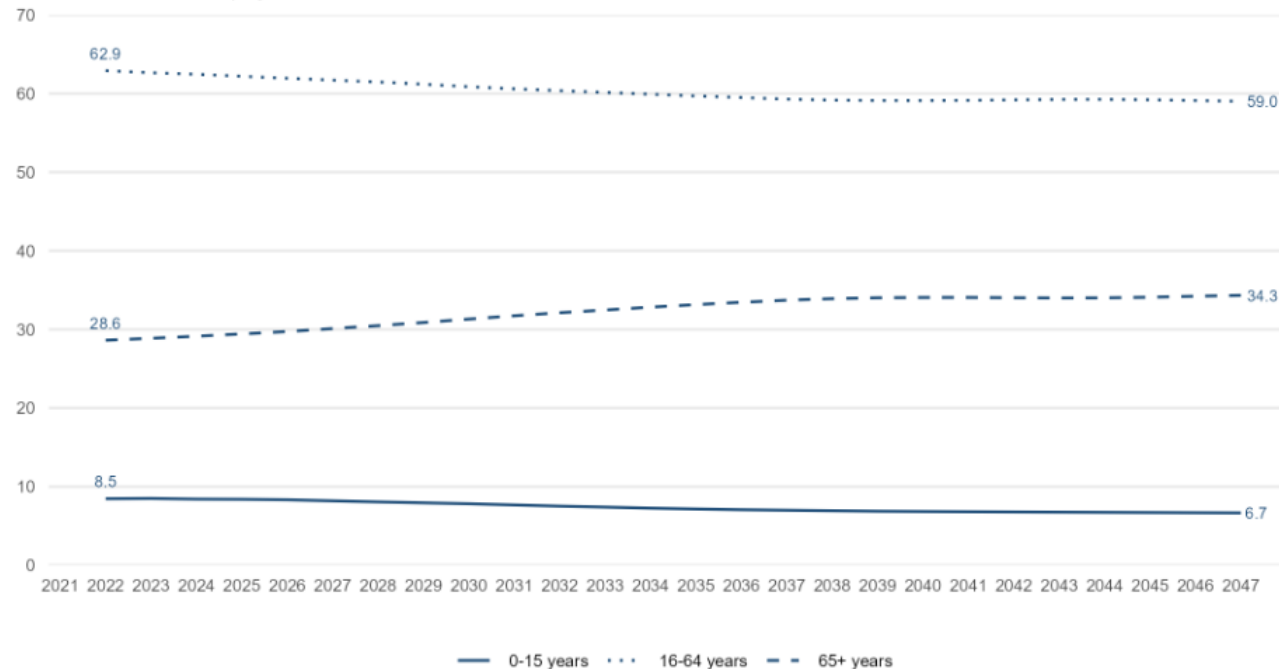
Population profile

HDdUHB has an ageing population, this is set to increase over the next 20 years, and at a faster rate than Wales as a whole (34.3% of the population of HDdUHB will be 65 and over compared to 28.7% in Wales)

This is likely to lead to a rise in the prevalence of chronic conditions, meeting the needs of these individuals will be a key challenge for us and our partners.

Population Projections, Percent Distribution by Age Cohort, Hywel Dda UHB, 2022-2047

Prepared by: Hywel Dda Public Health Team
Source: 2022-based projections for local authorities in Wales, Welsh Government



Population Health Intelligence

Chronic condition register change from earliest available data to 2023/24

Group	Condition	From	Count	Count in 2023/2024	Percentage increase
Diabetes	Diabetes (aged 17+)	2009/10	19783	29267	47.9%
Cardiovascular Disease	Atrial Fibrillation	2009/10	7881	12994	64.8%
	Heart Failure	2009/10	3905	5792	48.3%
	Hypertension	2009/10	62859	68650	9.2%
	Stroke/ <u>TIA</u>	2009/10	8716	9925	13.8%
Respiratory	Asthma	2009/10	26459	29632	12%
	COPD	2009/10	7394	9544	29%
Musculoskeletal	Osteoporosis (50+)	2012/13	352	818	132.4%
	Rheumatoid Arthritis	2013/14	3505	3916	11.7%

Table: A table showing a number of disease registers and the percentage and count change between when data was first collected and the latest available data. Quality and Outcomes Framework and the Quality Assurance and Improvement Framework, Welsh Government

Population Health Intelligence

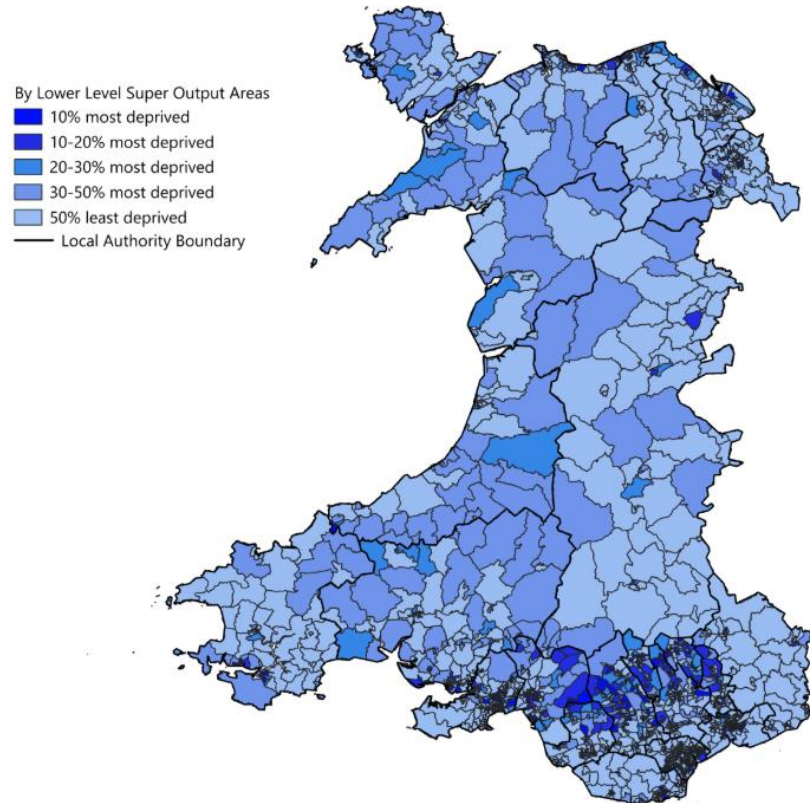
Life Expectancy and Healthy Life Expectancy

- Life expectancy in Wales has stalled.
- Male healthy life expectancy has declined since 2011-2013 from 61.3 to 59.2 years in 2022-24. Female healthy life expectancy has declined more from 61.9 in 2011-2013 to 58.5 in 2022-24.
- The difference in healthy life expectancy between deprivation quintiles remains high at roughly seven years between the most deprived and least deprived. These inequalities shape quality of life, mental wellbeing, and the ability to work, and they place significant demand on health and social care services.
- Levels in HDdUHB are similar to the Wales average, but not all the population have an equal experience.

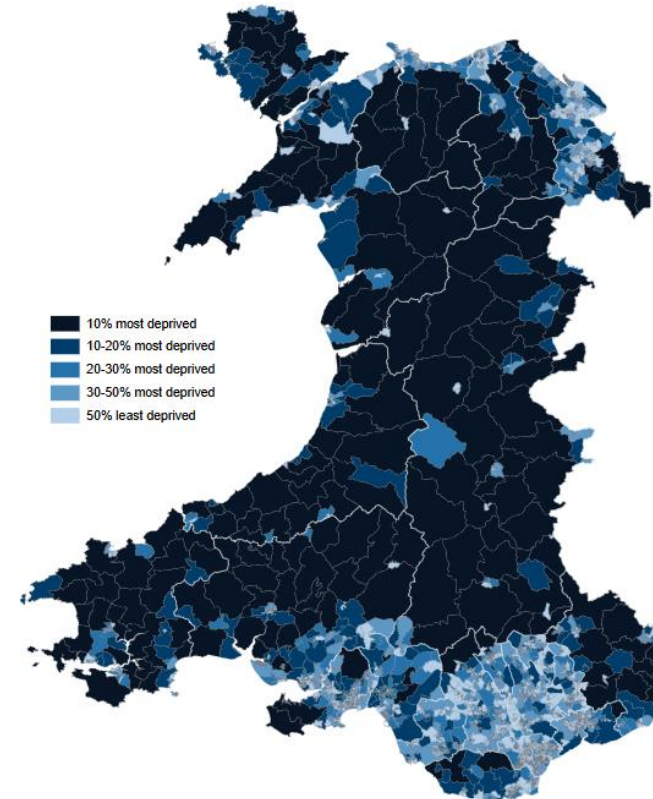
	Males			Females		
	Life Expectancy	Healthy Life Expectancy	Percentage of life expectancy in good health	Life Expectancy	Healthy Life Expectancy	Percentage of life expectancy in good health
Ceredigion	79.7	63.3	79.4	83.3	63.2	75.9
Pembrokeshire	78.8	61.6	78.2	83.1	61.5	74.0
Carmarthenshire	78.7	57.7	73.3	81.9	56.2	68.6
Hywel Dda UHB	79.1	60.1	76	82.4	59.3	72
Wales	77.9	59.2	76	82.4	58.5	71

Population Health Intelligence

Deprivation: the lack of access to opportunities and resources, which we might expect in society.



Five areas in Carmarthenshire in the most deprived Lower Layer Super Output Areas (LSOAs) in Wales, three in Pembrokeshire (Pemb) and one in Ceredigion



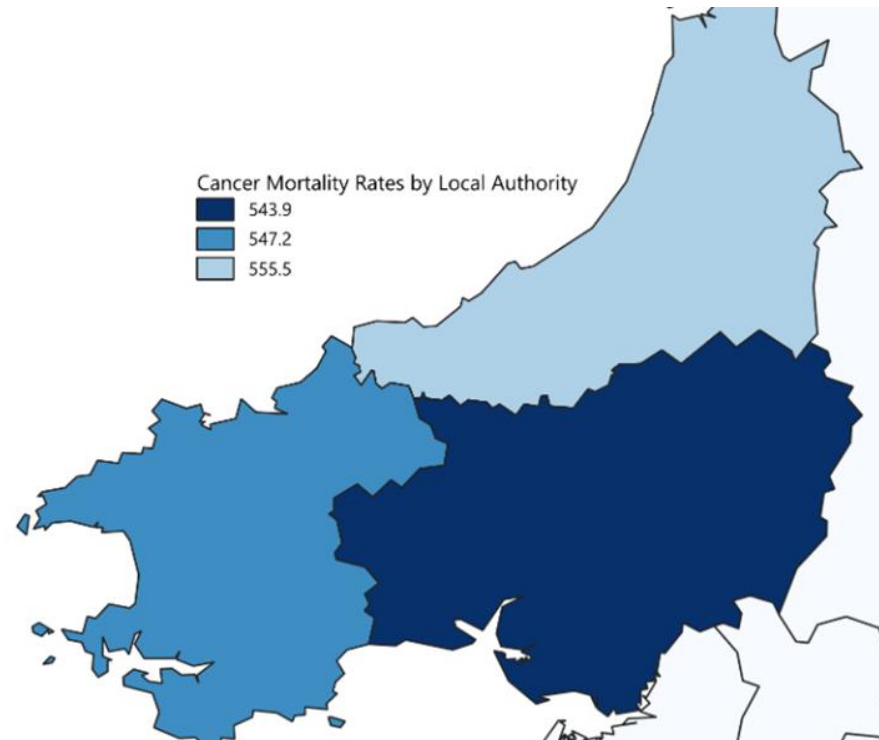
Welsh Index of Multiple Deprivation 2025: Access to services domain. Ceredigion has 44% of areas in the 10% most deprived, Pemb has 35% and Carmarthenshire (Carms) has 23%

Population Health Intelligence

Seven Priority Health Domains:

Cancer

- In HDdUHB the lowest age standardised mortality rates per 100,000 population for cancer was in Carmarthenshire at 541.9, with Ceredigion being the highest at 555.5.
- HDdUHB's mortality rate for men with prostate cancer is 48.5 in 2024 which is slightly above the Wales average of 42.6. Female breast cancer rates in HDdUHB are slightly below the Wales average at 29.5 (Wales average – 32.1).



Population Health Intelligence

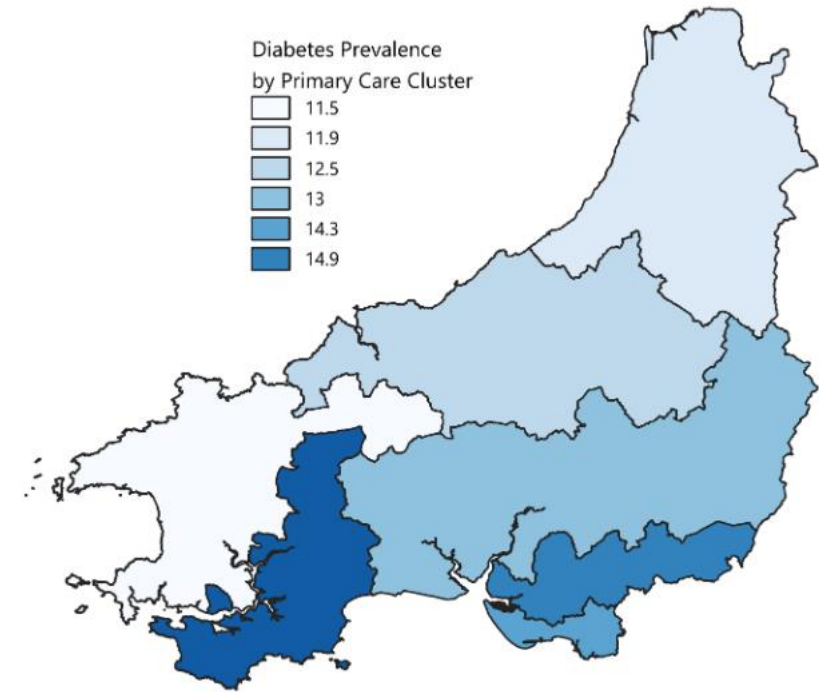
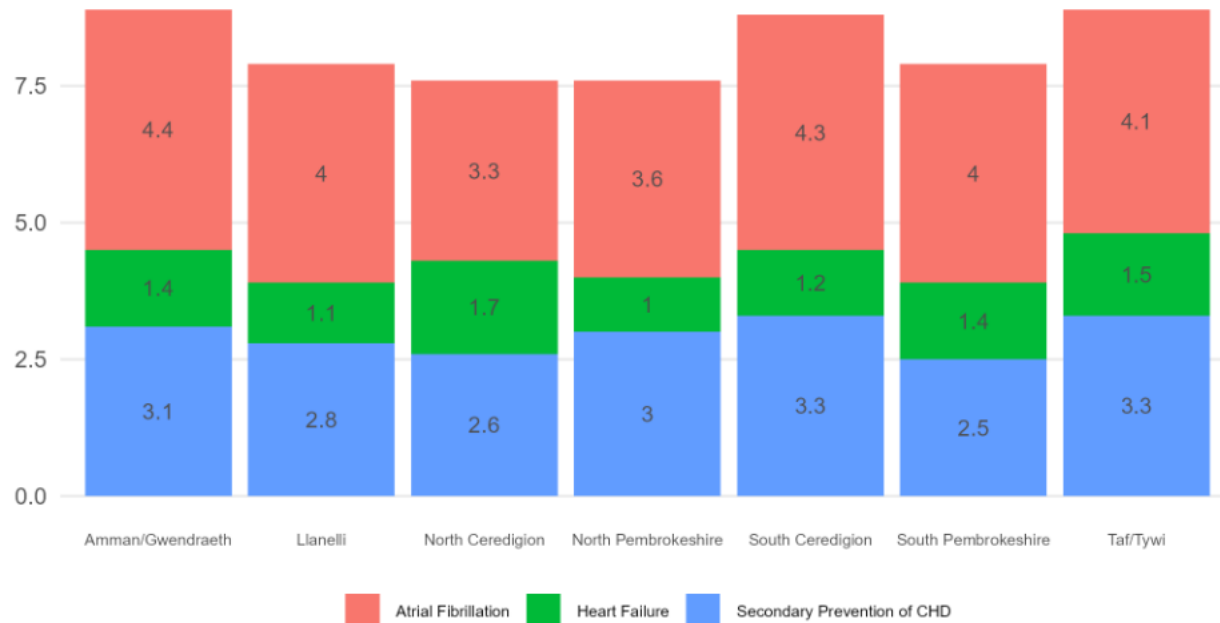
Carmarthenshire has the highest number of cardiovascular deaths.

Amman Gwendraeth, South Ceredigion and Taf Tywi GP Clusters have the higher rates of atrial fibrillation, heart failure and secondary prevention of Chronic Heart Disease (CHD).

Diabetes prevalence is highest in Amman Gwendraeth, South Pembrokeshire and Llanelli clusters.

Cardiovascular Disease in Hywel Dda, 2022

Prepared by: Hywel Dda Public Health Team



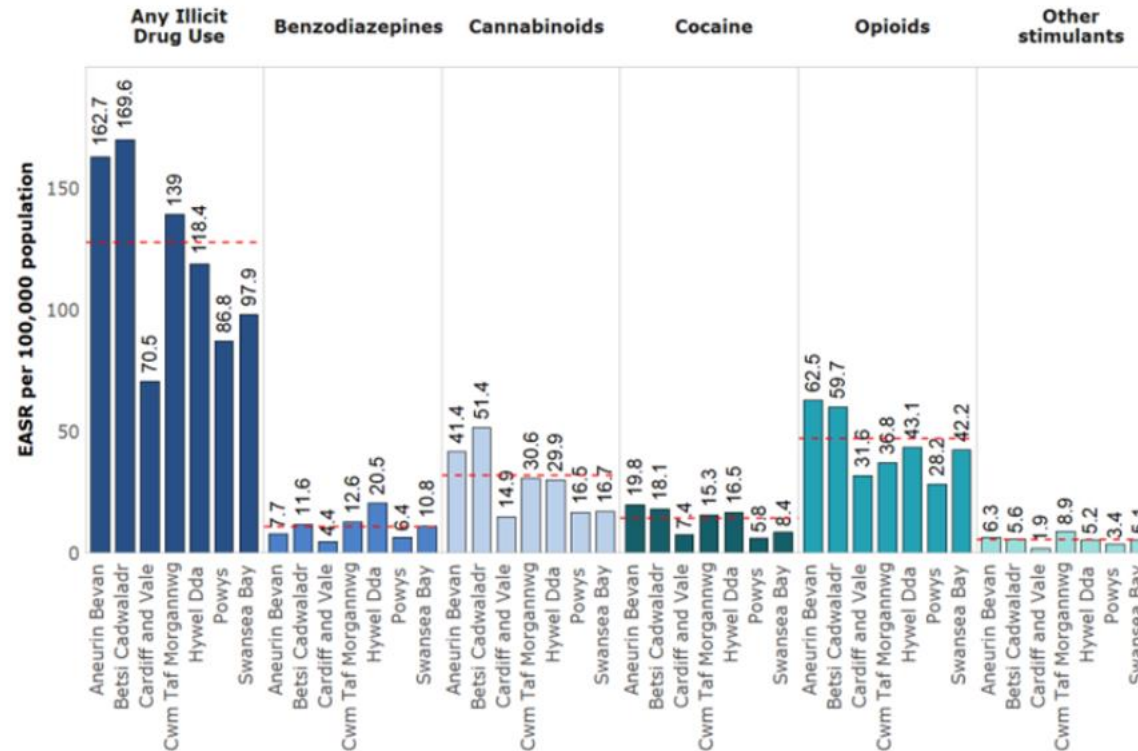
Population Health Intelligence

Mental health

Ceredigion has the highest sense of worthwhile, lowest sense of anxiety and the highest percentage of life satisfaction of the three counties, and higher than the Wales average.

Substance misuse

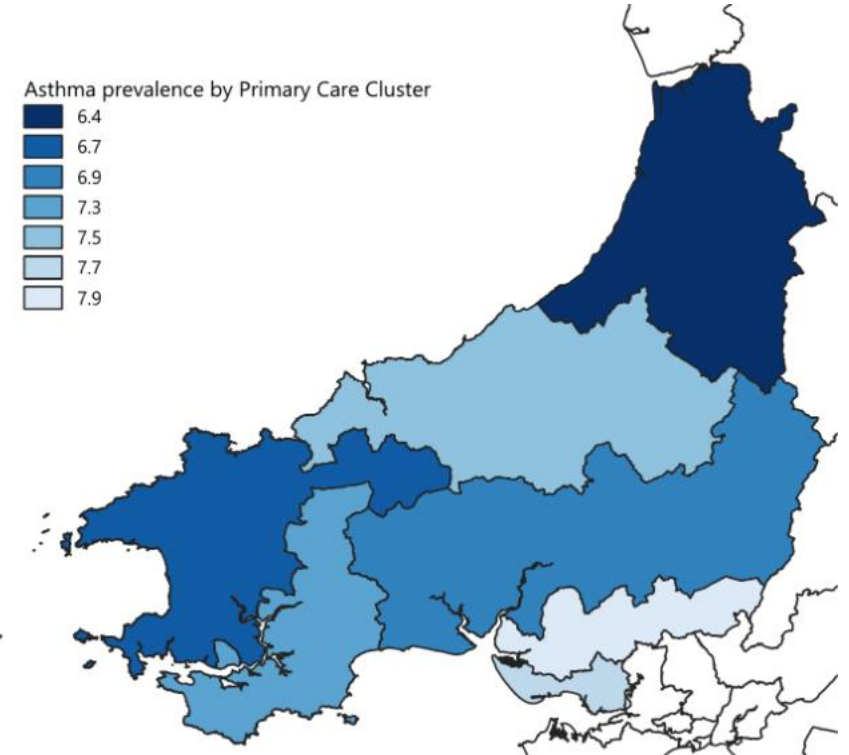
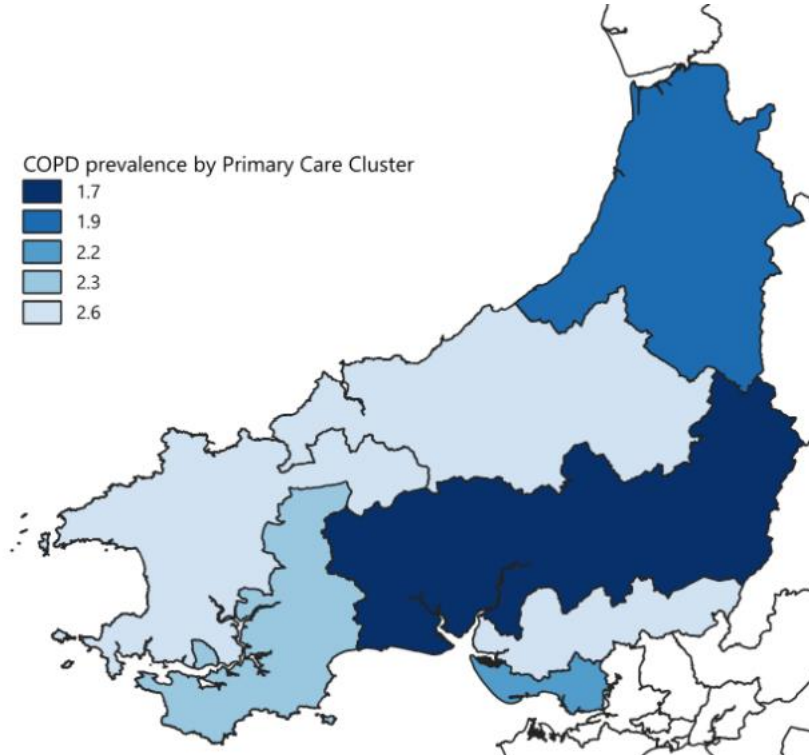
HDdUHB has a lower rate of hospital admissions related to illicit drug use than the Wales average.



Population Health Intelligence

Respiratory Disease

The most common respiratory diseases are chronic obstructive pulmonary disease (COPD), asthma, occupational lung diseases such as coal miners' pneumoconiosis, pneumonia and pulmonary hypertension. COPD prevalence is highest in North Pembrokeshire, and asthma prevalence is highest in Amman Gwendraeth.



Population Health Intelligence

Child and Maternal Health

Across Wales the percentage of children who were up to date with their Hib/MenC booster, '4 in 1' DTaP/IPV pre-school booster and Measles, Mumps, Rubella (MMR) vaccines by four years of age was 85.3%. The percentage in HDdUHB was 87%, with slight regional variation (Carmarthenshire 86.1%, Ceredigion 89.4%, Pembrokeshire 87.3%), which remains below the World health Organisation (WHO) target of 95%. The gap in uptake between the most deprived and least deprived quintile in HDdUHB is 12.1%.

HDdUHB have the second highest rate in Wales of pregnant women having a Body Mass Index (BMI) of 30+ at initial assessment (33.1% (Wales 32.1%)).

10.3% of women giving birth were recorded as smokers, lower than 12% across Wales.

Rates of breastfeeding at birth, six weeks and six months are higher in HDdUHB than for Wales at 69.2% compared to 61.9%, 34.3% compared to 30.7% and 26.2% compared to 23.2% for exclusive breast feeding respectively.

Pembrokeshire has the highest teenage conception rate in the locality and is higher than the rate for Wales (18 per 1000 females under 18 compared to 15.7 per 1000).

Frailty, falls, and physical decline

- In HDdUHB 1,333 people were admitted to hospital following a 999 call due to Level 1,2 and 3 falls in people 60 and over in 2025.
- Falls are a major cause of disability and death in older people in Wales, and result in significant human costs in terms of pain, loss of confidence and independence.
- Dementia is the leading cause of death in England and Wales
 - Estimated number of people living with dementia in West Wales is 6,161
 - Total number of people living with a diagnosis of dementia in West Wales in 2025 is 3,210
 - In 2024 the dementia diagnosis rate in West Wales was 52.1%
 - Estimated that 2,951 in West Wales are undiagnosed with dementia
 - There is a projected regional increase of 41% to 2030 (severe dementia) in West Wales, with variation as follows (West Wales MSR 2020): Carmarthenshire=41%, Ceredigion=37%, Pembrokeshire=44%.

Population Health Intelligence

The four modifiable behavioural risk factors

Smoking

- Smoking prevalence in HDdUHB has decreased significantly in the last two decades from 26% in 2003-05 to 13.4 % in 2021-23 (Carmarthenshire (14.1%) Ceredigion (13.9%) and Pembrokeshire (12.6%)).
- The European Age-standardised Rate (EASR) for smoking attributable mortality for HDdUHB is 172, per 100,000 lower than the Wales rate of 190 per 100,000. ⁴⁸ Similarly, the smoking attributable hospital admission rate per 100,000 people in HDdUHB is significantly lower at 734 per 100,000 than the Wales rate (862 per 100,000).

Nutrition

- Latest figures releases last month show that the prevalence of children living with obesity was the highest All-Wales prevalence recorded since the Child Measurement Programme began (12.8%), as was the prevalence of children living with overweight or obesity (27.3%).
- The prevalence of children living with obesity in HDdUHB area is the highest in Wales at 13.9% (along with Cwm Taf Morgannwg), with variation by locality (Pembrokeshire 11.8%, Ceredigion 13.7%, Carmarthenshire 15.2%).
- The prevalence of children living with overweight or obesity in HDdUHB was the highest in Wales (30.1).

Population Health Intelligence

Alcohol

- 16.8% of residents of HDdUHB drink more than the recommended guidelines, higher than the Welsh average of 16.4%.
- Pembrokeshire (20.3%) is higher than the Welsh average. Ceredigion with 16.3% and Carmarthenshire, with 14.9% of its residents drinking more than the recommended guidelines are lower.
- In relation to hospital admissions for an alcohol specific condition Pembrokeshire had a higher rate (443 per 100,000) than the Wales rate (370 per 100,000), both Carmarthenshire and Ceredigion had lower rates (343 per 100,000 and 352 per 100,000 respectively).

Physical Activity

- 18.7% of children in HDdUHB surveyed reported at least 60 minutes of physical activity every day for the last seven days, at a similar level to All-Wales, and this was similar for all three counties (School Health Research Network Student Health and Wellbeing survey for 11 – 16 year olds, 2023).



DIOGEL | CYNALIADWY | HYGYRCH | CAREDIG
SAFE | SUSTAINABLE | ACCESSIBLE | KIND



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Our Population Health dashboard - Power BI



HDD - IRIS - Public & Population Health

Welcome

Our Population Health dash...

Staff Flu Vacc Uptake Monthly

Staff Flu Vacc Uptake Weekly

Healthy Days at Home

WIS Demographics and Upt...

WIS Vaccinations Activity

Our Population Health dashboard - Power BI

Our Population Health dashboard



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Overview	Demography	Social determinants	Risk factors and prevention	Health and wellbeing
Public Health directorate KPIs	Population	Deprivation & poverty	Alcohol & substance misuse	Cancer
Escalation indicators	Births	Education & employment	Nutrition	Diabetes
			Screening	General health & wellbeing
			Smoking	Mental health
				Respiratory disease

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For dashboard support, contact: genericaccount.performancemanagement@wales.nhs.uk

Population Health Intelligence

Phase One includes:

Demography

Population

- Estimates by sex and age group Wales, Health Board and Local Authority

Births

- Any breast feeding at 10 days Wales, Health Board

Population Health Intelligence

Social Determinants

Deprivation and Poverty

- Percentage of the population cohort living in material deprivation and low income households trend: Wales
- Number of rough sleepers: Wales and Local Authority
- Occurrences of people placed into temporary accommodation Wales and Local Authority
- Looked after children Wales and Local Authority

Education and employment

- Average (median) gross earnings by Local Authority
- Highest qualification level of working age adults by Local Authority
- Jobseekers allowance claimants by Local Authority

Population Health Intelligence

Risk factors and prevention

Alcohol and Substance Misuse

- Alcohol attributable admission rates Wales, Health Board, Local Authority

Nutrition

- % Women with BMI 30+ at initial assessment Wales, Health Board

Screening

- % children with recorded Healthy Child Wales contacts Wales, Health Board, Local Authority
- % women having initial assessment by 10 completed weeks of pregnancy Wales, Health Board.

Smoking

- % residents Carbon Monoxide (CO) validated as successfully quitting at 4 days post quit date by Health Board
- Smoking at birth Wales, Health Board

Population Health Intelligence

Health and Wellbeing

Cancer

- Cancer related hospital Admission rates Wales, Health Board, Local Authority.
- Cancer mortality rates Wales, Health Board, Local Authority

Diabetes

- Diabetes Mortality rates Wales, Health Board.

General Health and Wellbeing

- Health in general is good or very good, Wales, Health Board, Local Authority

Mental Health

- % pregnant women reporting a mental health condition at their first assessment Wales, Health Board.

Respiratory Disease

- Respiratory related hospital emergency admission rates Wales, Health Board, Local Authority
- Respiratory disease mortality rates Wales, Health Board, Local Authority

Phase Two being developed by the Population Health Management Group chaired by Dr Michael Thomas

Demographics

Population

Population Estimates Hywel Dda University Health Board

Year
2024

Health board
Hywel Dda UHB

Local authority
All

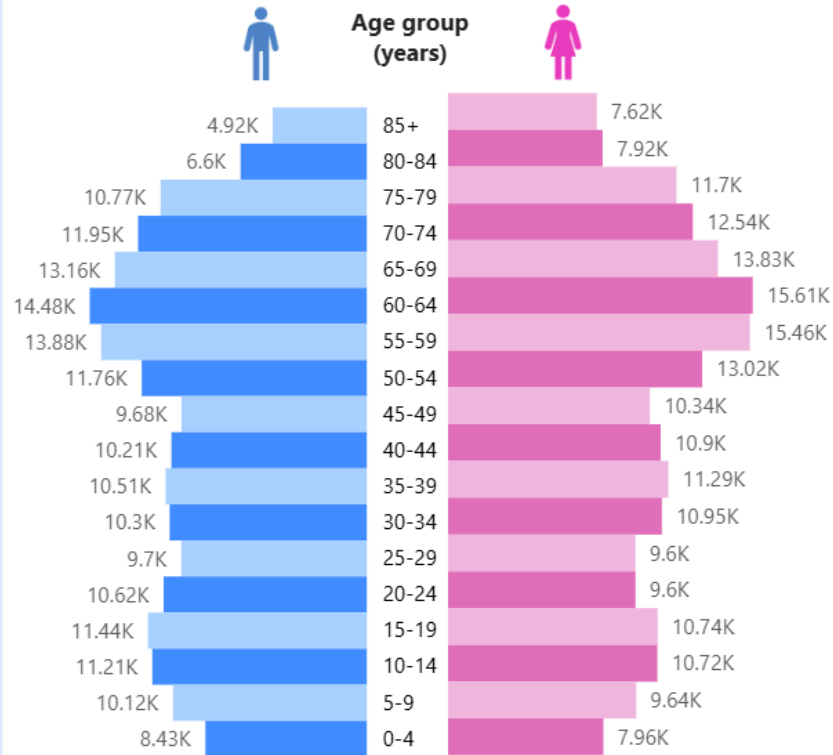
Sex
Persons

Age group
All

Population estimates

Data source: mid-year population estimates, Office for National Statistics (accessed via StatsWales)

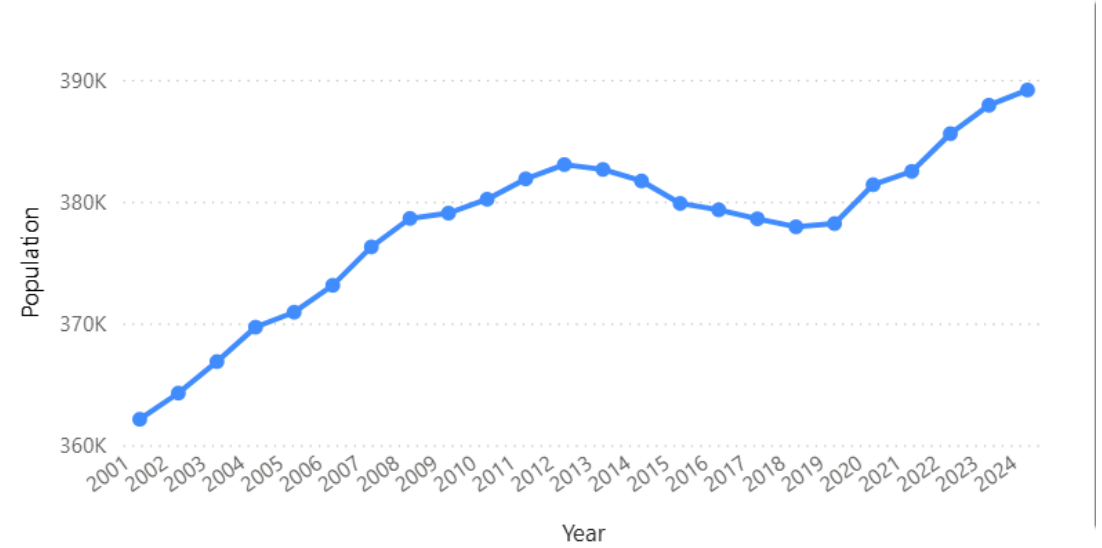
Population estimates by sex and age group: Hywel Dda UHB, 2024



Population estimates by area of residence

Health board Local authority

Population estimates trend: Hywel Dda UHB (Persons, Age: All)



% Population by age group and area of residence

Health board Local authority

Population Estimates Carmarthenshire

Year
2024

Health board
Hywel Dda UHB

Local authority
Carmarthenshire

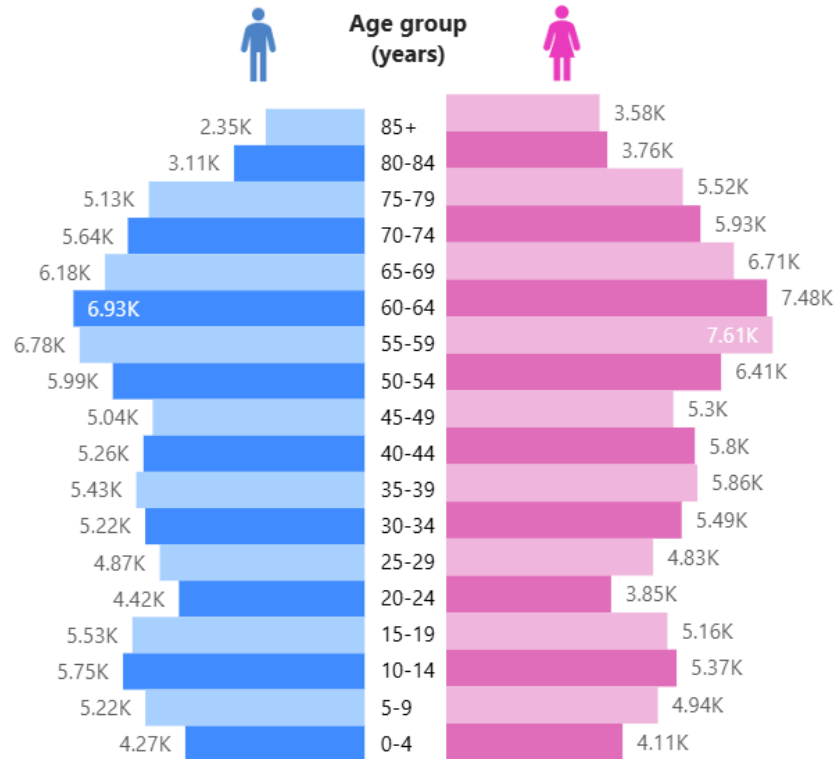
Sex
Persons

Age group
All

Population estimates

Data source: mid-year population estimates, Office for National Statistics (accessed via StatsWales)

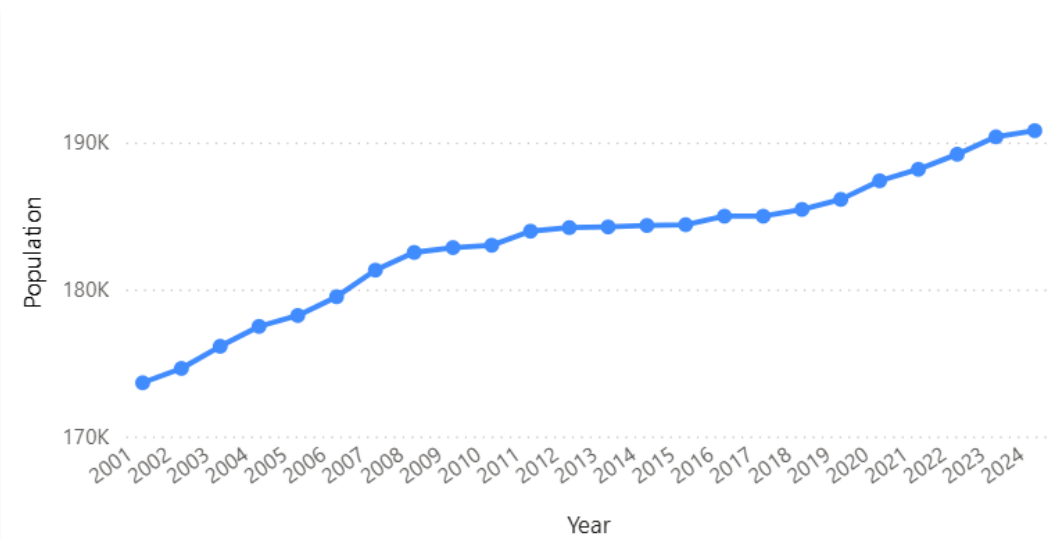
Population estimates by sex and age group: Carmarthenshire, 2024



Population estimates by area of residence

Health board Local authority

Population estimates trend: Carmarthenshire (Persons, Age: All)



% Population by age group and area of residence

Health board Local authority

Population Estimates Ceredigion

Year

2024

Health board

Hywel Dda UHB

Local authority

Ceredigion

Sex

Persons

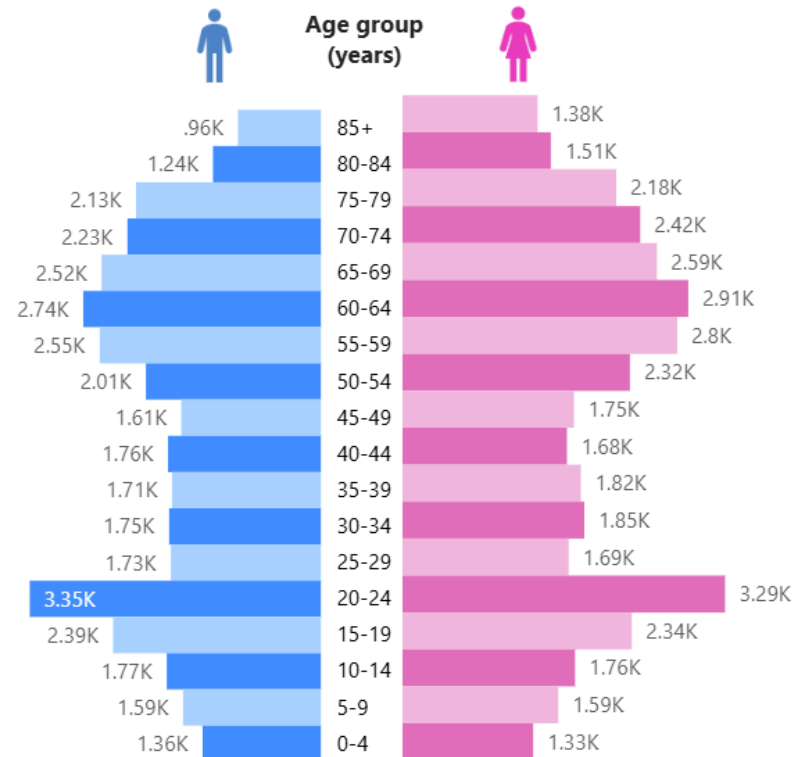
Age group

All

Population estimates

Data source: mid-year population estimates, Office for National Statistics (accessed via StatsWales)

Population estimates by sex and age group: Ceredigion, 2024

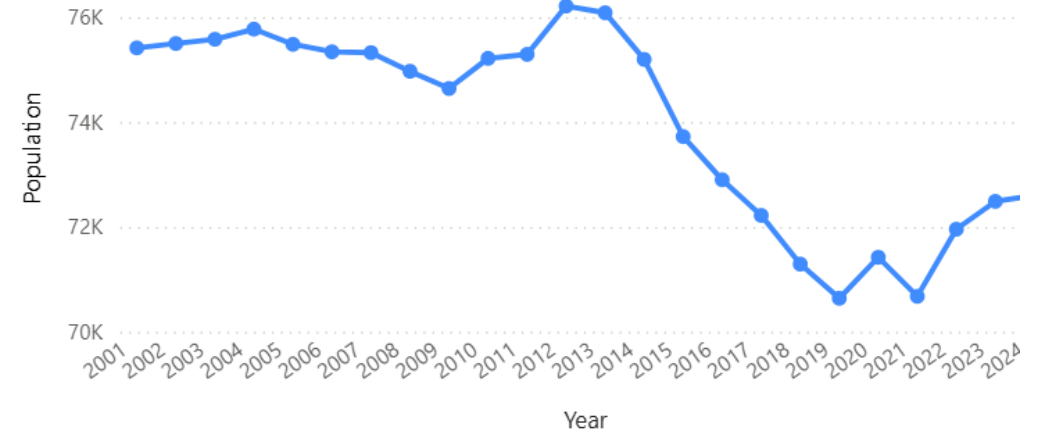


Population estimates by area of residence

Health board

Local authority

Population estimates trend: Ceredigion (Persons, Age: All)



% Population by age group and area of residence

Health board

Local authority

Population Estimates Pembrokeshire

Year
2024

Health board
Hywel Dda UHB

Local authority
Pembrokeshire

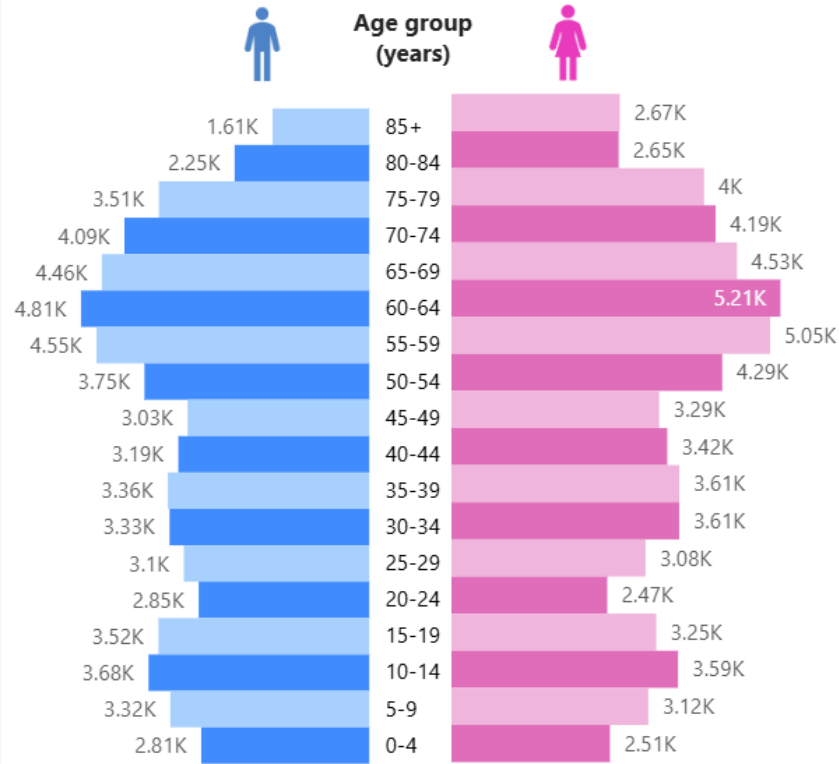
Sex
Persons

Age group
All

Population estimates

Data source: mid-year population estimates, Office for National Statistics (accessed via StatsWales)

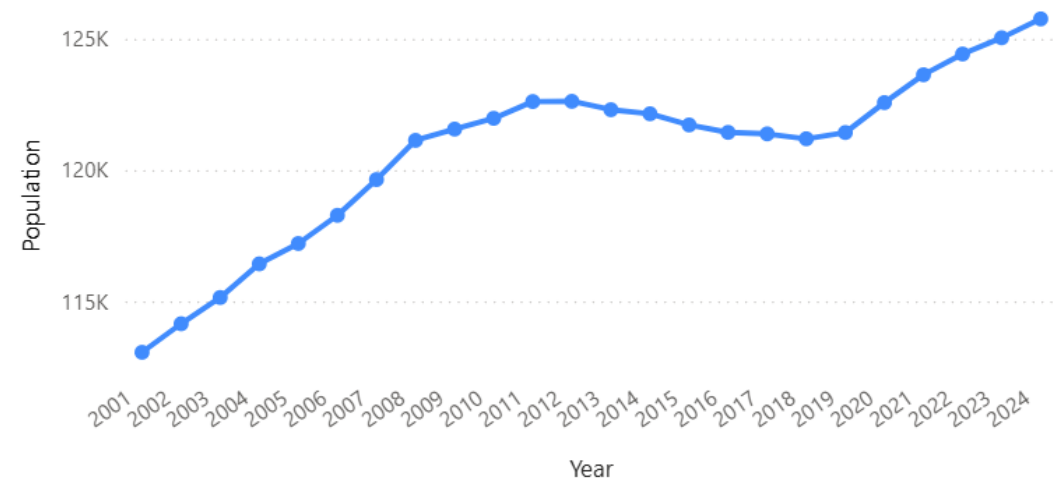
Population estimates by sex and age group: Pembrokeshire, 2024



Population estimates by area of residence

Health board Local authority

Population estimates trend: Pembrokeshire (Persons, Age: All)



% Population by age group and area of residence

Health board Local authority

Demographics

Births

Breastfeeding Hywel Dda University Health Board

Period
Jul-Sep 2025

Area
Hywel Dda UHB

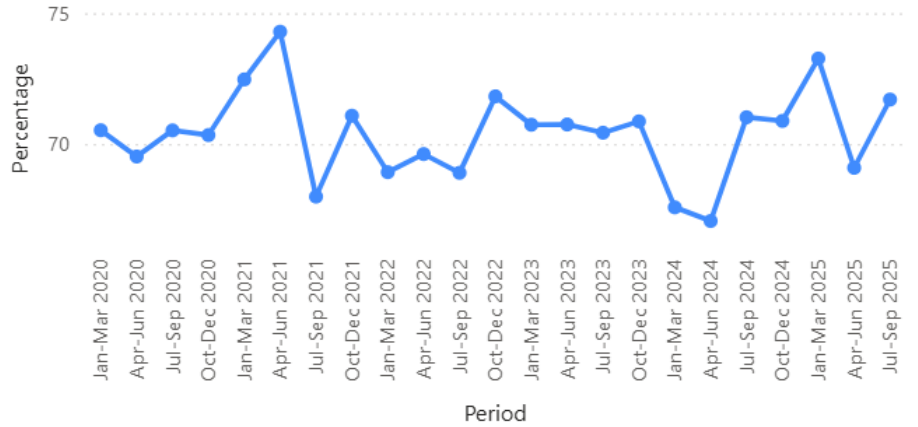
Status
Exclusive breastfeeding

Age
Birth

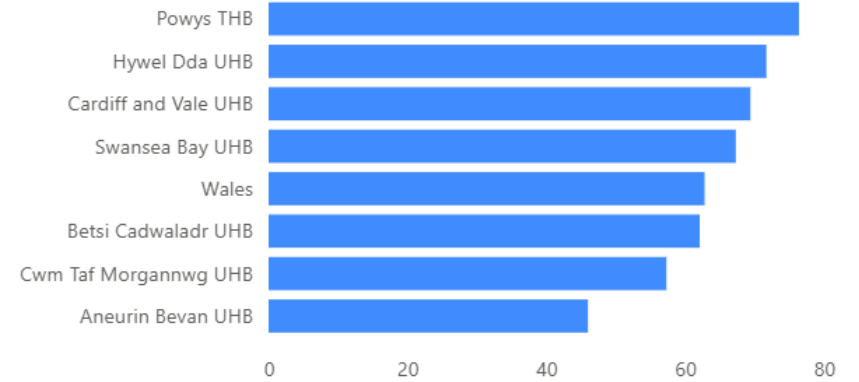
Breastfeeding

Data source: National Community Child Health Database (NCCHD) (accessed via StatsWales)

Trend by quarter: Hywel Dda University Local Health Board, Age: Birth, Status: Exclusive breastfeeding



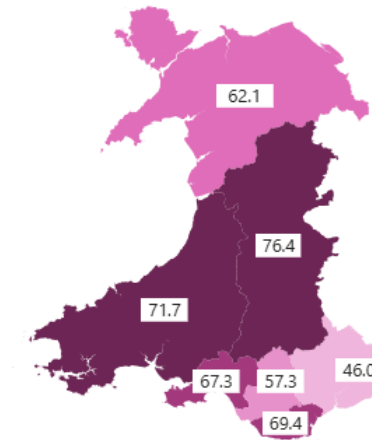
% by health board: Jul-Sep 2025, Age: Birth, Status: Exclusive breastfeeding



% by health board: Jul-Sep 2025, Age: Birth, Status: Exclusive breastfeeding

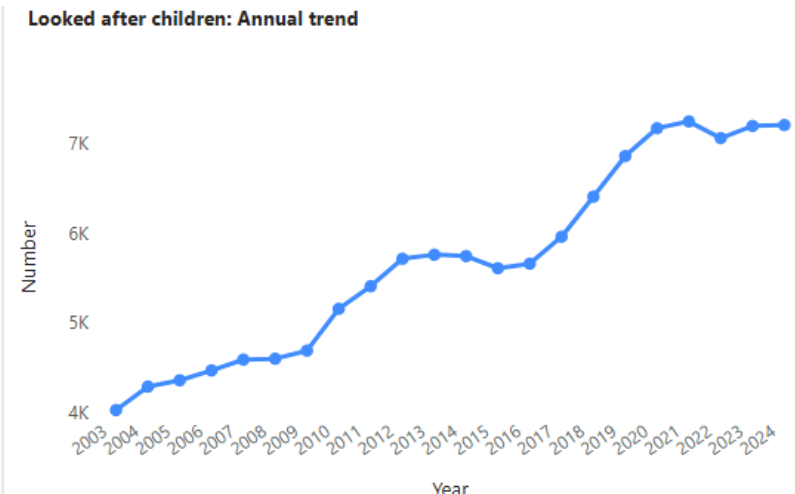
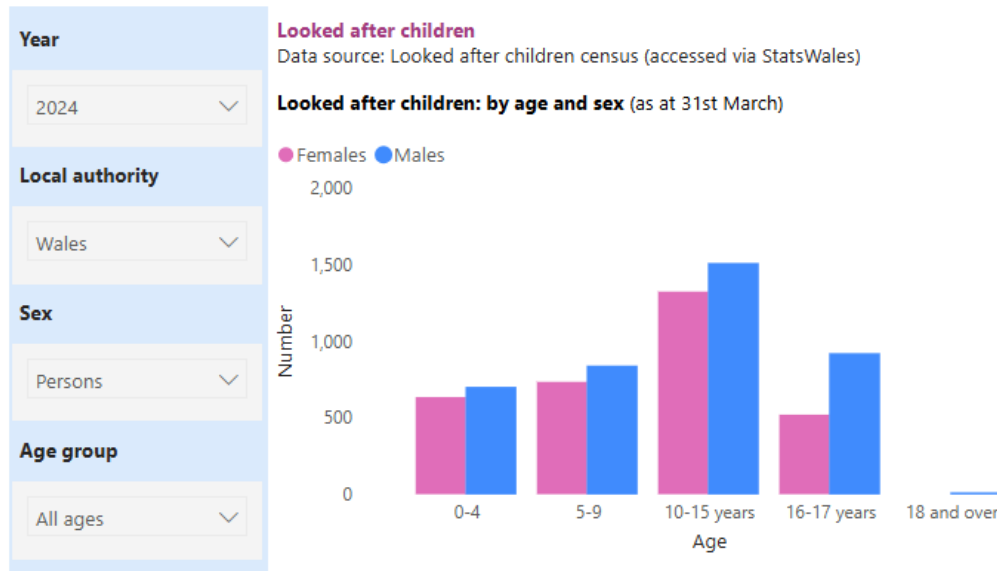
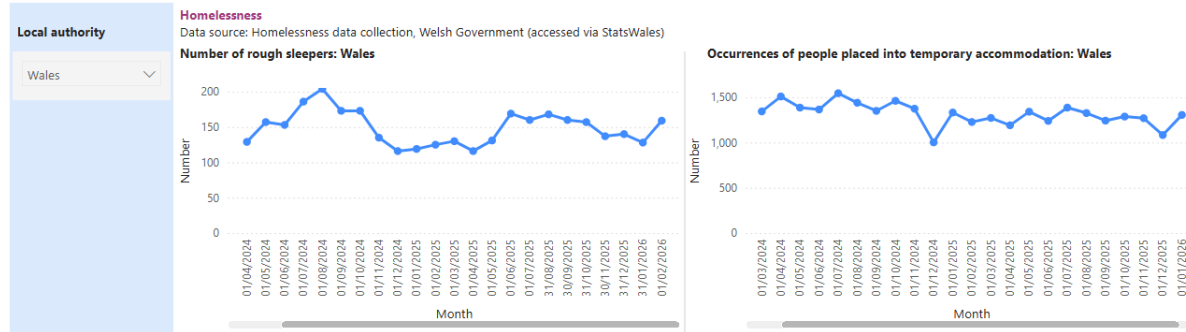
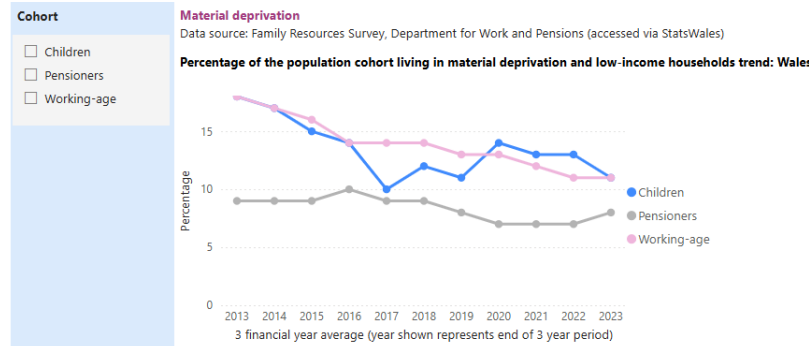
Key (%)

- > 70.3 to 76.4
- > 64.2 to 70.3
- > 58.1 to 64.2
- > 52 to 58.1
- 46 to 52
- Wales = 62.8

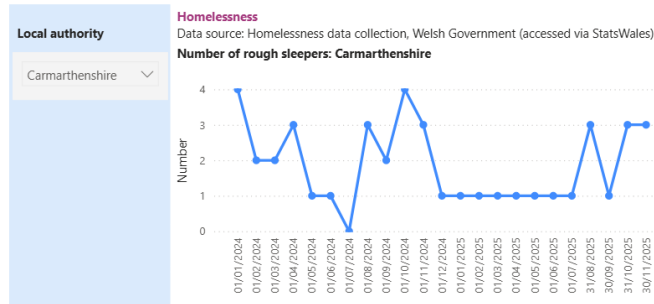
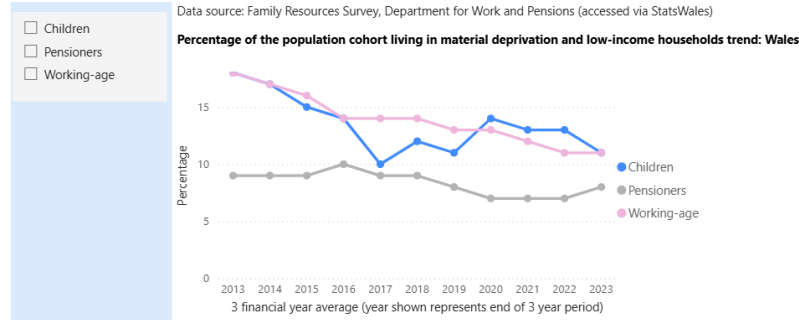


Social Determinants Deprivation and Poverty

Deprivation and Poverty, Homelessness and Looked After Children Wales



Deprivation and Poverty, Homelessness and Looked After Children Carmarthenshire



Year
2024

Local authority
Carmarthenshire

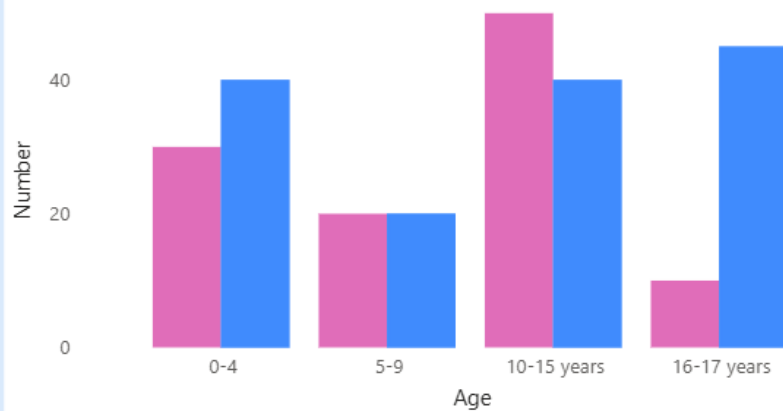
Sex
Persons

Age group
All ages

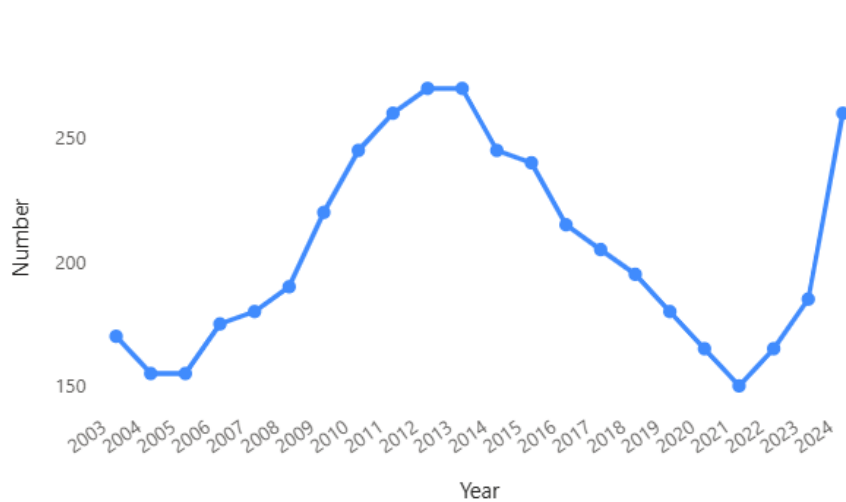
Looked after children
Data source: Looked after children census (accessed via StatsWales)

Looked after children: by age and sex (as at 31st March)

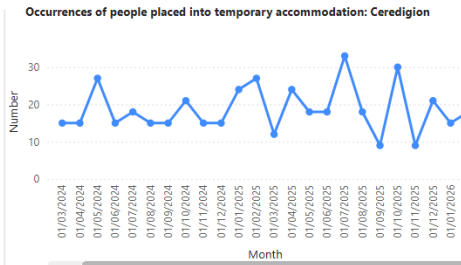
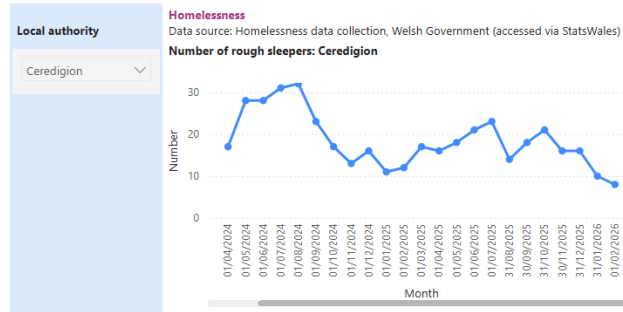
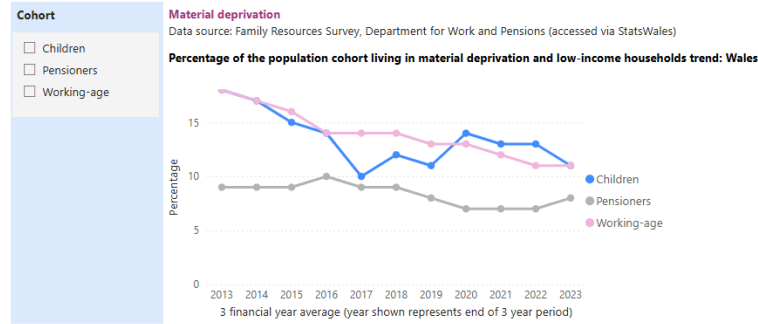
● Females ● Males



Looked after children: Annual trend



Deprivation and Poverty, Homelessness and Looked After Children Ceredigion



Year

2024

Local authority

Ceredigion

Sex

Persons

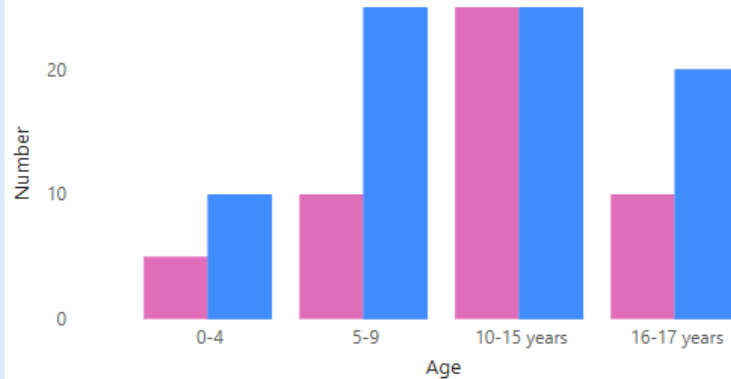
Age group

All ages

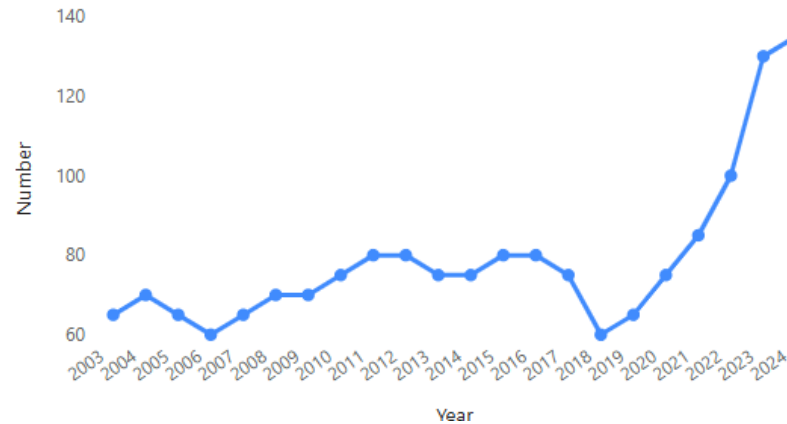
Looked after children
Data source: Looked after children census (accessed via StatsWales)

Looked after children: by age and sex (as at 31st March)

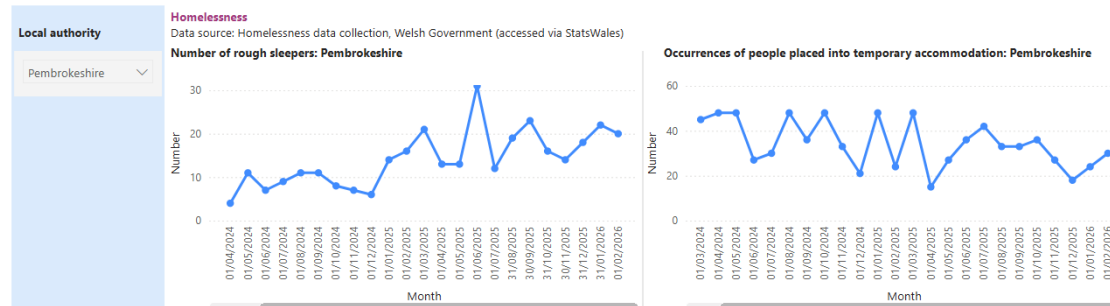
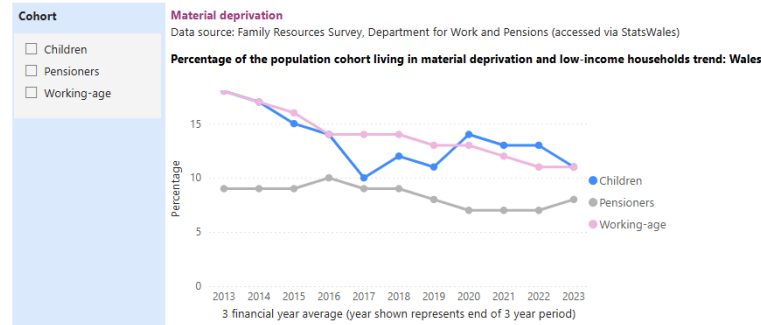
● Females ● Males



Looked after children: Annual trend



Deprivation and Poverty, Homelessness and Looked After Children Pembrokeshire



Year

2024

Local authority

Pembrokeshire

Sex

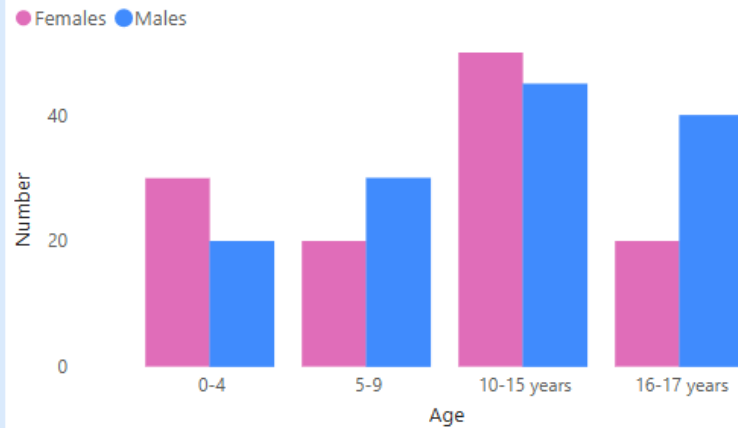
Persons

Age group

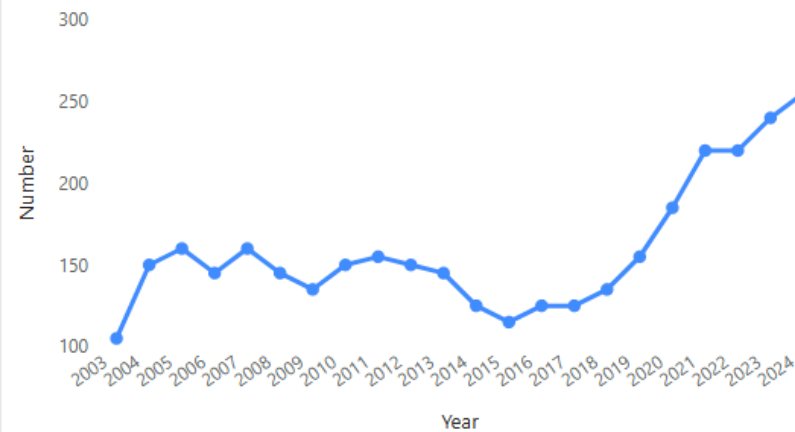
All ages

Looked after children
Data source: Looked after children census (accessed via StatsWales)

Looked after children: by age and sex (as at 31st March)



Looked after children: Annual trend



Social Determinants

Education and Employment

Average Gross Earnings Wales

Year
2025

Local authority
Wales

Sex
Persons

Measure
Hourly

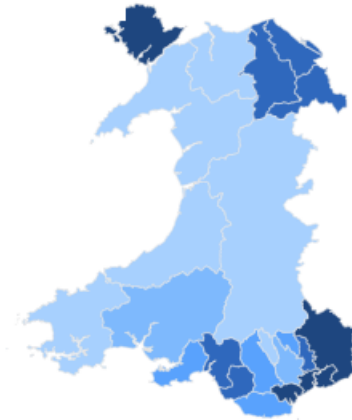
Average (median) gross earnings

Data source: Annual Survey of Hours and Earnings, Office for National Statistics (accessed via StatsWales)

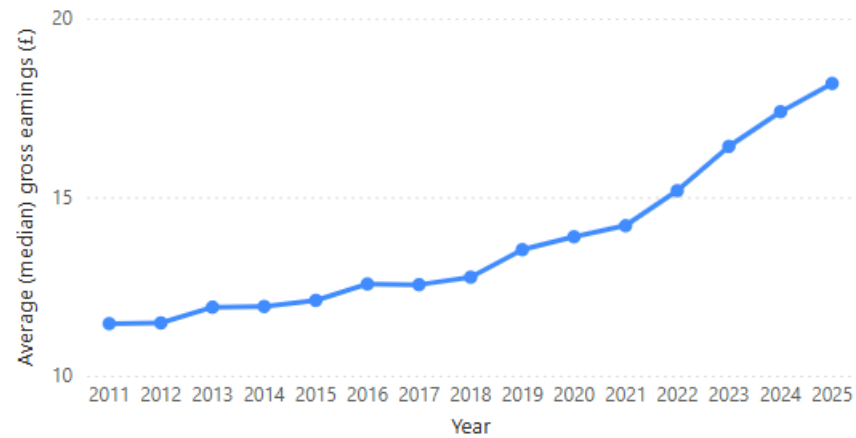
Local authority map: 2025, Persons, Hourly

Key (£s)

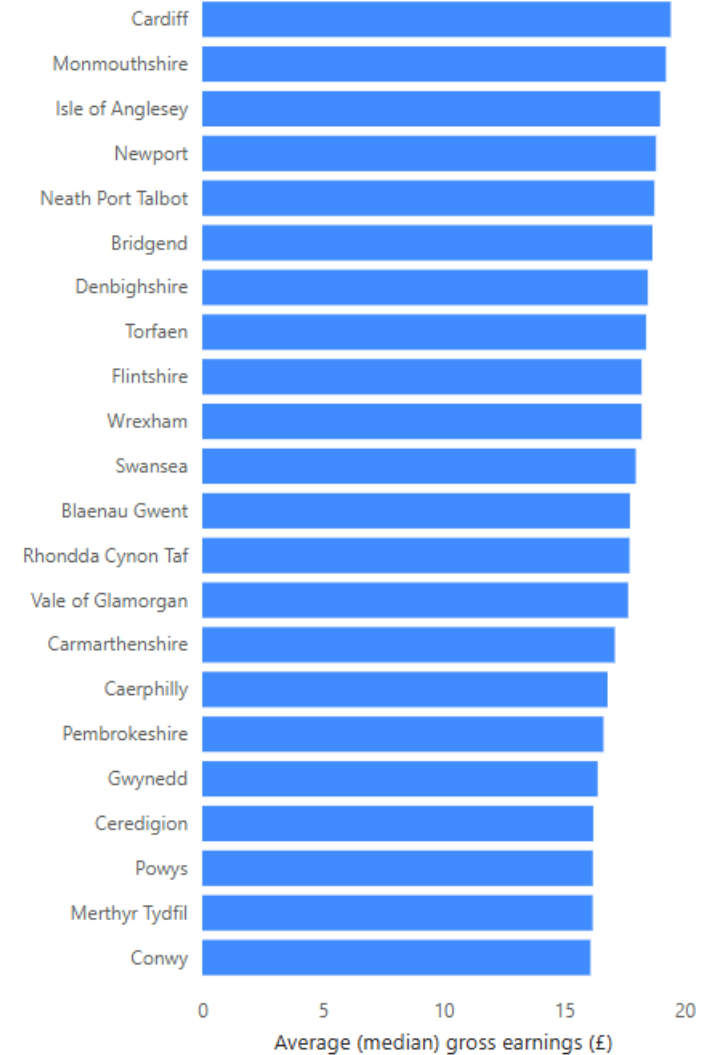
- > 18.7 to 19.4
- > 18 to 18.7
- > 17.3 to 18
- > 16.6 to 17.3
- 16.1 to 16.6
- Wales = 18.2



Trend: Wales, Persons, Hourly



By local authority: 2025, Persons, Hourly



Average Gross Earnings Carmarthenshire

Year

2025

Local authority

Carmarthenshire

Sex

Persons

Measure

Hourly

Average (median) gross earnings

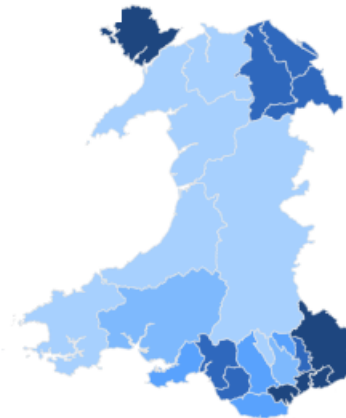
Data source: Annual Survey of Hours and Earnings, Office for National Statistics (accessed via StatsWales)

Local authority map: 2025, Persons, Hourly

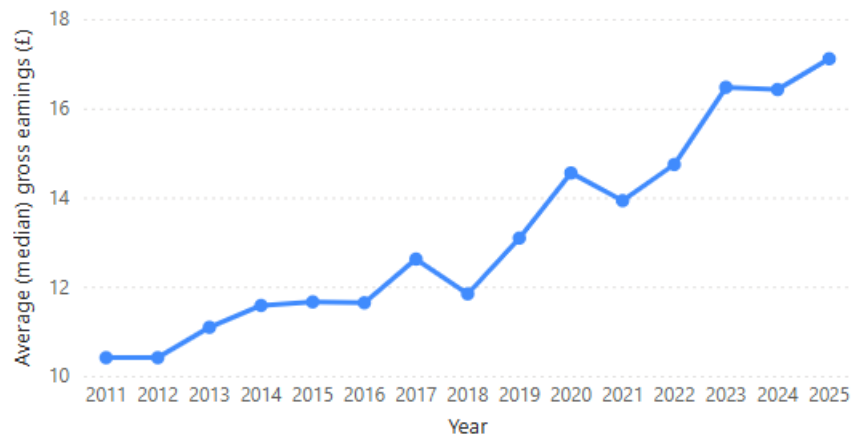
Key (£s)

- > 18.7 to 19.4
- > 18 to 18.7
- > 17.3 to 18
- > 16.6 to 17.3
- 16.1 to 16.6

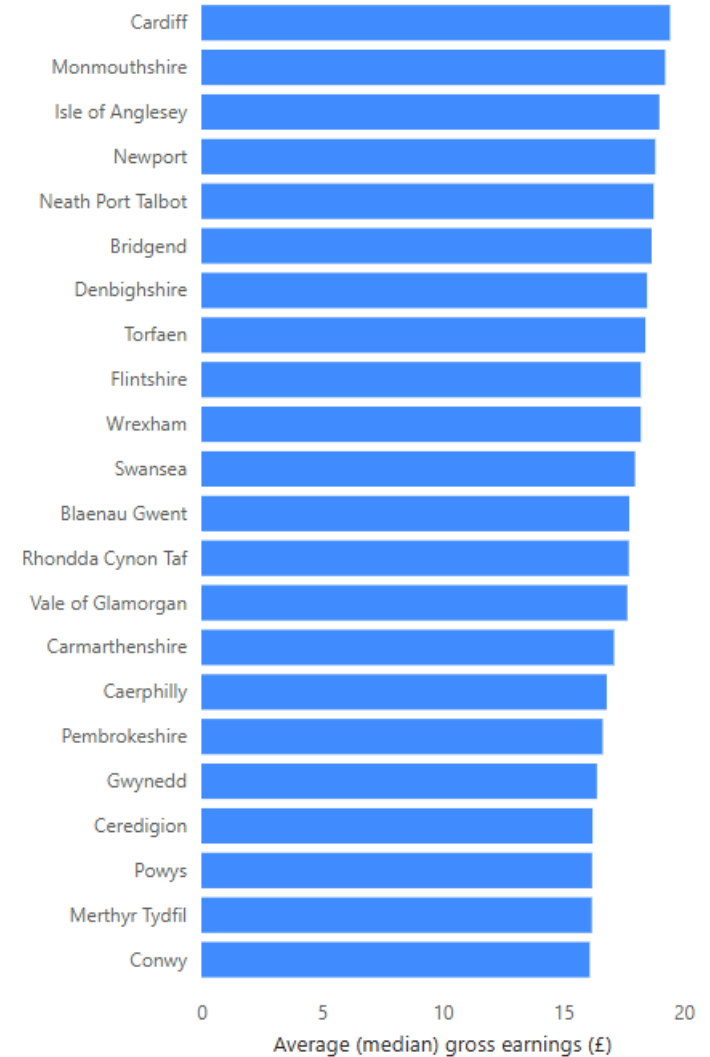
Wales = 18.2



Trend: Carmarthenshire, Persons, Hourly



By local authority: 2025, Persons, Hourly



Average Gross Earnings Ceredigion

Year
2025

Local authority
Ceredigion

Sex
Persons

Measure
Hourly

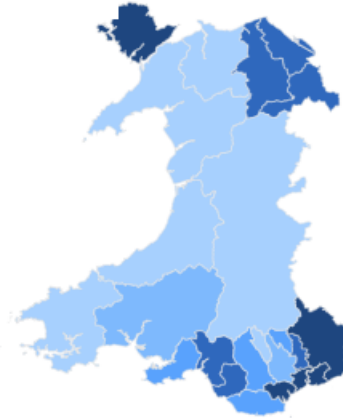
Average (median) gross earnings

Data source: Annual Survey of Hours and Earnings, Office for National Statistics (accessed via StatsWales)

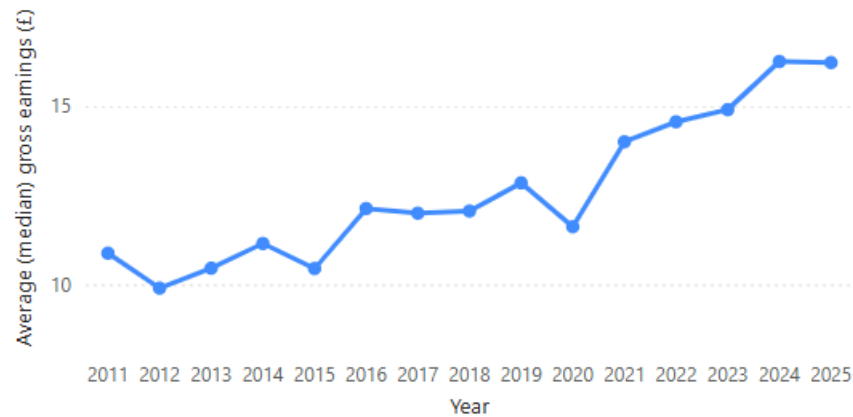
Local authority map: 2025, Persons, Hourly

Key (£s)

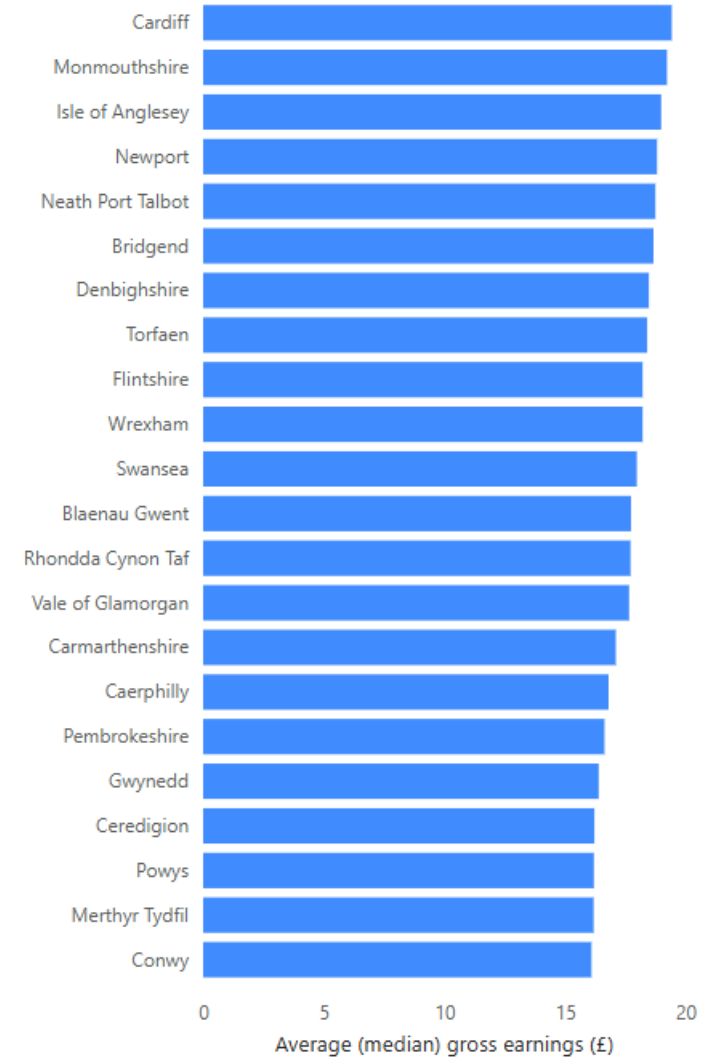
- > 18.7 to 19.4
- > 18 to 18.7
- > 17.3 to 18
- > 16.6 to 17.3
- 16.1 to 16.6
- Wales = 18.2



Trend: Ceredigion, Persons, Hourly



By local authority: 2025, Persons, Hourly



Average Gross Earnings Pembrokeshire

Year

2025

Local authority

Pembrokeshire

Sex

Persons

Measure

Hourly

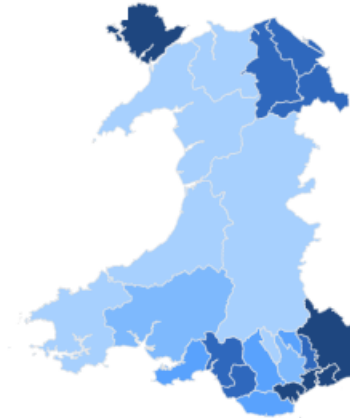
Average (median) gross earnings

Data source: Annual Survey of Hours and Earnings, Office for National Statistics (accessed via StatsWales)

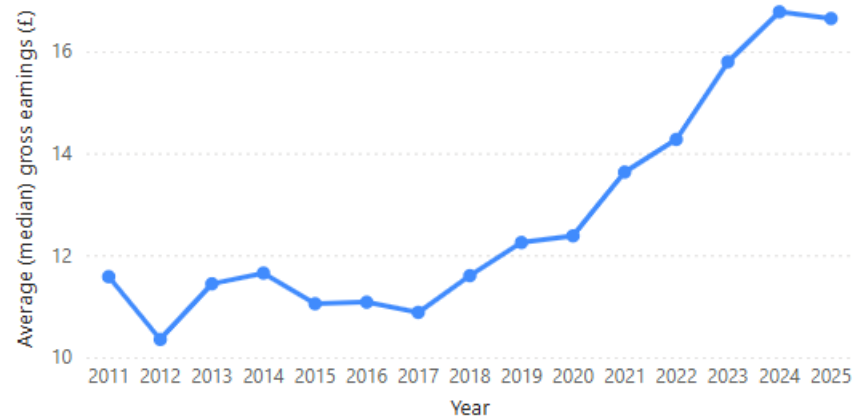
Local authority map: 2025, Persons, Hourly

Key (£s)

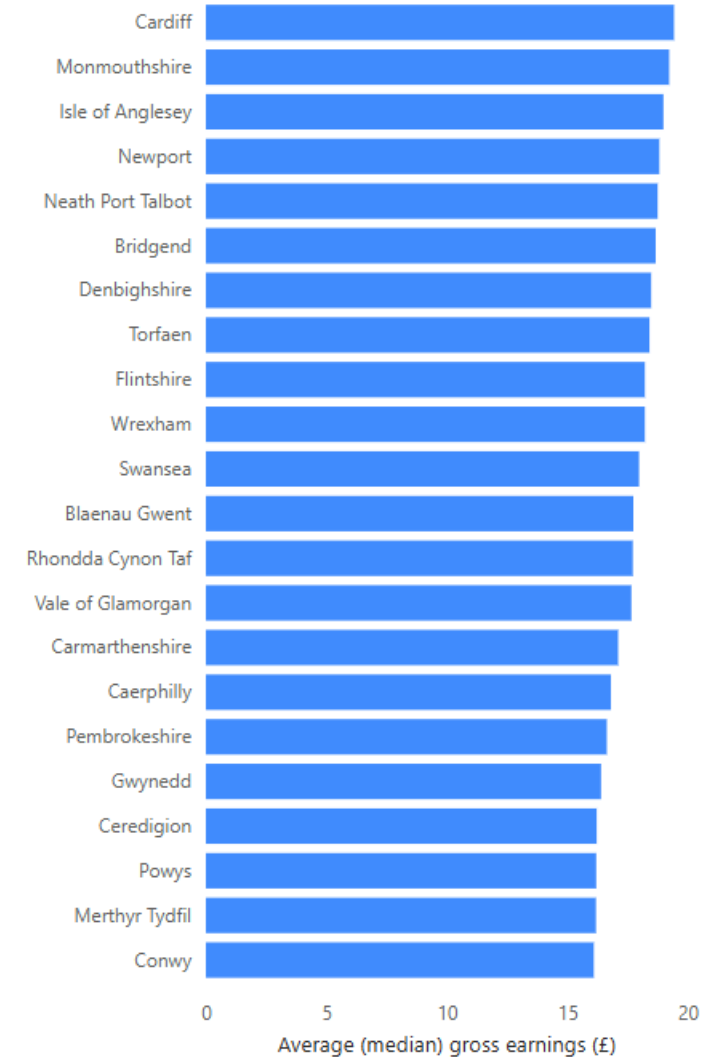
- > 18.7 to 19.4
- > 18 to 18.7
- > 17.3 to 18
- > 16.6 to 17.3
- 16.1 to 16.6
- Wales = 18.2



Trend: Pembrokeshire, Persons, Hourly



By local authority: 2025, Persons, Hourly



Risk Factors and Prevention

Alcohol and Substance Misuse

Alcohol Admission Rates Wales

Year

2024/25

Area

Wales

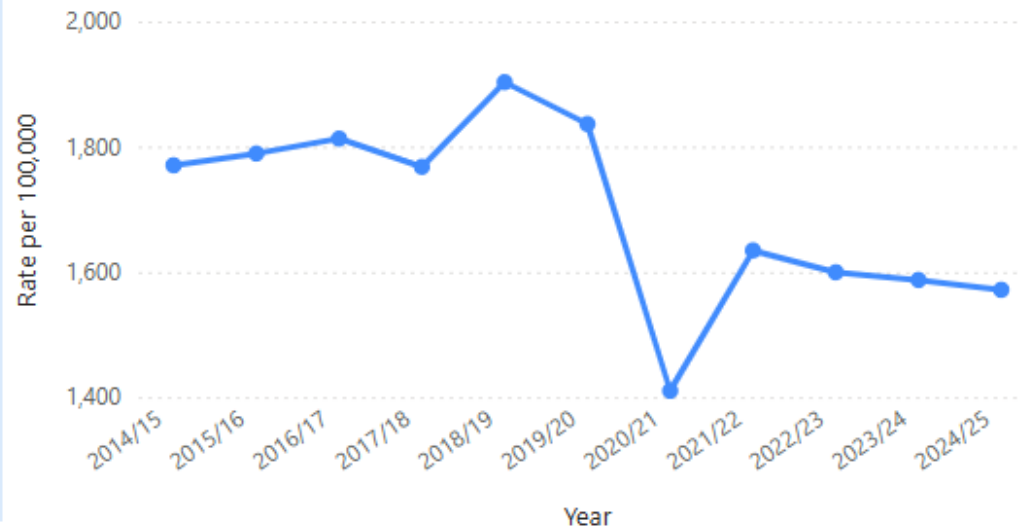
Sex

Persons

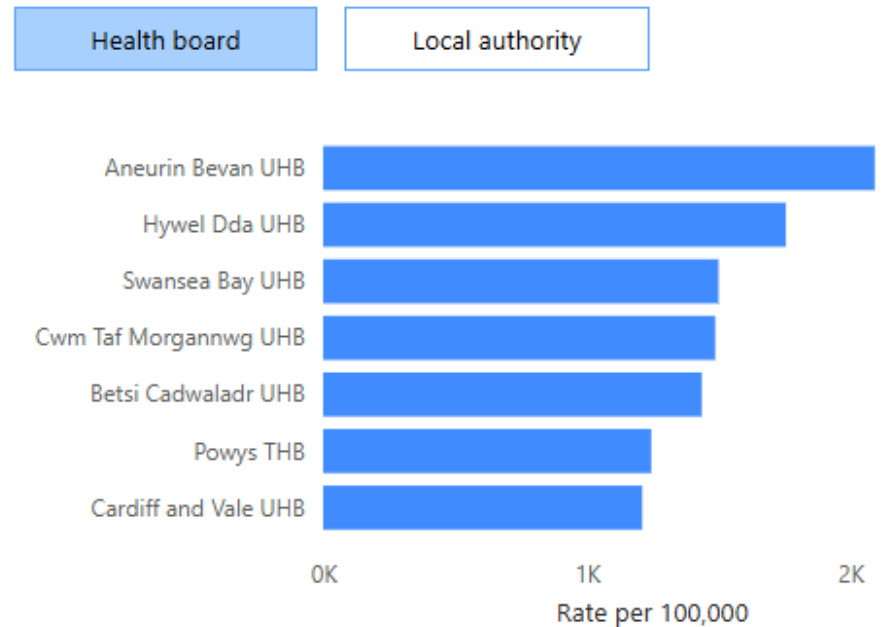
Alcohol attributable admission rates (age-standardised) per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales analysed by Public Health Wales Observatory (accessed via Health Maps Wales, DHCW)

Trend: Wales, Persons



By area: 2024/25, Persons



Alcohol Admission Rates Hywel Dda University Health Board

Year

2024/25

Area

Hywel Dda Universi...

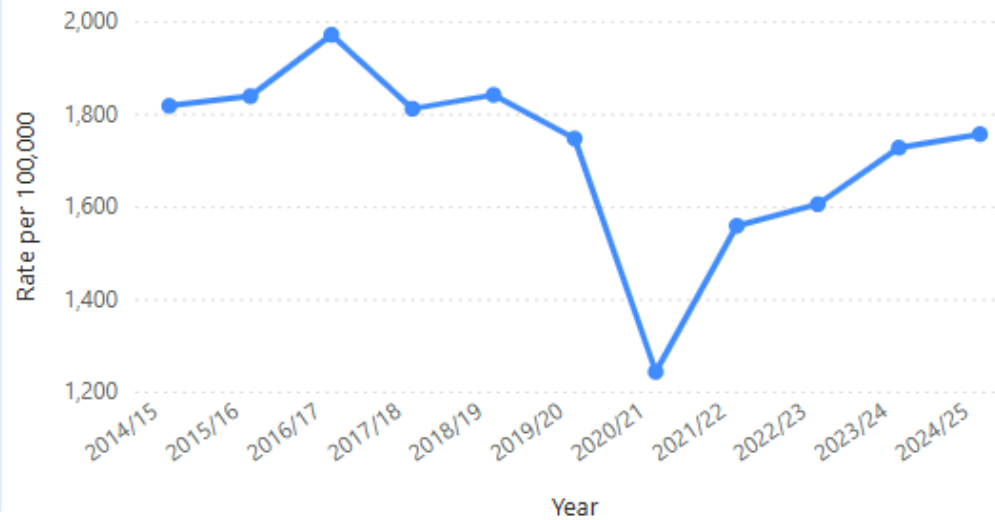
Sex

Persons

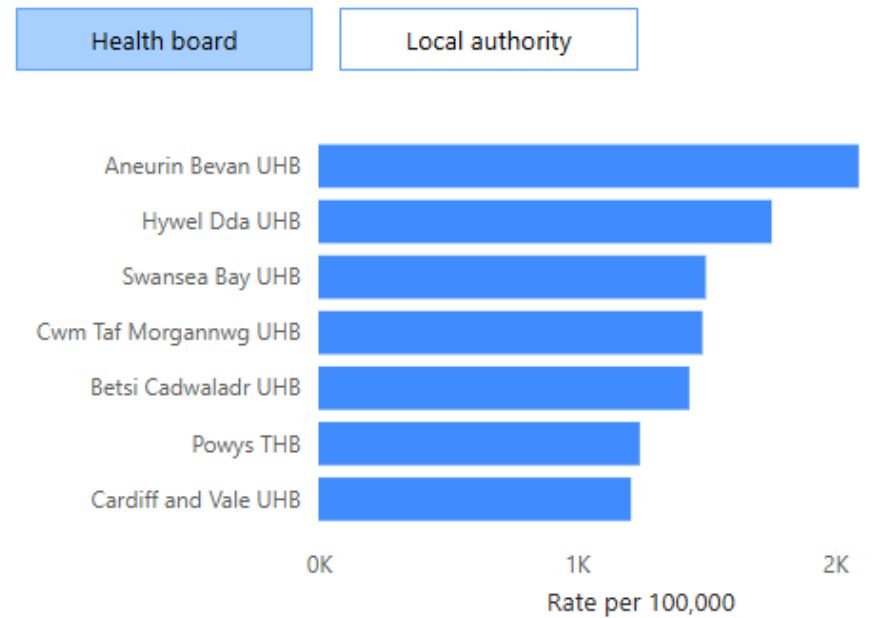
Alcohol attributable admission rates (age-standardised) per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales analysed by Public Health Wales Observatory (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda University Health Board, Persons



By area: 2024/25, Persons



Alcohol Admission Rates Carmarthenshire

Year

2024/25

Area

Carmarthenshire

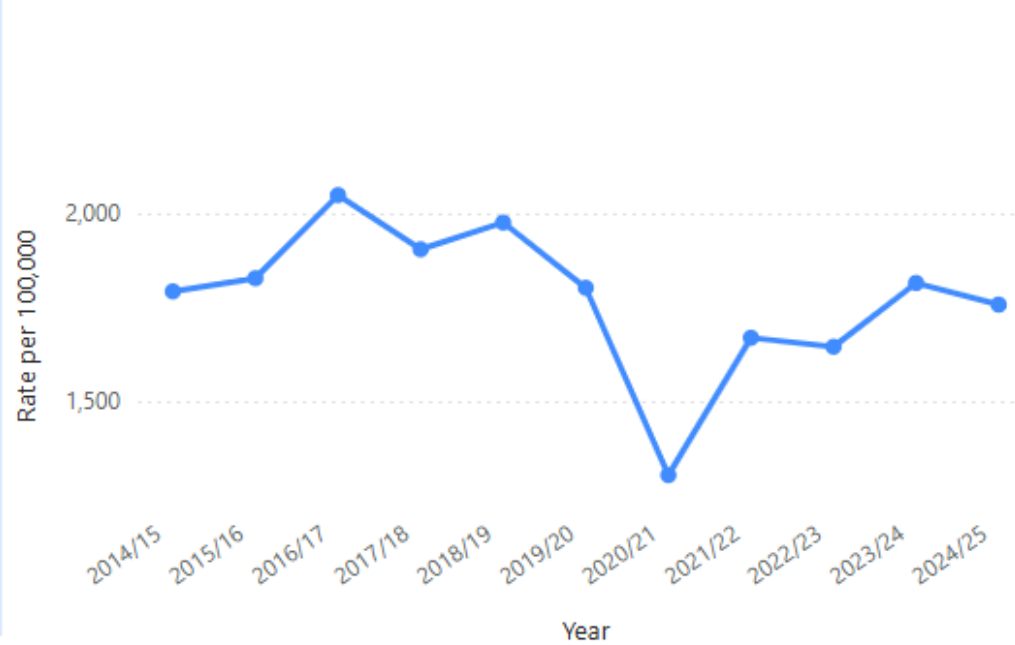
Sex

Persons

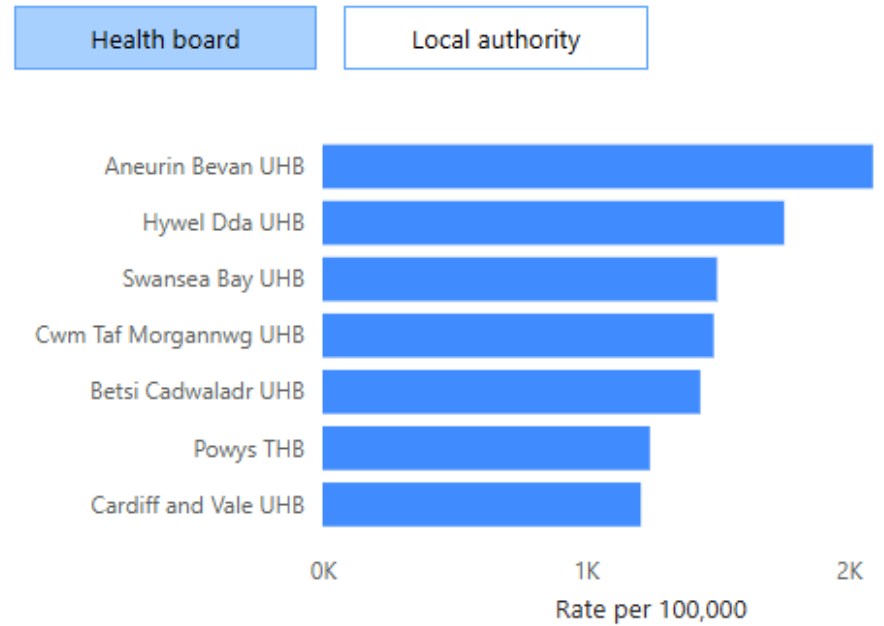
Alcohol attributable admission rates (age-standardised) per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales analysed by Public Health Wales Observatory (accessed via Health Maps Wales, DHCW)

Trend: Carmarthenshire, Persons



By area: 2024/25, Persons



Alcohol Admission Rates Ceredigion

Year

2024/25

Area

Ceredigion

Sex

Persons

Alcohol attributable admission rates (age-standardised) per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales analysed by Public Health Wales Observatory (accessed via Health Maps Wales, DHCW)

Trend: Ceredigion, Persons

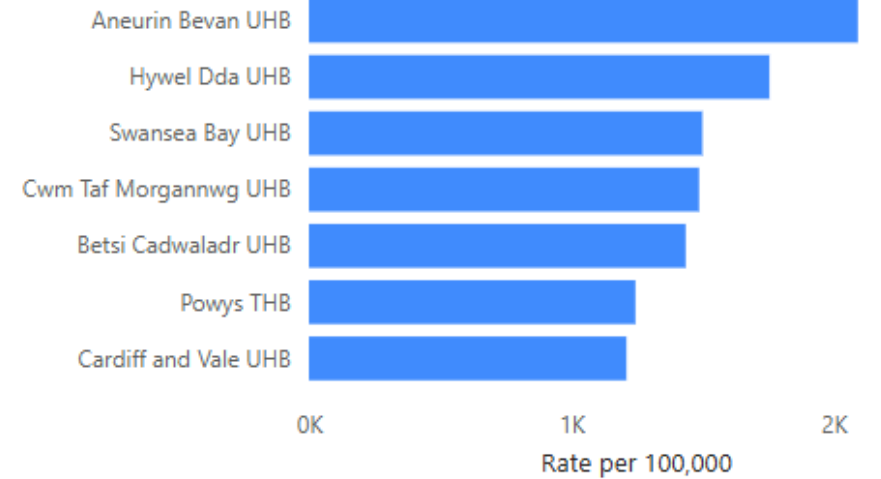
Rate per 100,000



By area: 2024/25, Persons

Health board

Local authority



Alcohol Admission Rates Pembrokeshire

Year

2024/25

Area

Pembrokeshire

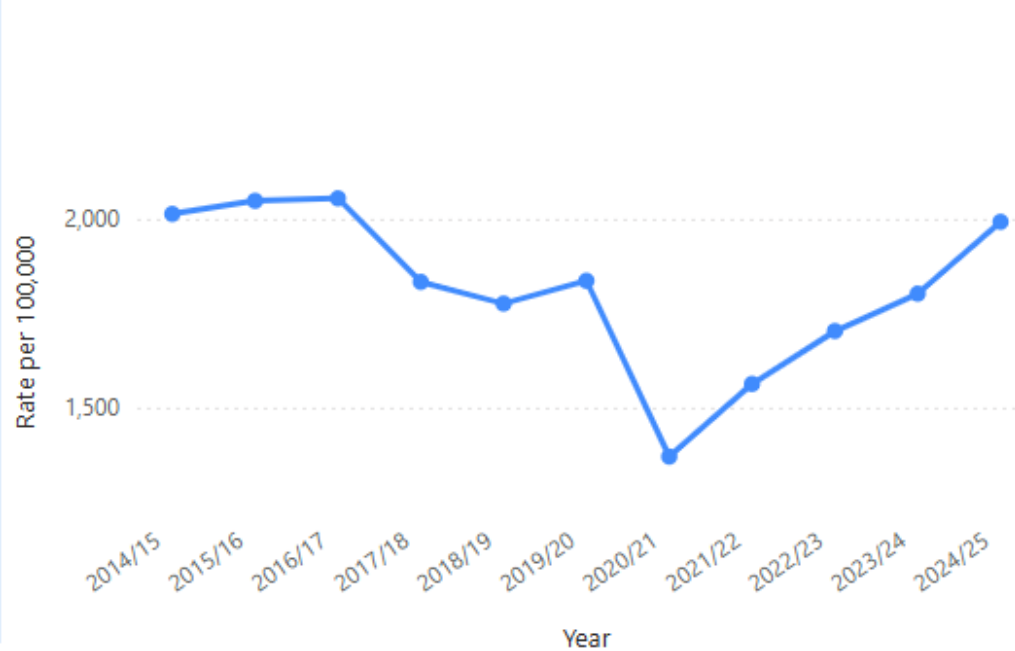
Sex

Persons

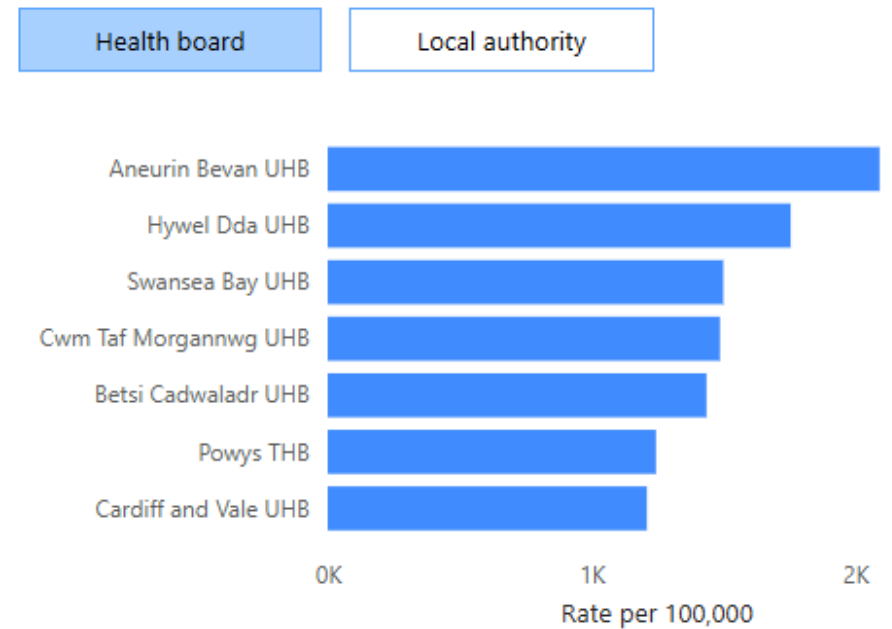
Alcohol attributable admission rates (age-standardised) per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales analysed by Public Health Wales Observatory (accessed via Health Maps Wales, DHCW)

Trend: Pembrokeshire, Persons



By area: 2024/25, Persons



Risk Factors and Prevention

Nutrition

Pregnant Women with BMI 30+ AT Initial Assessment Wales

Year

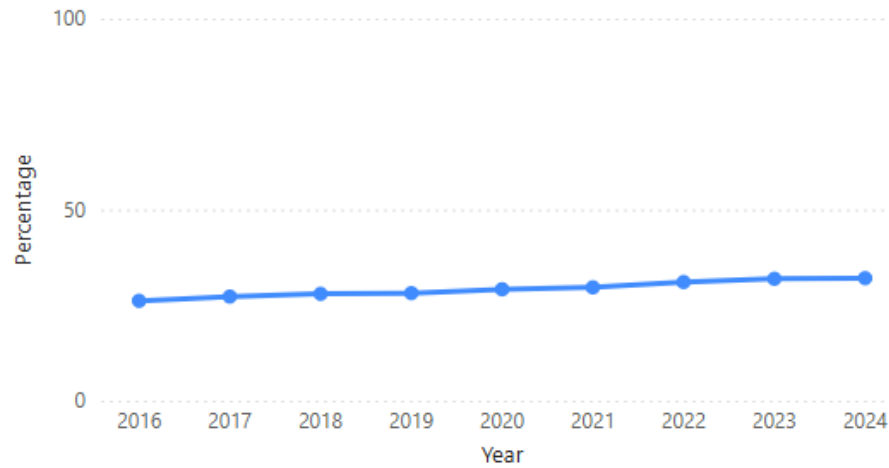
2024

Area

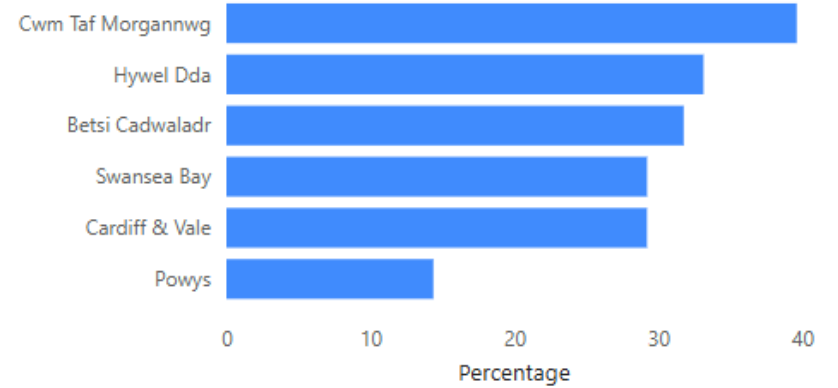
Wales

% pregnant women with BMI 30+ at initial assessment
Data source: Maternity indicators dataset (accessed via StatsWales)

Trend: Wales

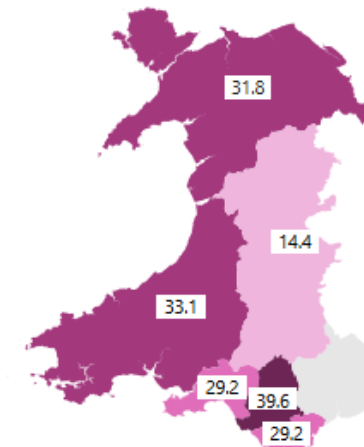


By health board: 2024



Key (%)

- > 34.6 to 39.6
 - > 29.6 to 34.6
 - > 24.6 to 29.6
 - > 19.6 to 24.6
 - 14.4 to 19.6
- Wales = 32.1



Pregnant Women with BMI 30+ AT Initial Assessment Hywel Dda University Health Board



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Year

2024

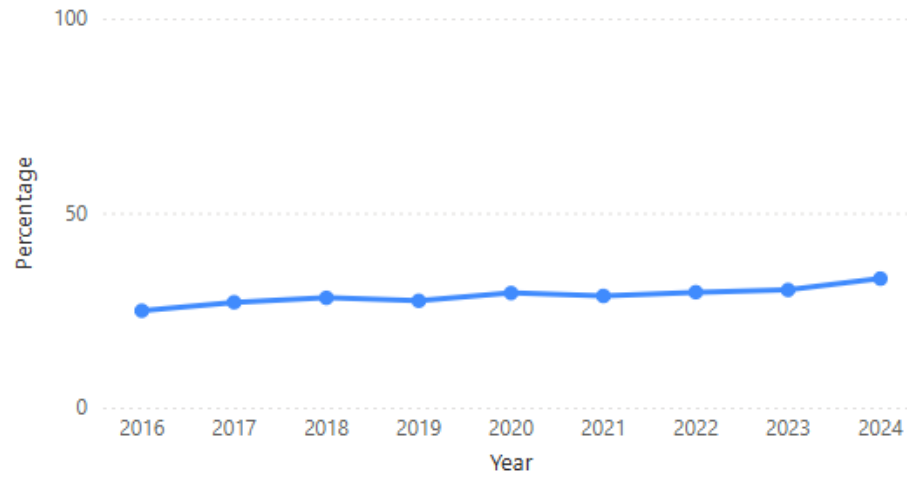
Area

Hywel Dda

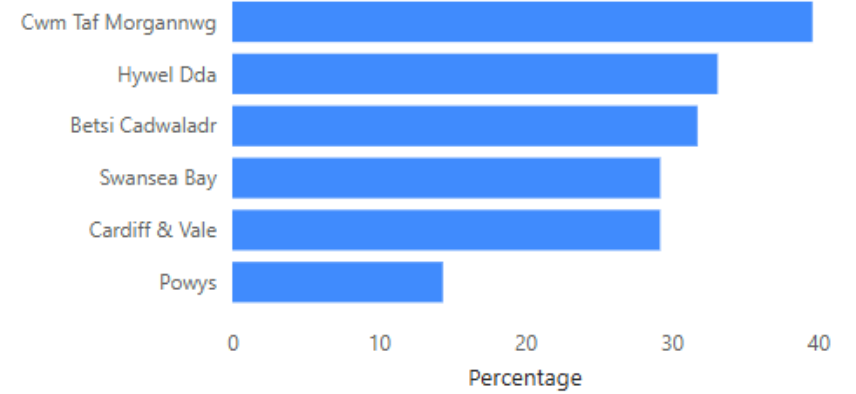
% pregnant women with BMI 30+ at initial assessment

Data source: Maternity indicators dataset (accessed via StatsWales)

Trend: Hywel Dda

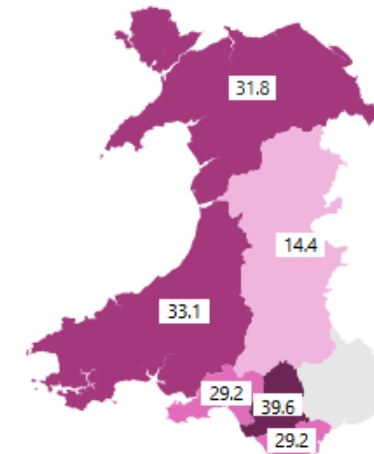


By health board: 2024



Key (%)

- > 34.6 to 39.6
- > 29.6 to 34.6
- > 24.6 to 29.6
- > 19.6 to 24.6
- 14.4 to 19.6
- Wales = 32.1



Risk Factors and Prevention

Screening

Children with Recorded Healthy Child Wales Contacts Wales

Quarter

Jul-Sep 2025

Area

Wales

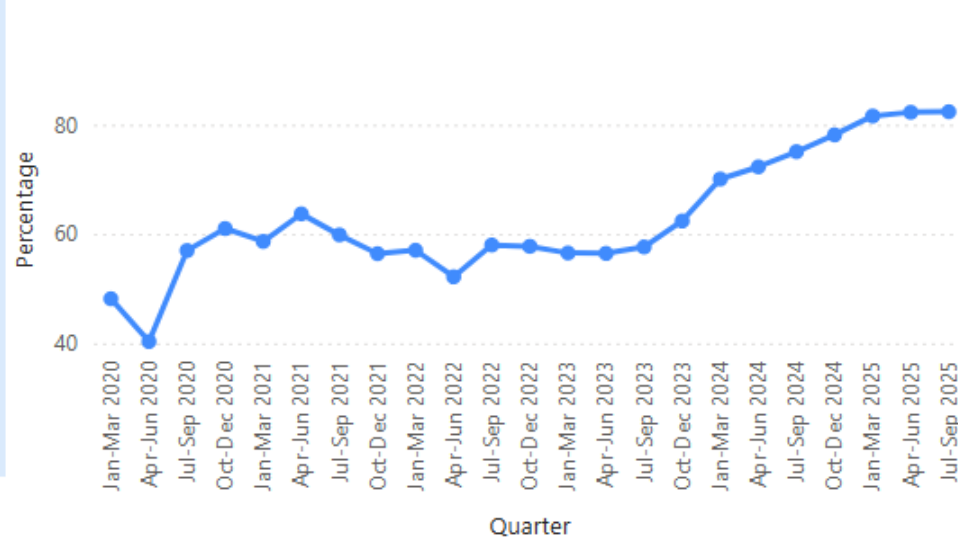
Contact type

Contact at 3.5 years pre-school

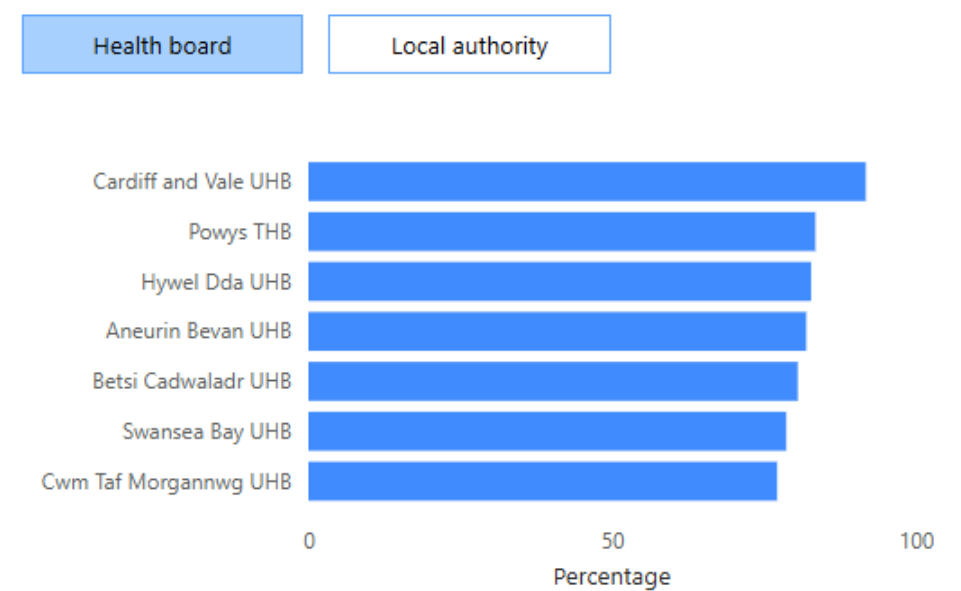
% children with recorded Healthy Child Wales contacts

Data source: National Community Child Health Database (NCCHD), DHCW (accessed via StatsWales)

Trend: Wales, Contact at 3.5 years pre-school



By area: Jul-Sep 2025, Contact at 3.5 years pre-school





Quarter

Jul-Sep 2025

Area

Hywel Dda

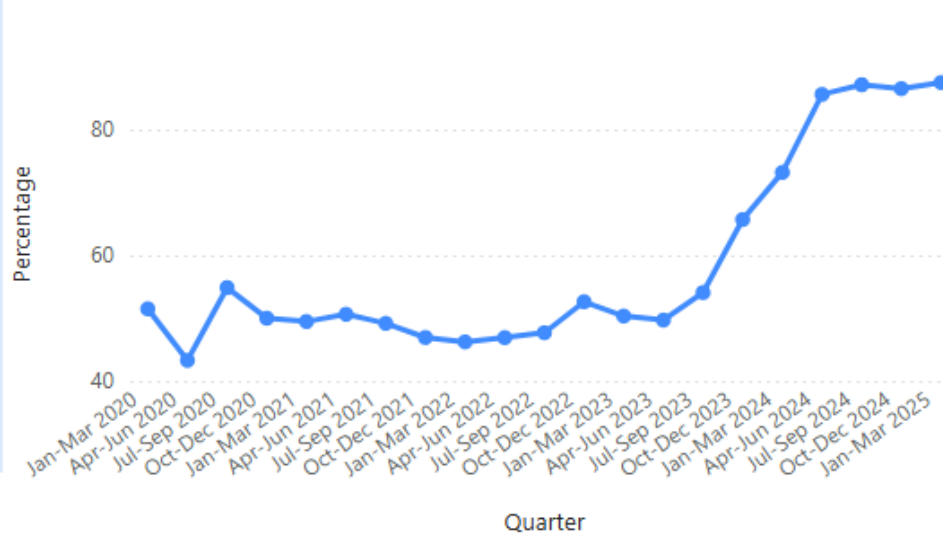
Contact type

Contact at 3.5 years pre-school

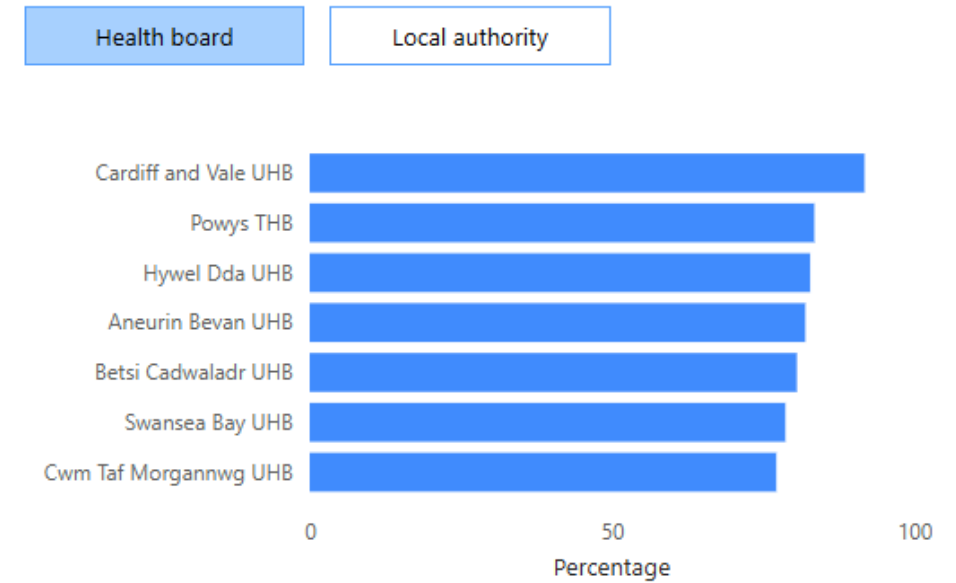
% children with recorded Healthy Child Wales contacts

Data source: National Community Child Health Database (NCCHD), DHCW (accessed via StatsWales)

Trend: Hywel Dda, Contact at 3.5 years pre-school



By area: Jul-Sep 2025, Contact at 3.5 years pre-school



Children with Recorded Healthy Child Wales Contacts Carmarthenshire

Quarter

Jul-Sep 2025

Area

Carmarthenshire

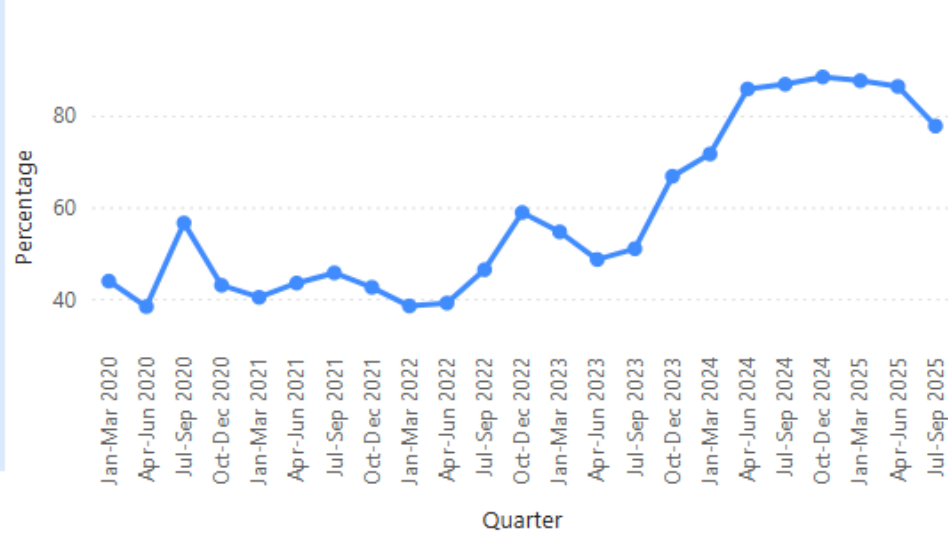
Contact type

Contact at 3.5 years pre-school

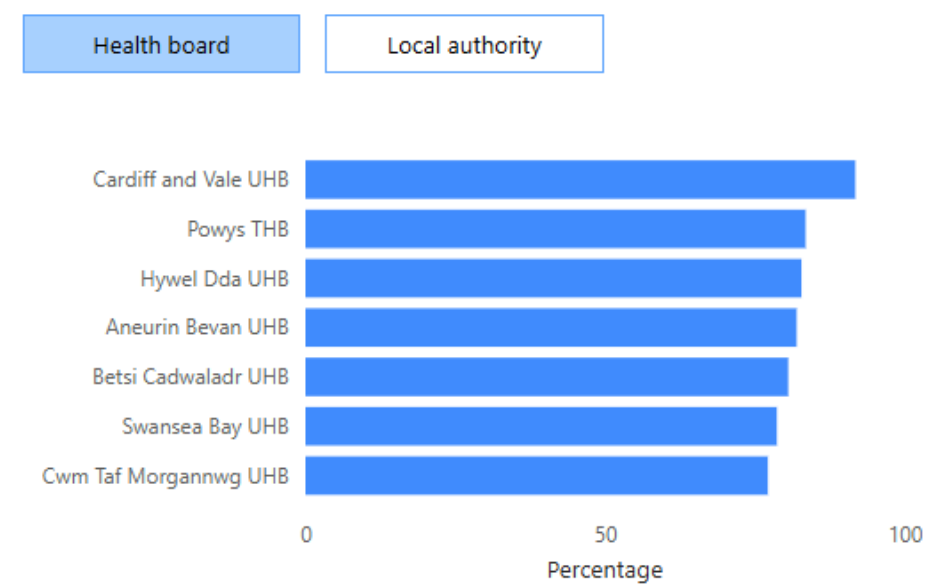
% children with recorded Healthy Child Wales contacts

Data source: National Community Child Health Database (NCCHD), DHCW (accessed via StatsWales)

Trend: Carmarthenshire, Contact at 3.5 years pre-school



By area: Jul-Sep 2025, Contact at 3.5 years pre-school



Children with Recorded Healthy Child Wales Contacts Ceredigion

Quarter

Jul-Sep 2025

Area

Ceredigion

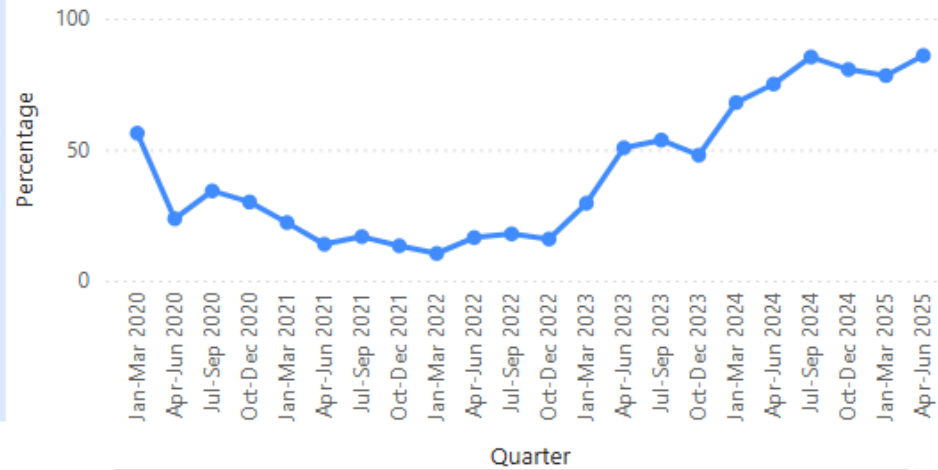
Contact type

Contact at 3.5 years pre-school

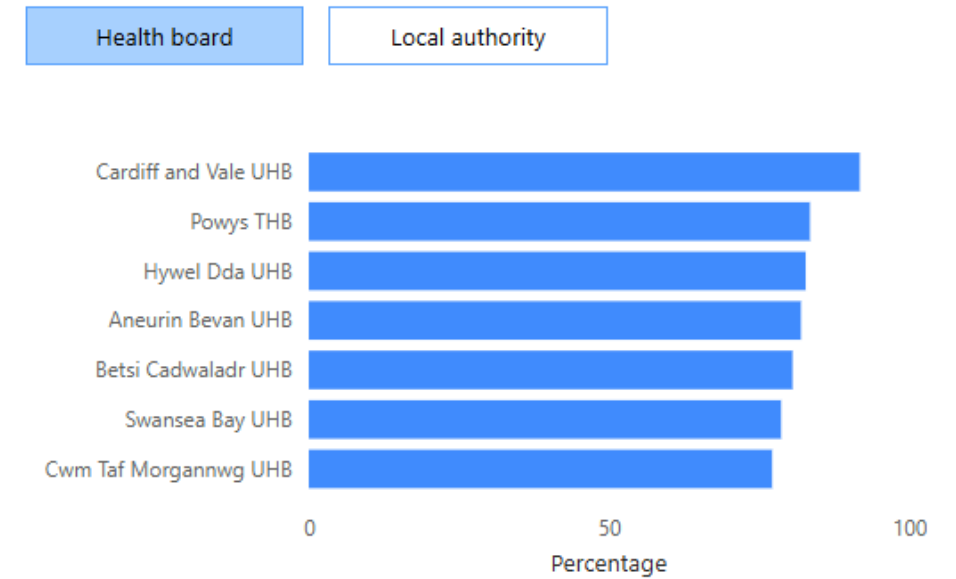
% children with recorded Healthy Child Wales contacts

Data source: National Community Child Health Database (NCCHD), DHCW (accessed via StatsWales)

Trend: Ceredigion, Contact at 3.5 years pre-school



By area: Jul-Sep 2025, Contact at 3.5 years pre-school



Children with Recorded Healthy Child Wales Contacts Pembrokeshire

Quarter

Jul-Sep 2025

Area

Pembrokeshire

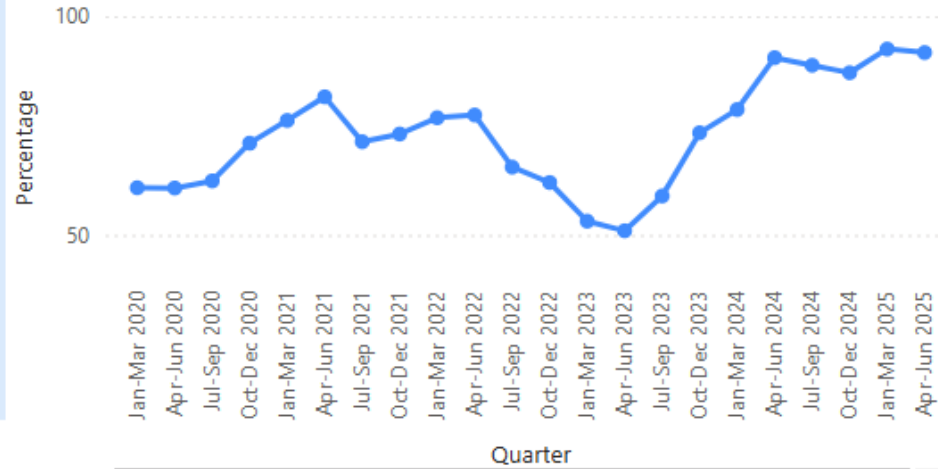
Contact type

Contact at 3.5 years pre-school

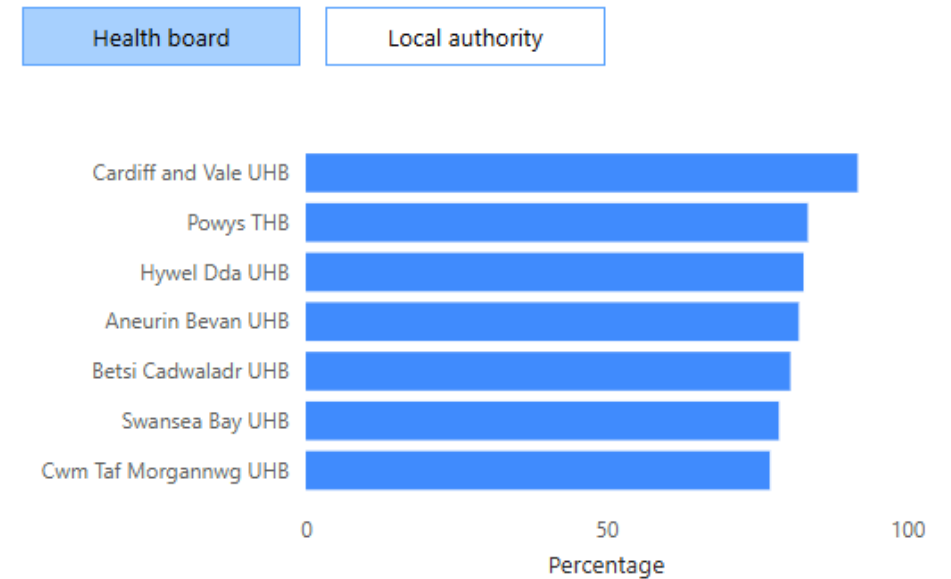
% children with recorded Healthy Child Wales contacts

Data source: National Community Child Health Database (NCCHD), DHCW (accessed via StatsWales)

Trend: Pembrokeshire, Contact at 3.5 years pre-school



By area: Jul-Sep 2025, Contact at 3.5 years pre-school



Risk Factors and Prevention

Smoking

Residents CO Validated as Successfully Quitting at 4 Weeks Post Quit Date Wales

Quarter

Oct-Dec 2025

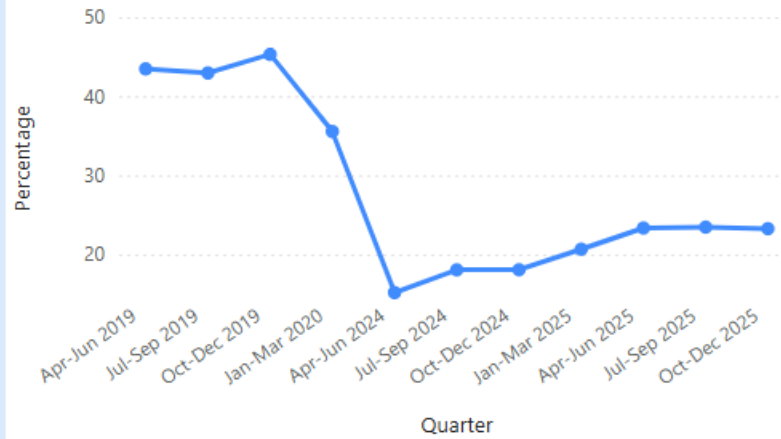
Health board

Wales

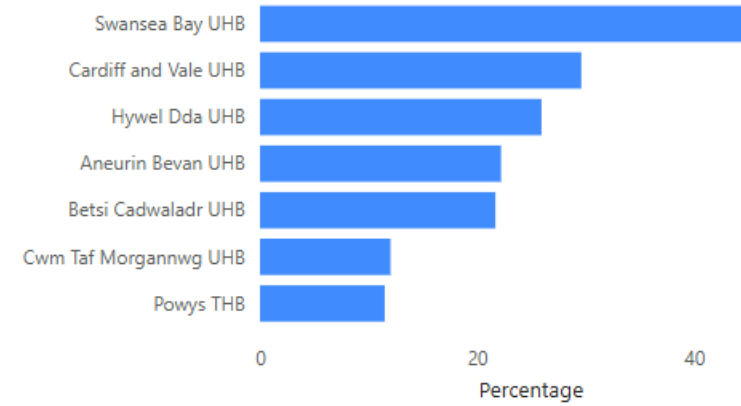
% residents CO-validated as successfully quitting at 4 weeks post quit date

Data source: Smoking Cessation Services Data Collection, Welsh Government (accessed via StatsWales)

Trend: Wales

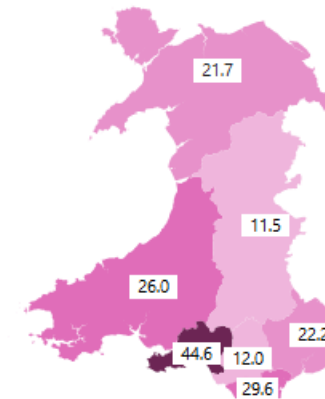


By health board: Oct-Dec 2025



Key (%)

- > 38 to 44.6
 - > 31.4 to 38
 - > 24.8 to 31.4
 - > 18.2 to 24.8
 - 11.5 to 18.2
- Wales = 23.3



Residents CO Validated as Successfully Quitting at 4 Weeks Post Quit Date Hywel Dda University Health Board

Quarter

Oct-Dec 2025

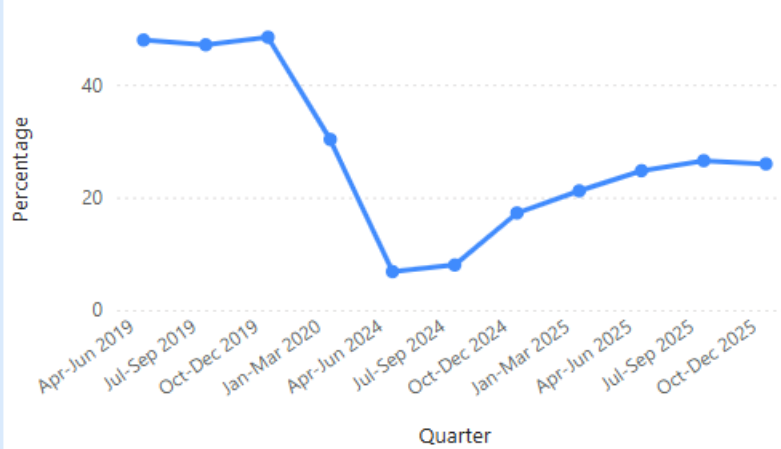
Health board

Hywel Dda UHB

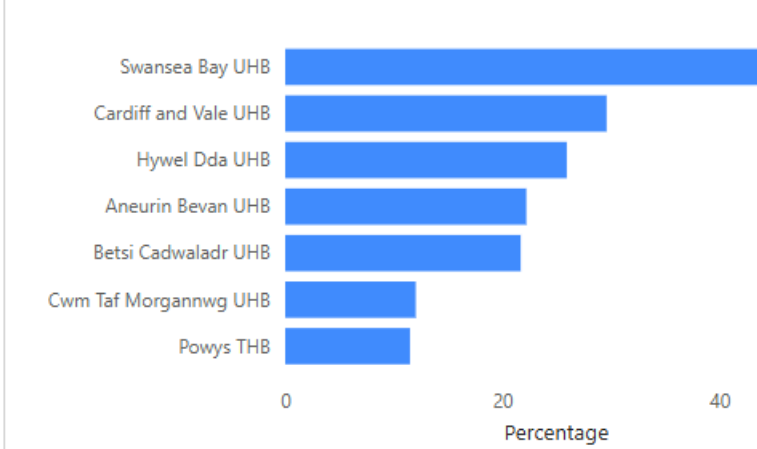
% residents CO-validated as successfully quitting at 4 weeks post quit date

Data source: Smoking Cessation Services Data Collection, Welsh Government (accessed via StatsWales)

Trend: Hywel Dda UHB



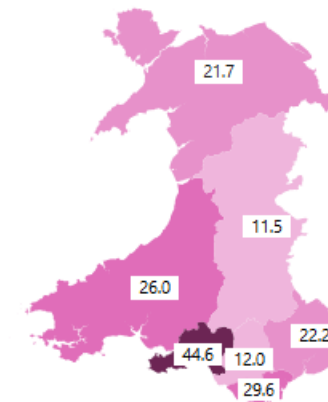
By health board: Oct-Dec 2025



Key (%)

- > 38 to 44.6
- > 31.4 to 38
- > 24.8 to 31.4
- > 18.2 to 24.8
- 11.5 to 18.2

Wales = 23.3



Health and Wellbeing

Cancer

Cancer Admissions and Mortality Wales

Year
2024/25

Area
Wales

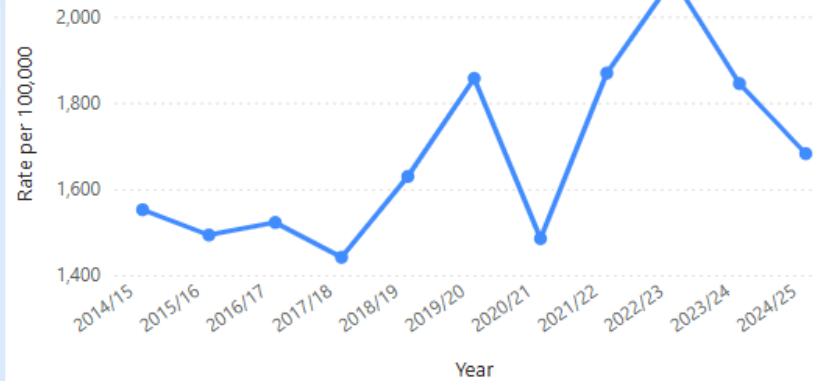
Sex
Persons

Cancer site
All

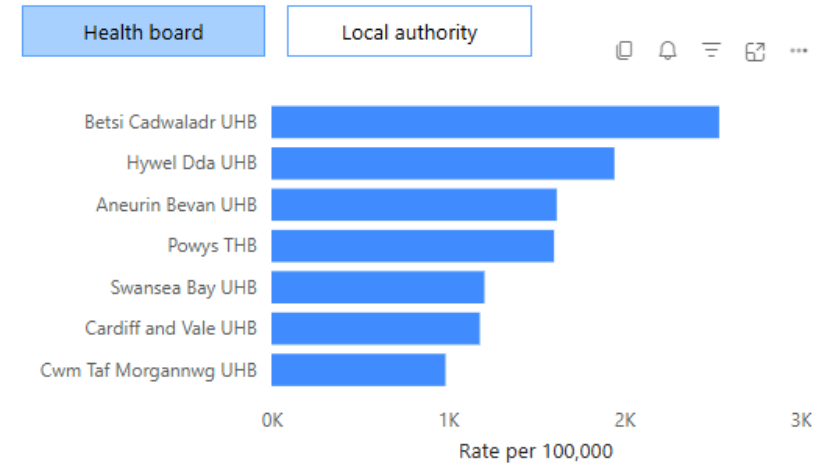
Cancer related hospital admission rates per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Wales, Persons, All



By area: 2024/25, Persons, All



Year
2024

Area
Wales

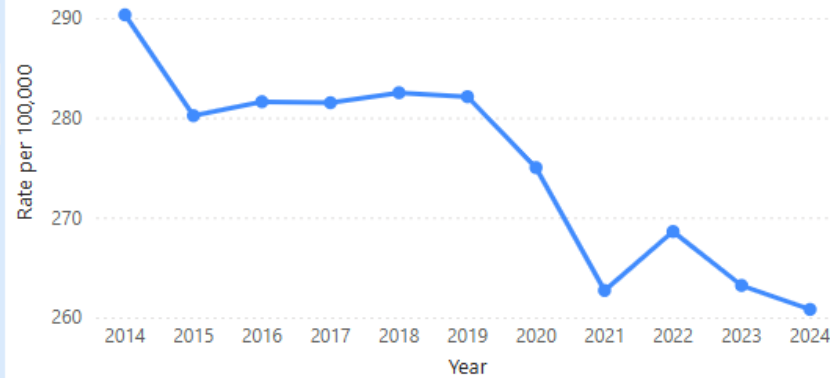
Sex
Persons

Cancer site
All

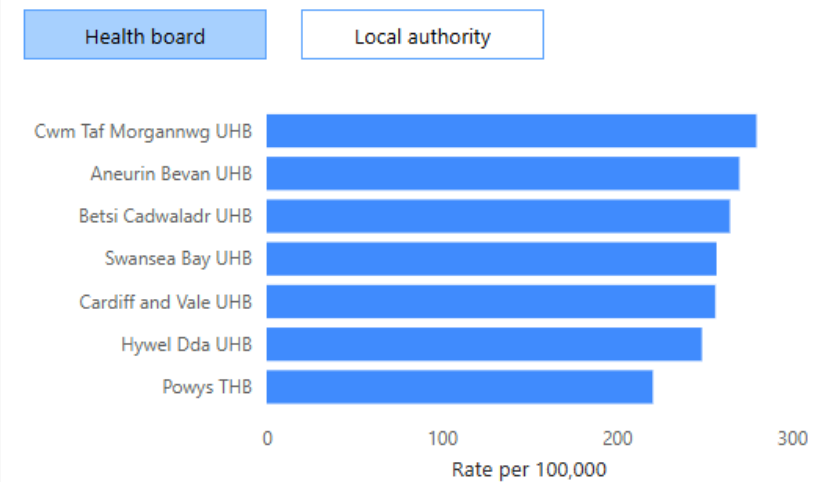
Cancer mortality rates per 100,000 population

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Wales, Persons, All



By area: 2024, Persons, All



Cancer Admissions and Mortality Hywel Dda University Health Board

Year
2024/25

Area
Hywel Dda Universi...

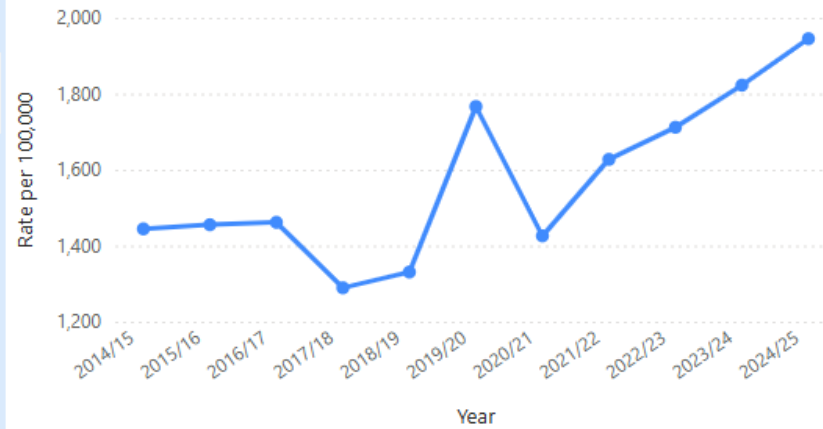
Sex
Persons

Cancer site
All

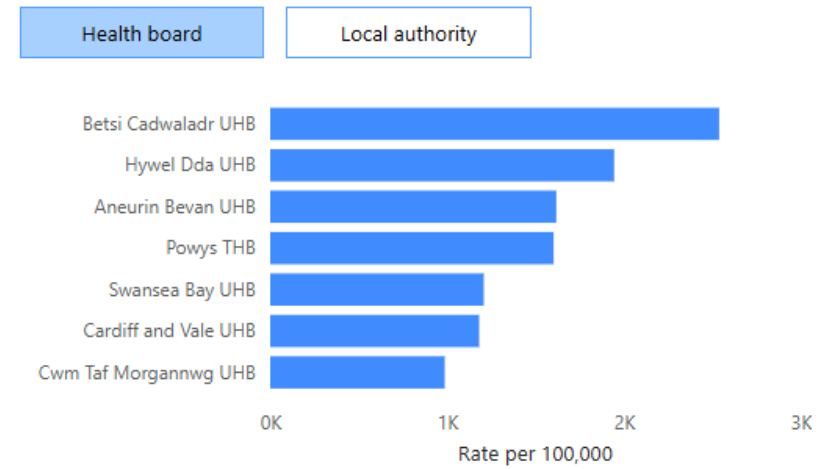
Cancer related hospital admission rates per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda University Health Board, Persons, All



By area: 2024/25, Persons, All



Year
2024

Area
Hywel Dda Universi...

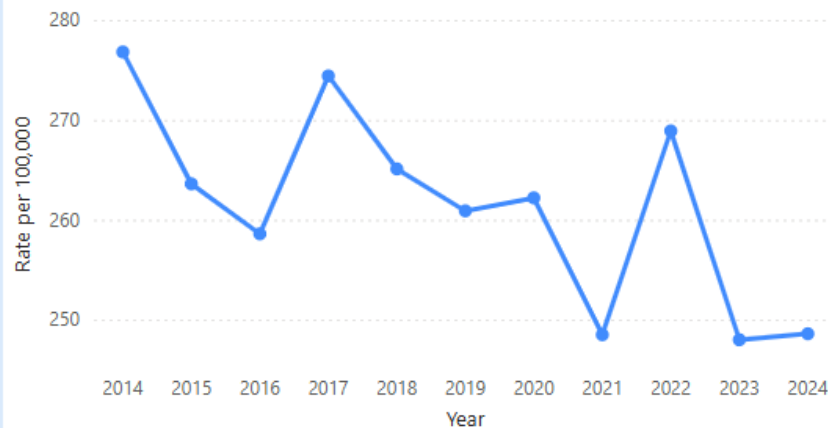
Sex
Persons

Cancer site
All

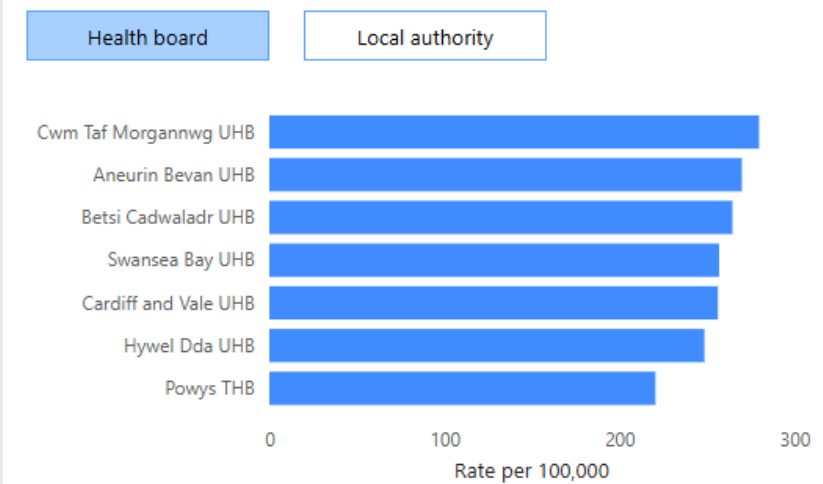
Cancer mortality rates per 100,000 population

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda University Health Board, Persons, All



By area: 2024, Persons, All



Cancer Admissions and Mortality Carmarthenshire

Year
2024/25

Area
Carmarthenshire

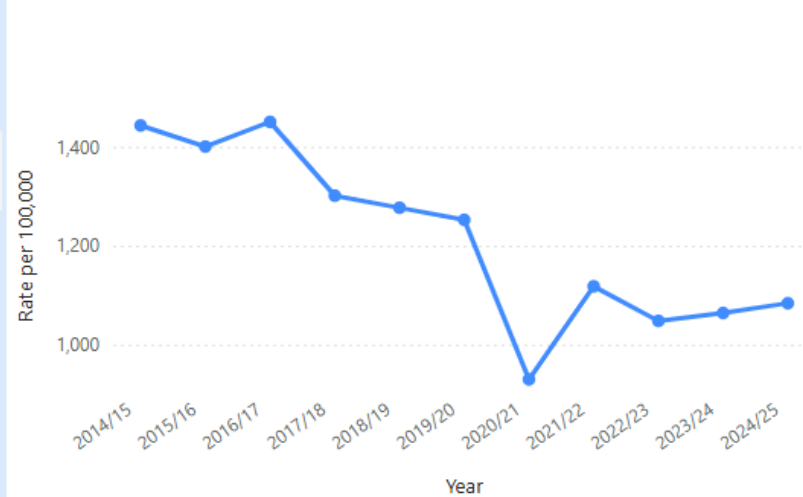
Sex
Persons

Cancer site
All

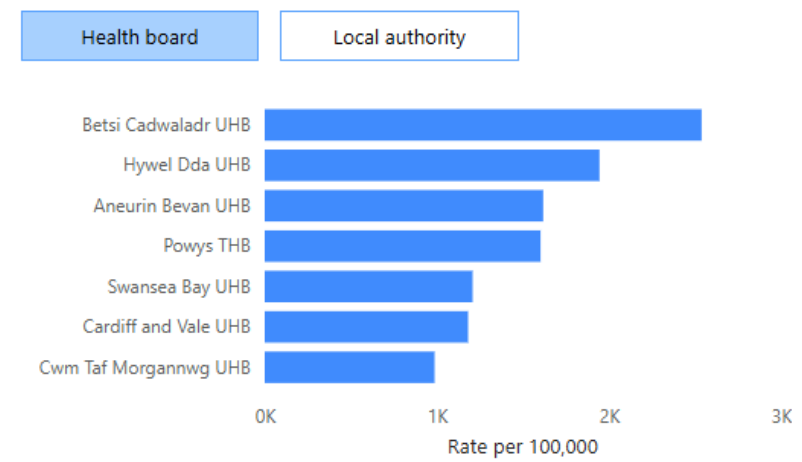
Cancer related hospital admission rates per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Carmarthenshire, Persons, All



By area: 2024/25, Persons, All



Year
2024

Area
Carmarthenshire

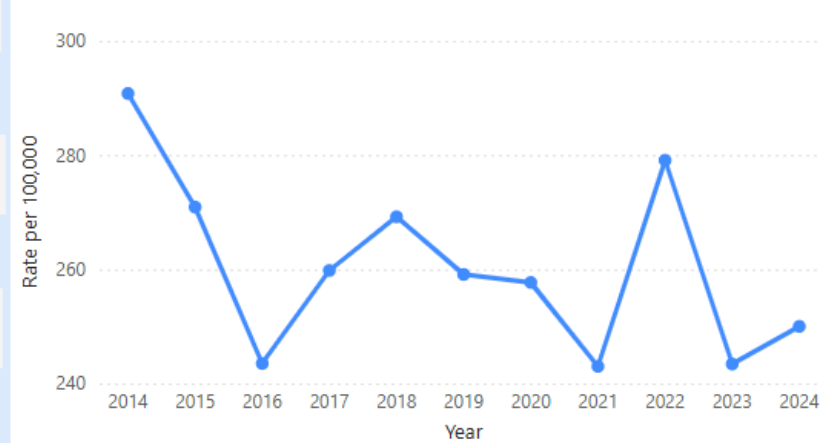
Sex
Persons

Cancer site
All

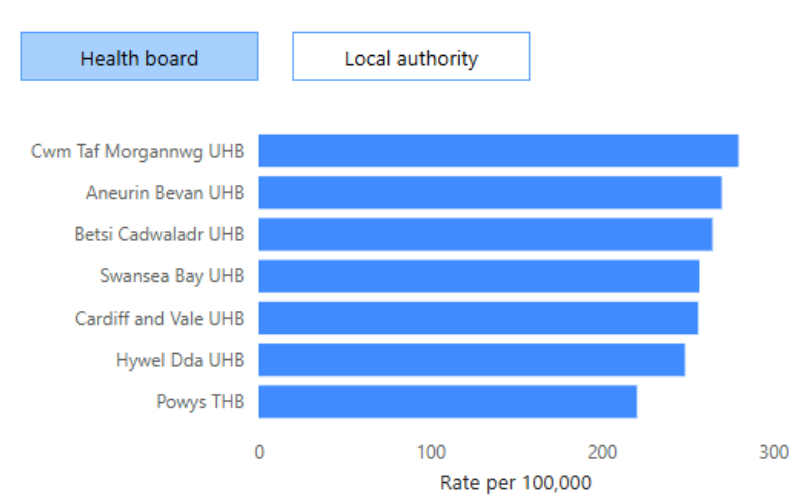
Cancer mortality rates per 100,000 population

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Carmarthenshire, Persons, All



By area: 2024, Persons, All



Cancer Admissions and Mortality Ceredigion

Year
2024/25

Area
Ceredigion

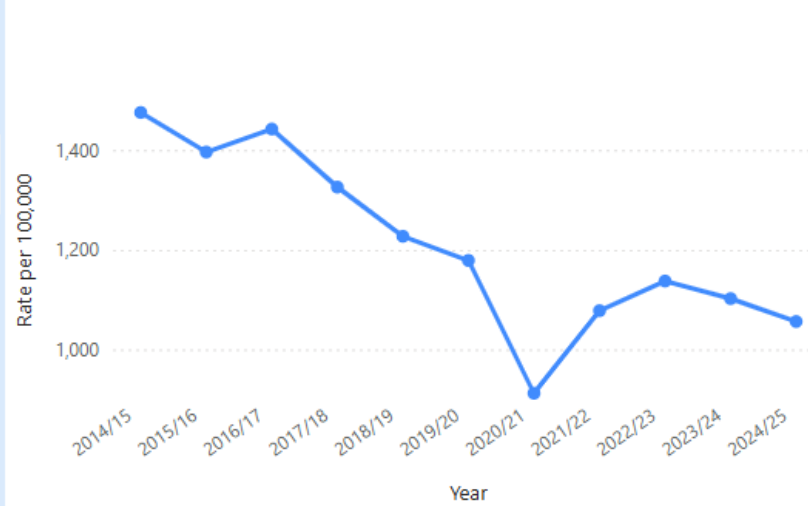
Sex
Persons

Cancer site
All

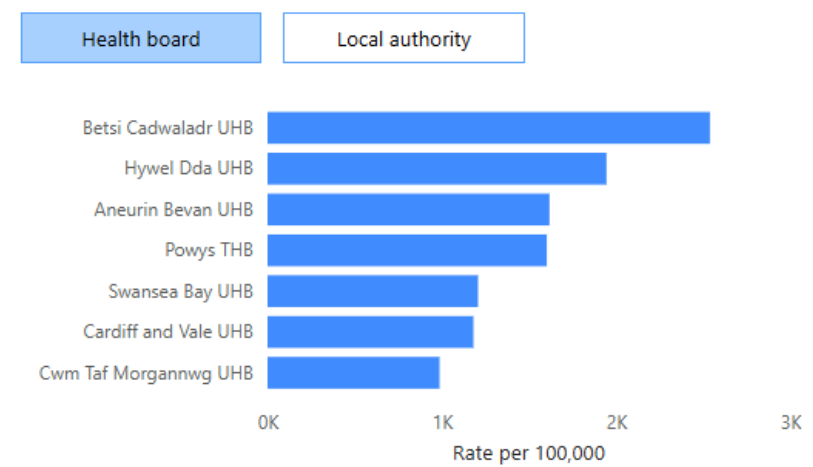
Cancer related hospital admission rates per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Ceredigion, Persons, All



By area: 2024/25, Persons, All



Year
2024

Area
Ceredigion

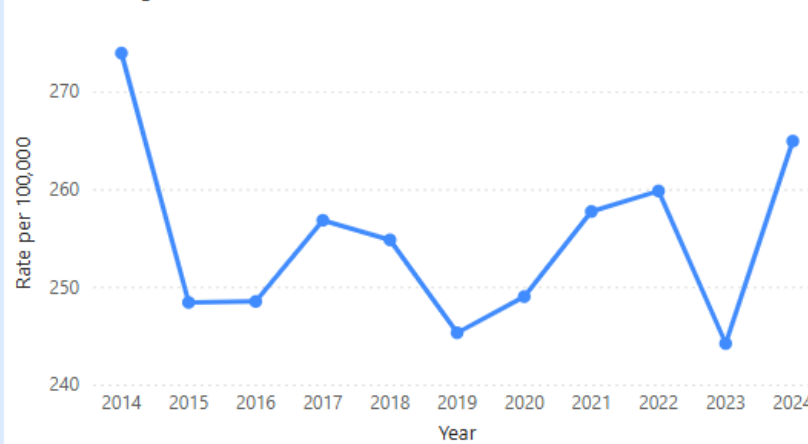
Sex
Persons

Cancer site
All

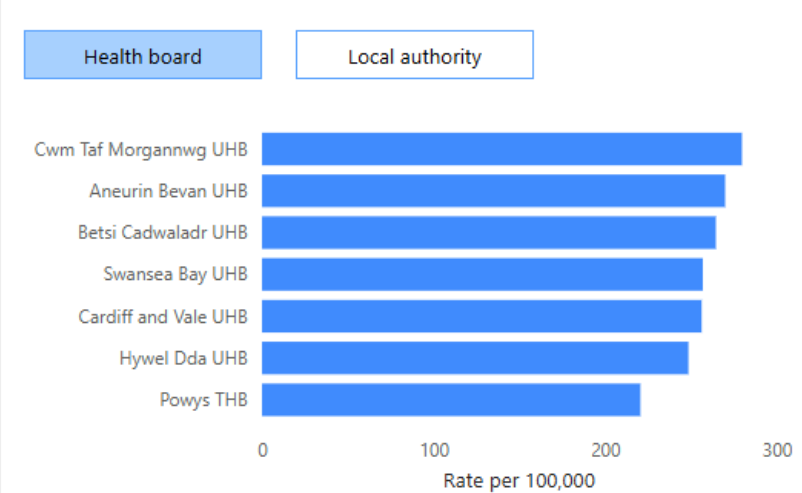
Cancer mortality rates per 100,000 population

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Ceredigion, Persons, All



By area: 2024, Persons, All



Cancer Admissions and Mortality Pembrokeshire

Year

2024/25

Area

Pembrokeshire

Sex

Persons

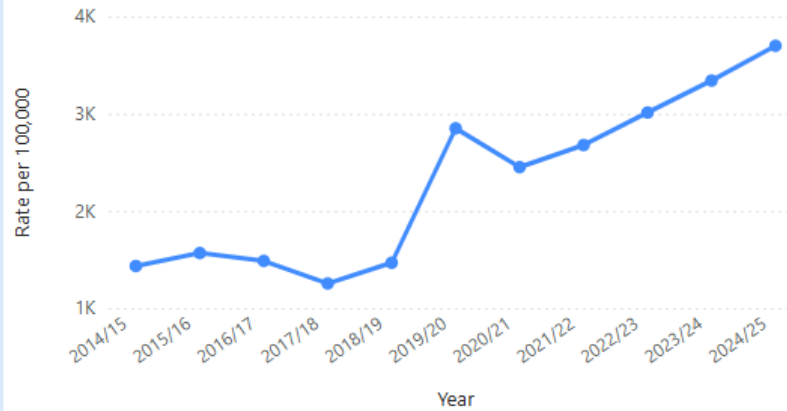
Cancer site

All

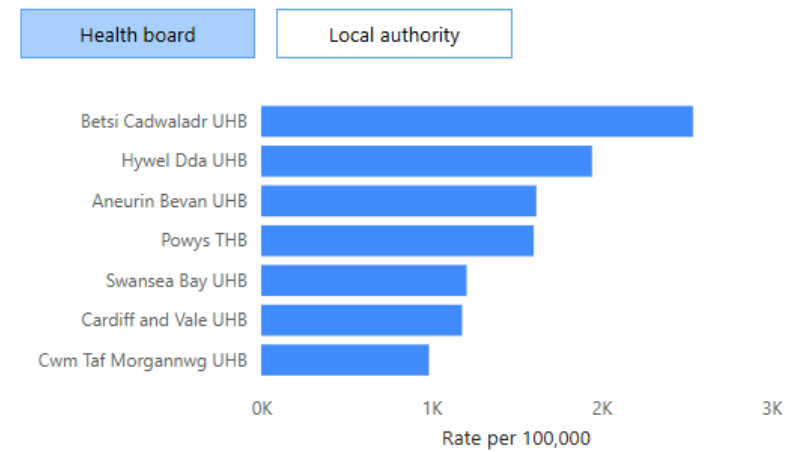
Cancer related hospital admission rates per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Pembrokeshire, Persons, All



By area: 2024/25, Persons, All



Year

2024

Area

Pembrokeshire

Sex

Persons

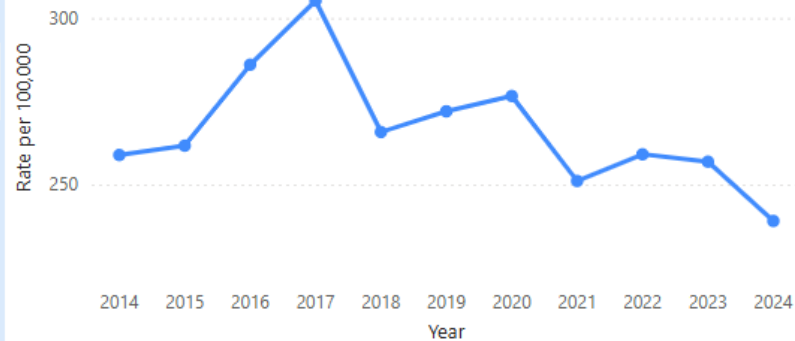
Cancer site

All

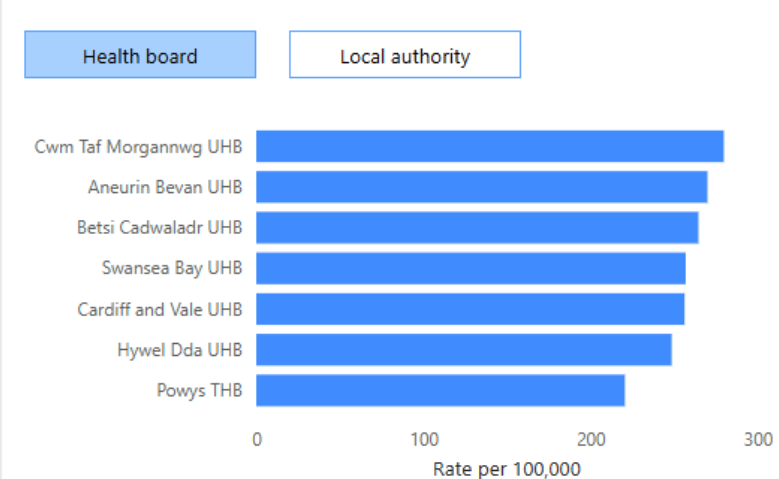
Cancer mortality rates per 100,000 population

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Pembrokeshire, Persons, All



By area: 2024, Persons, All



Health and Wellbeing

Diabetes

Diabetes Mortality Rates Wales

Year

2022 - 24

Health board

Wales

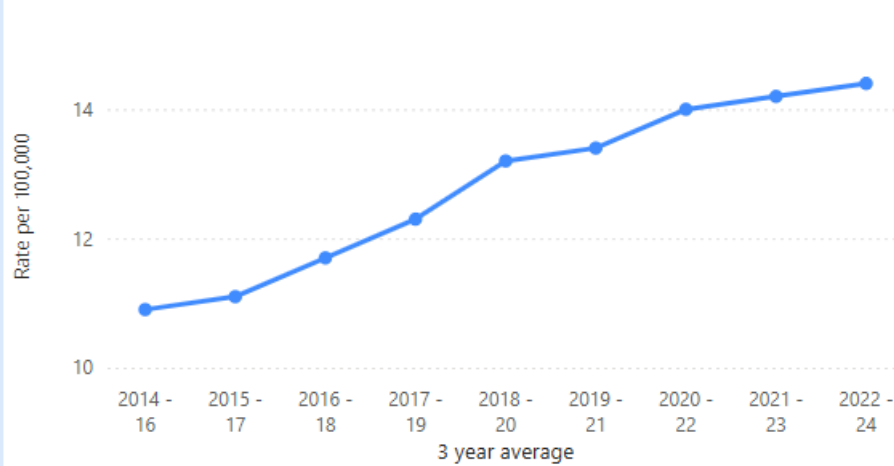
Sex

Persons

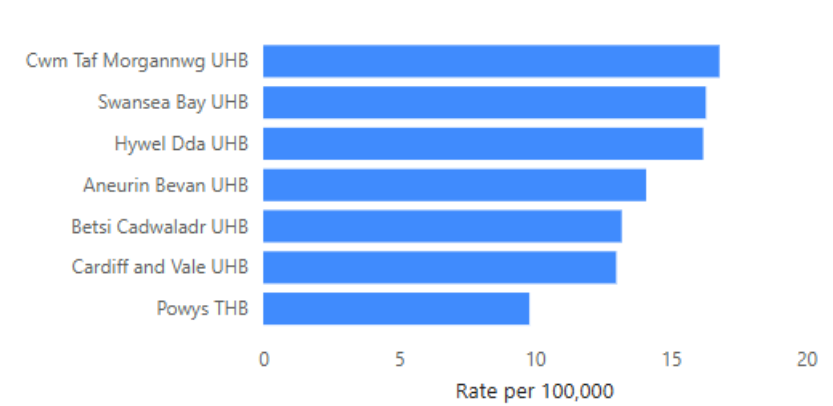
Diabetes mortality rates per 100,000 population (3 year average)

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Wales, Persons



By health board: 2022 - 24, Persons

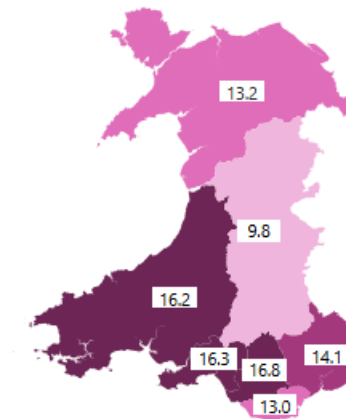


Health board map: 2022 - 24, Persons

Key (Rate per 100,000)

- > 15.4 to 16.8
- > 14 to 15.4
- > 12.6 to 14
- > 11.2 to 12.6
- 9.8 to 11.2

Wales = 14.4



Diabetes Mortality Rates Hywel Dda University Health Board

Year

2022 - 24

Health board

Hywel Dda UHB

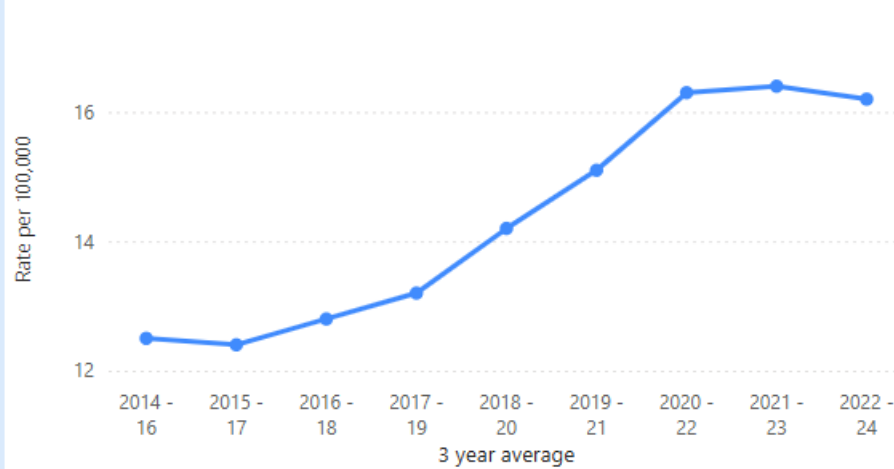
Sex

Persons

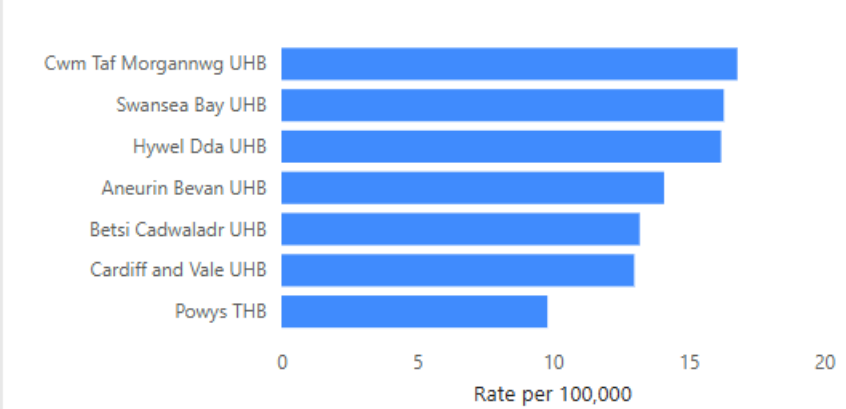
Diabetes mortality rates per 100,000 population (3 year average)

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda UHB, Persons



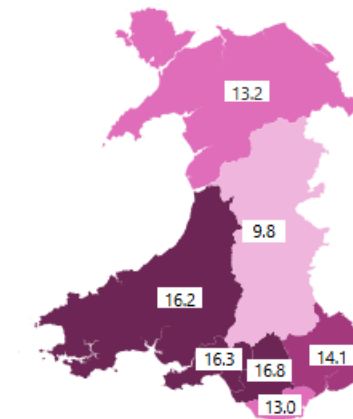
By health board: 2022 - 24, Persons



Health board map: 2022 - 24, Persons

Key (Rate per 100,000)

- > 15.4 to 16.8
 - > 14 to 15.4
 - > 12.6 to 14
 - > 11.2 to 12.6
 - 9.8 to 11.2
- Wales = 14.4



Diabetes Mortality Rates Hywel Dda University Health Board

Year

2022 - 24

Health board

Hywel Dda UHB

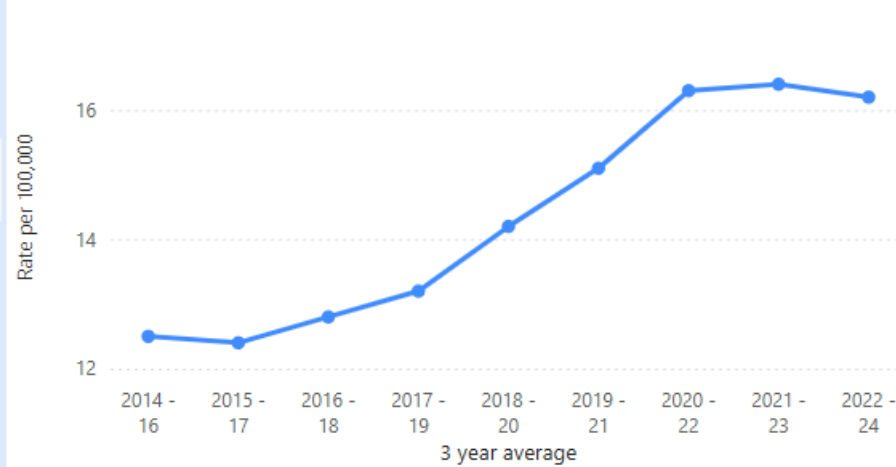
Sex

Persons

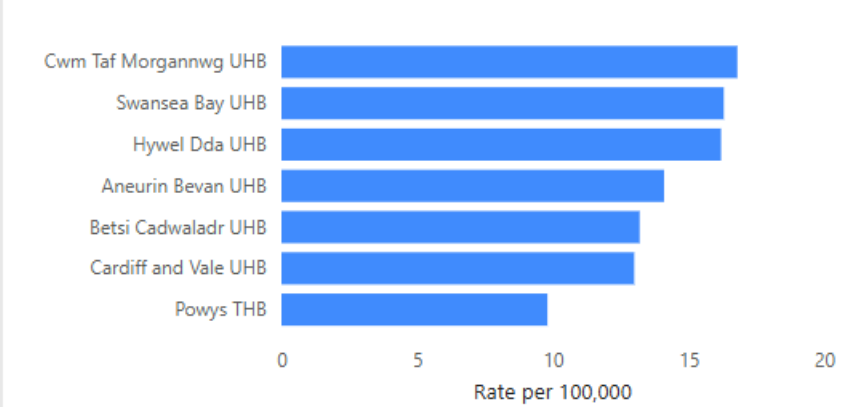
Diabetes mortality rates per 100,000 population (3 year average)

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda UHB, Persons



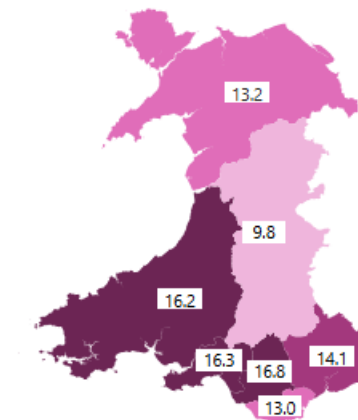
By health board: 2022 - 24, Persons



Health board map: 2022 - 24, Persons

Key (Rate per 100,000)

- > 15.4 to 16.8
 - > 14 to 15.4
 - > 12.6 to 14
 - > 11.2 to 12.6
 - 9.8 to 11.2
- Wales = 14.4



Health and Wellbeing

General Health and Wellbeing

Period

2022-23

Area

Wales

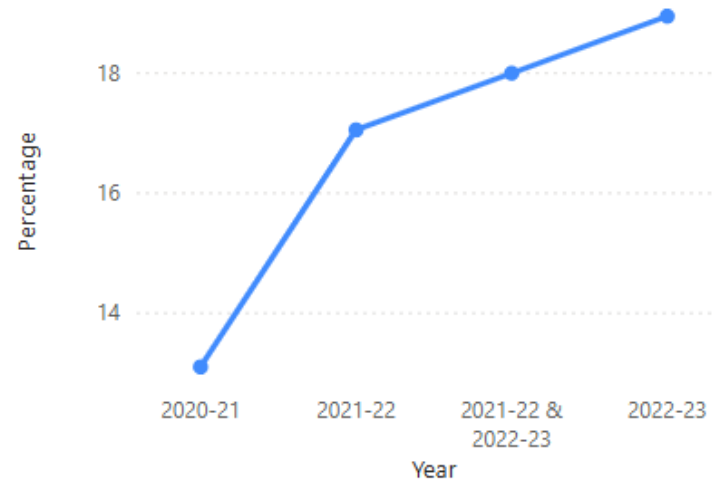
Indicator

Limited a lot by longstanding illness

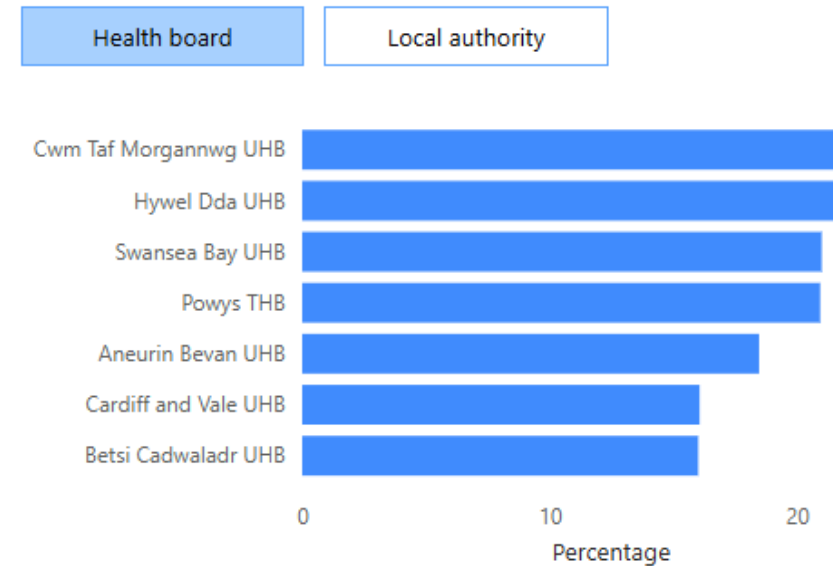
Adult general health and illnesses: Limited a lot by longstanding illness

Data source: National Survey for Wales, Welsh Government (accessed via StatsWales)

Trend: Wales, Limited a lot by longstanding illness



By area: 2022-23, Limited a lot by longstanding illness



Period

2022-23

Area

Hywel Dda University Health Board

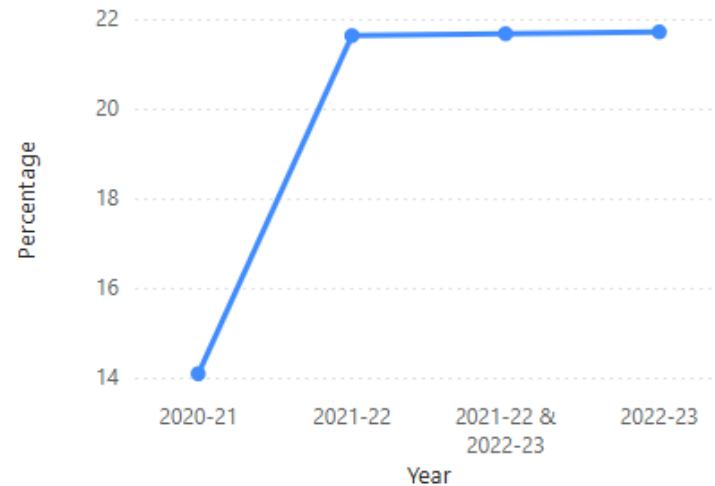
Indicator

Limited a lot by longstanding illness

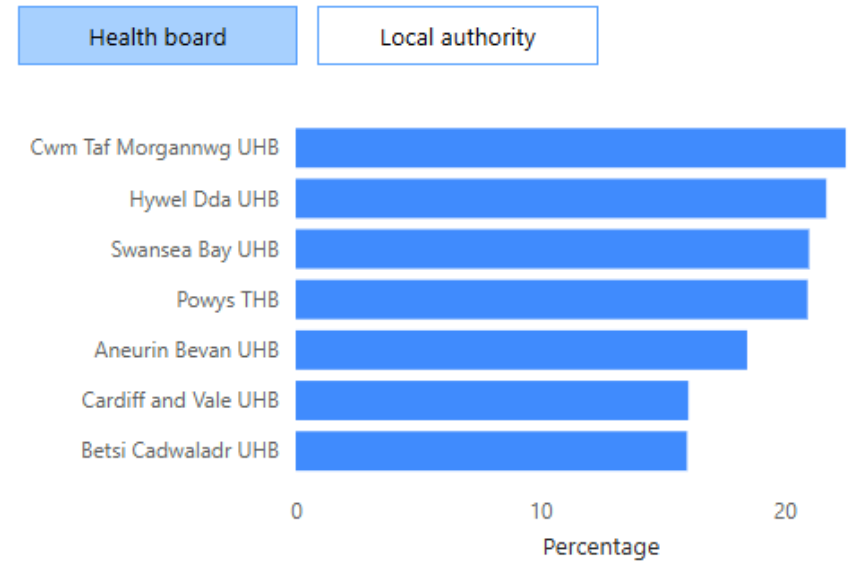
Adult general health and illnesses: Limited a lot by longstanding illness

Data source: National Survey for Wales, Welsh Government (accessed via StatsWales)

Trend: Hywel Dda University Health Board, Limited a lot by longstanding illness



By area: 2022-23, Limited a lot by longstanding illness



Period

2022-23

Area

Carmarthenshire

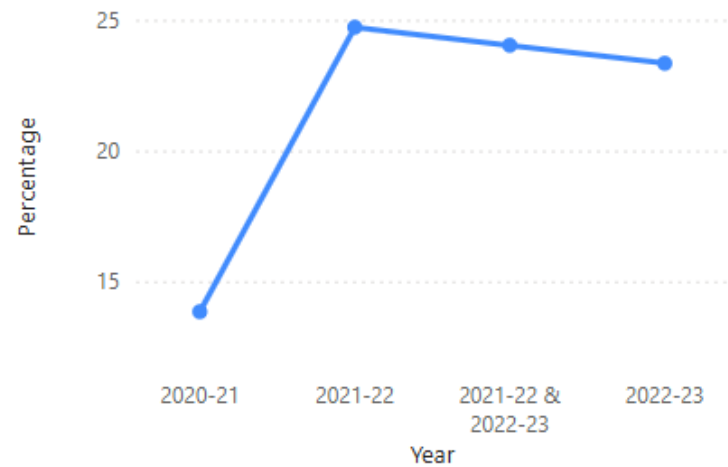
Indicator

Limited a lot by longstanding illness

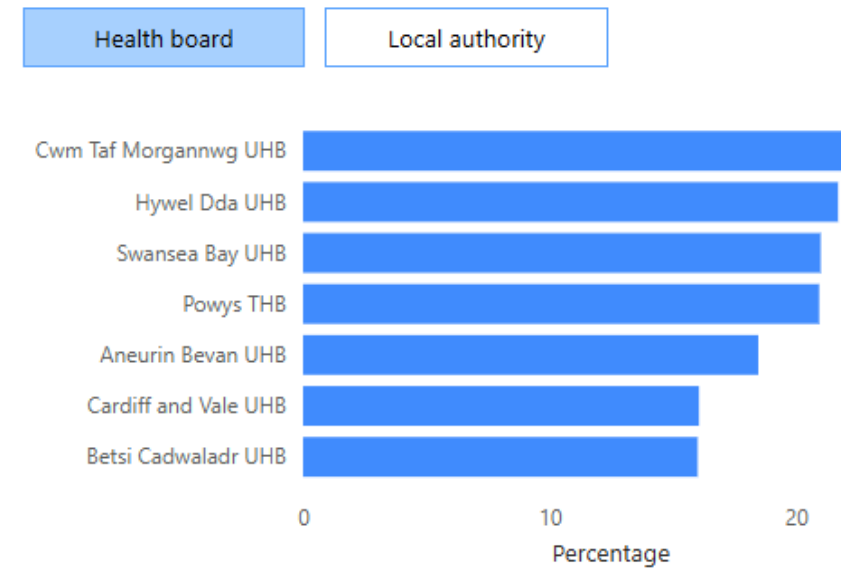
Adult general health and illnesses: Limited a lot by longstanding illness

Data source: National Survey for Wales, Welsh Government (accessed via StatsWales)

Trend: Carmarthenshire, Limited a lot by longstanding illness



By area: 2022-23, Limited a lot by longstanding illness



Period

2022-23

Area

Ceredigion

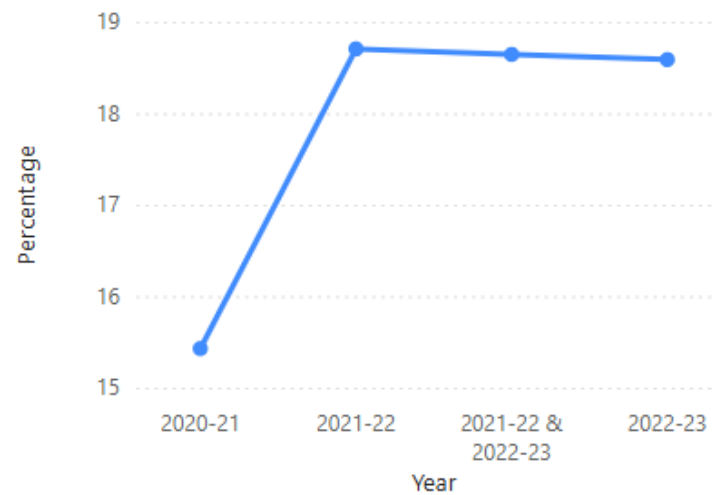
Indicator

Limited a lot by longstanding illness

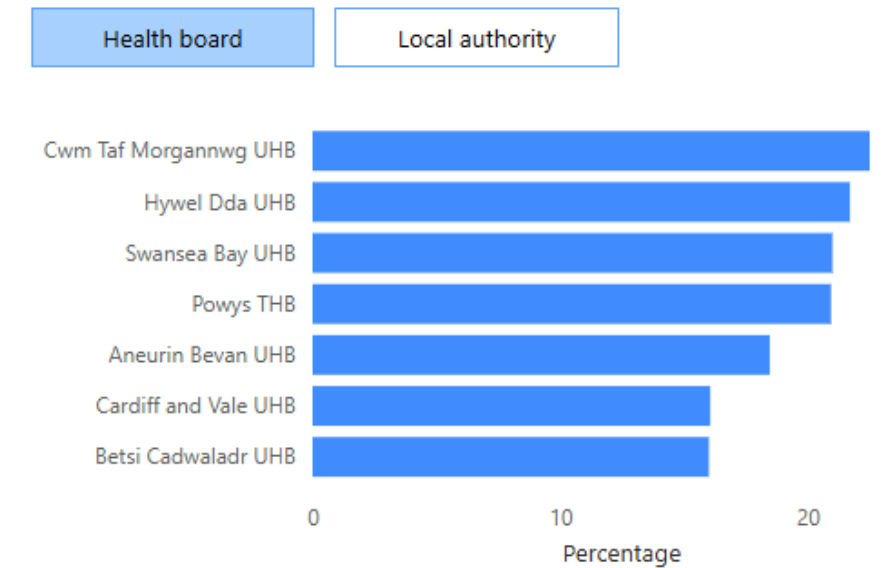
Adult general health and illnesses: Limited a lot by longstanding illness

Data source: National Survey for Wales, Welsh Government (accessed via StatsWales)

Trend: Ceredigion, Limited a lot by longstanding illness



By area: 2022-23, Limited a lot by longstanding illness



Period

2022-23

Area

Pembrokeshire

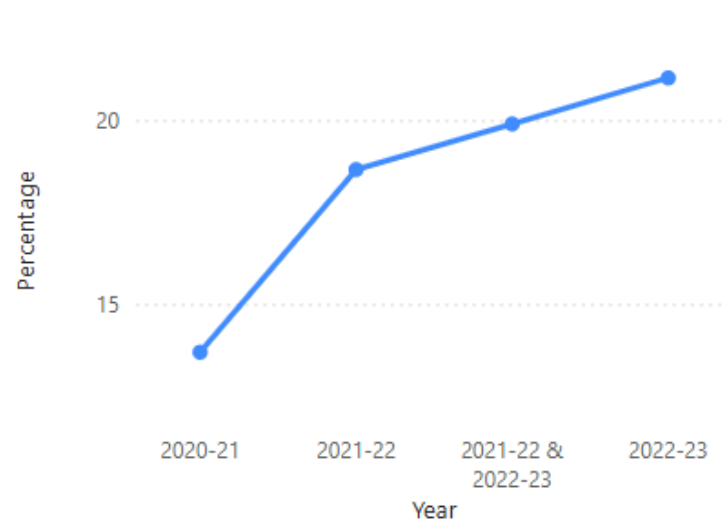
Indicator

Limited a lot by longstanding illness

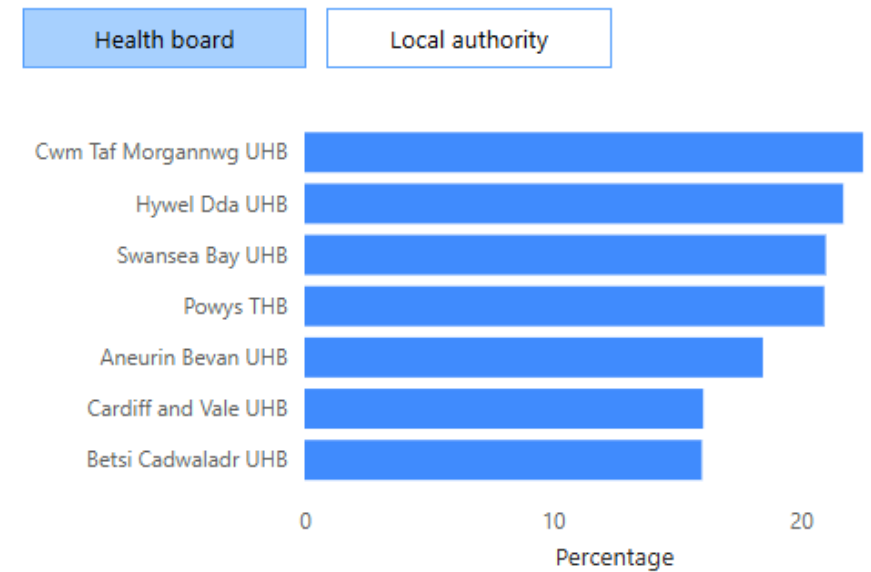
Adult general health and illnesses: Limited a lot by longstanding illness

Data source: National Survey for Wales, Welsh Government (accessed via StatsWales)

Trend: Pembrokeshire, Limited a lot by longstanding illness



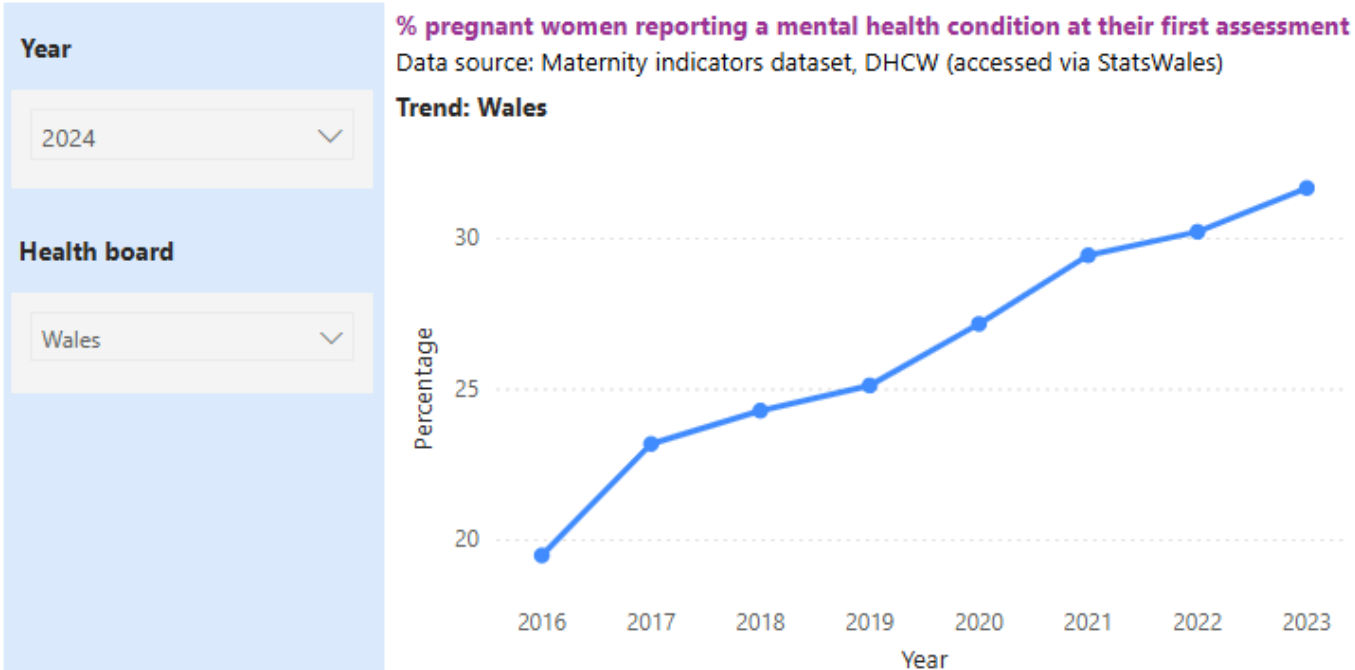
By area: 2022-23, Limited a lot by longstanding illness



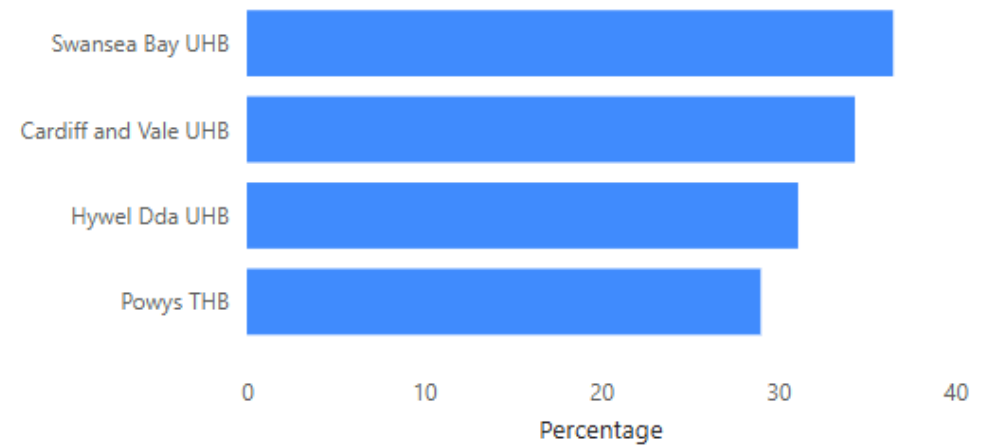
Health and Wellbeing

Mental Health

Pregnant Women Reporting a Mental Health Condition Wales



By health board: 2024



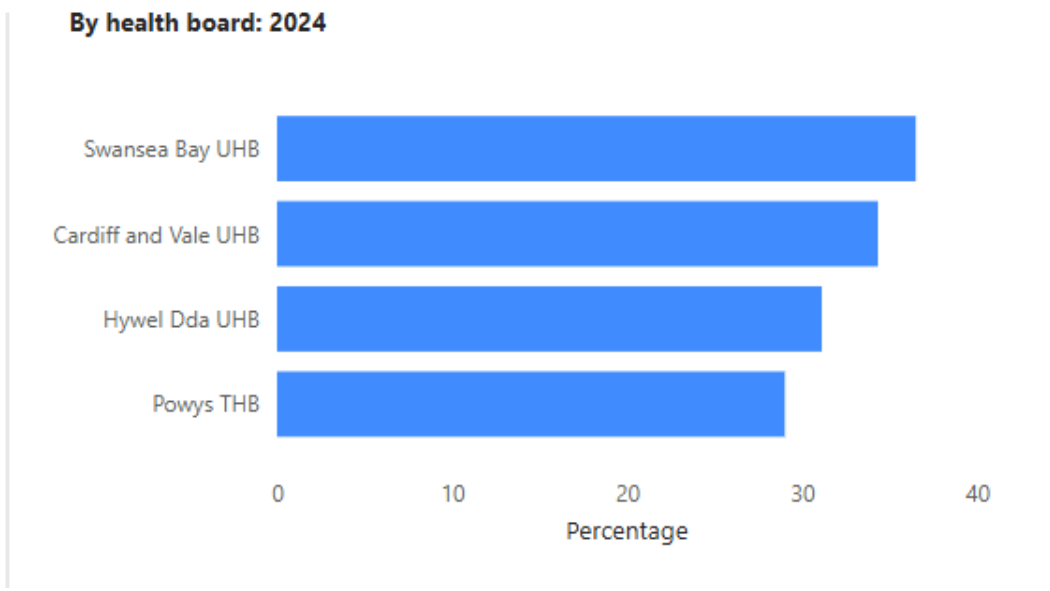
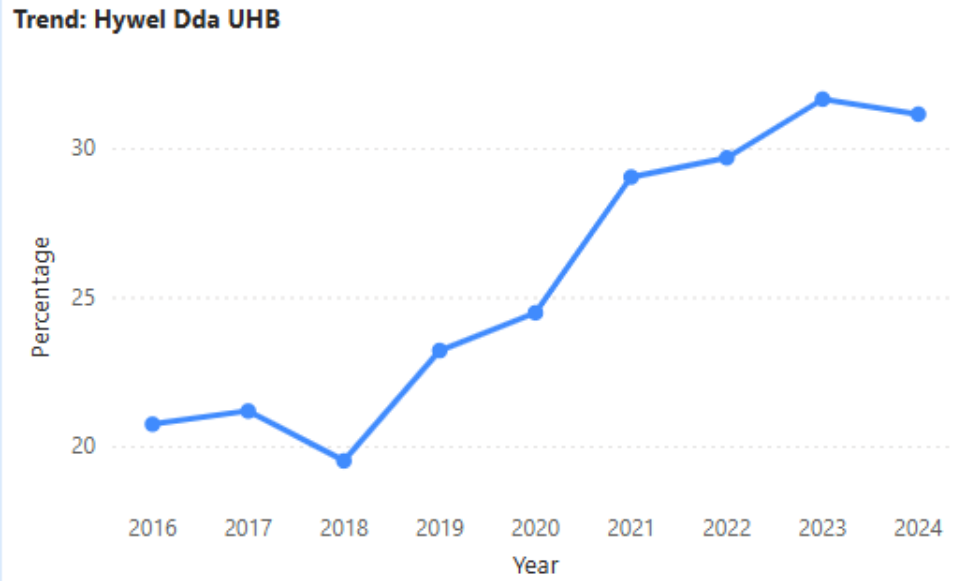
Year

2024

Health board

Hywel Dda UHB

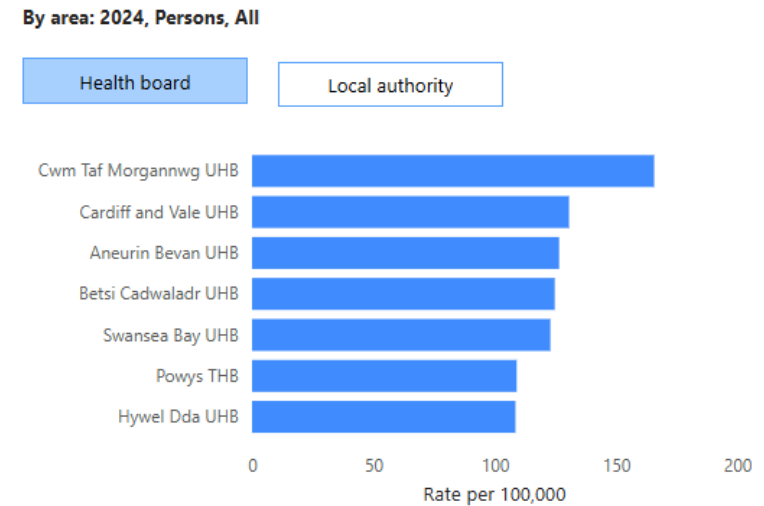
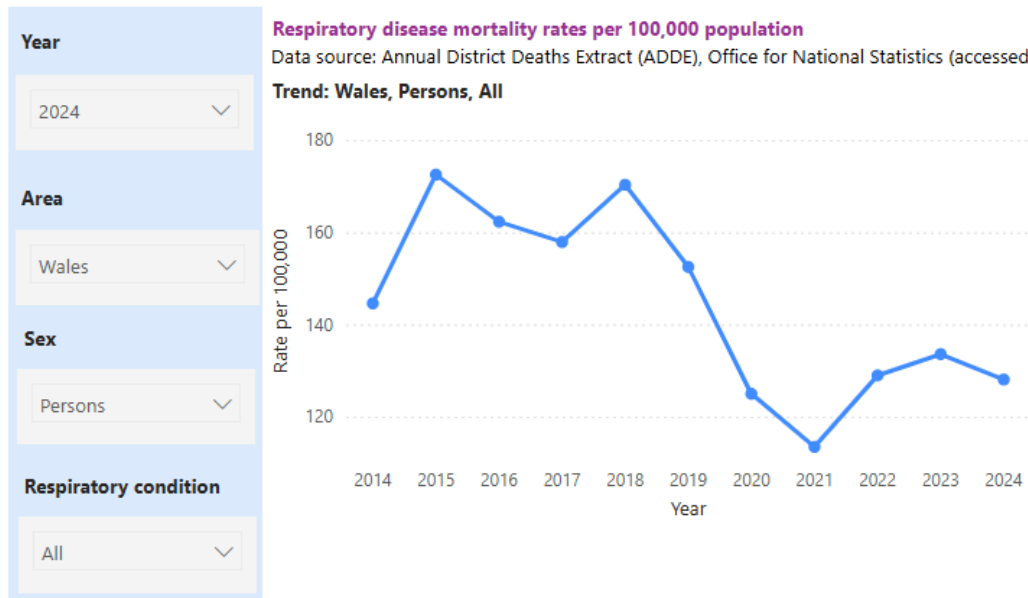
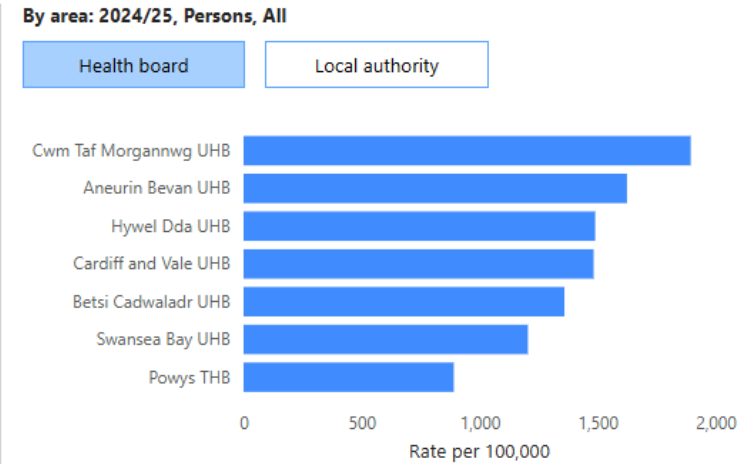
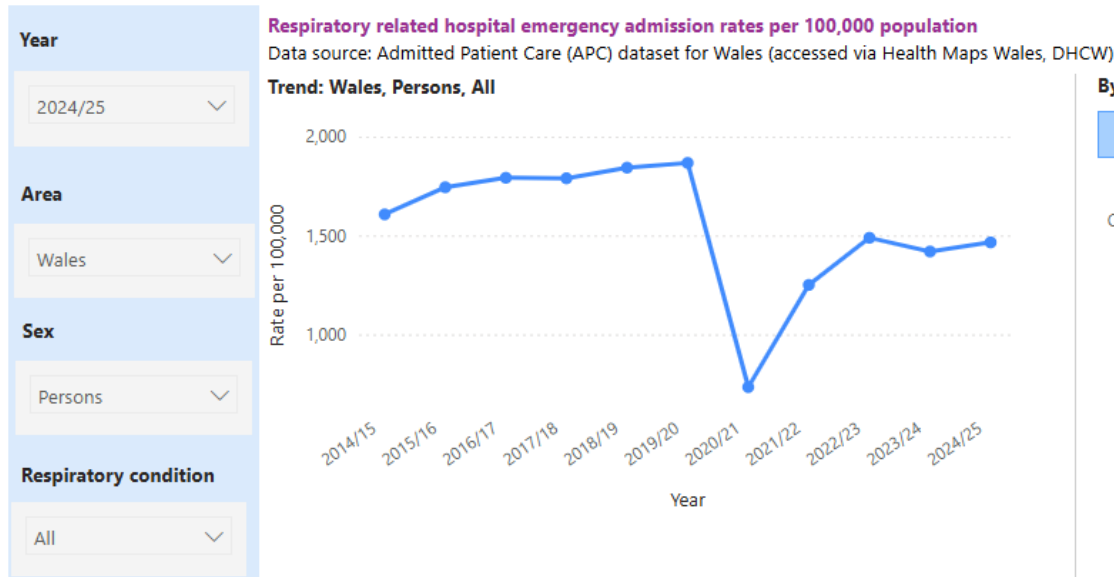
% pregnant women reporting a mental health condition at their first assessment
Data source: Maternity indicators dataset, DHCW (accessed via StatsWales)



Health and Wellbeing

Respiratory Disease

Respiratory Disease Admission and Mortality Wales



Respiratory Disease Admission and Mortality Hywel Dda University Health Board

Year

2024/25

Area

Hywel Dda Universi...

Sex

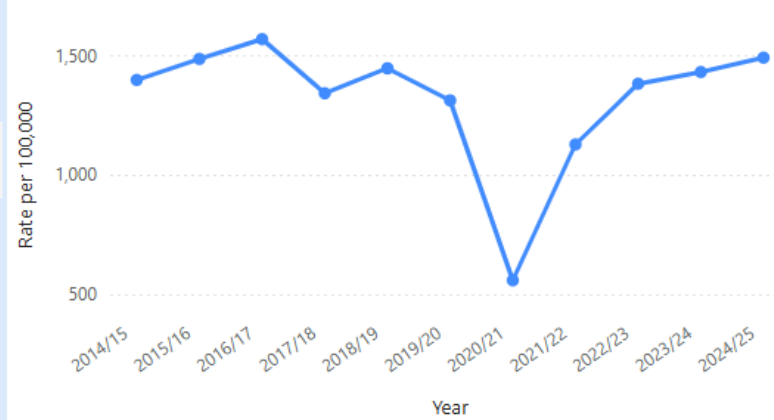
Persons

Respiratory condition

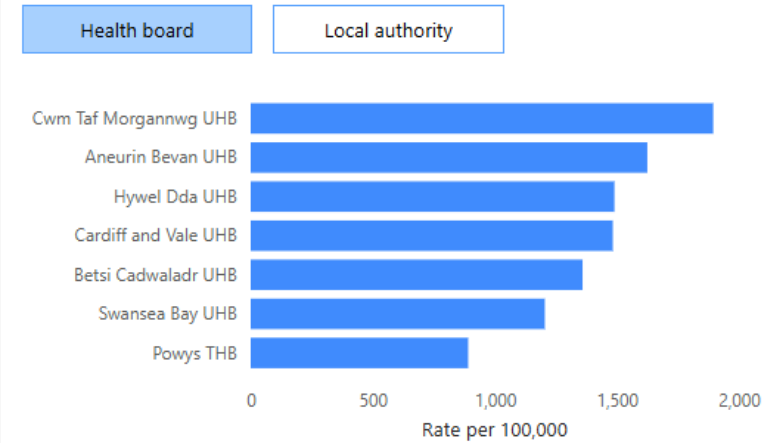
All

Respiratory related hospital emergency admission rates per 100,000 population
Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda University Health Board, Persons, All



By area: 2024/25, Persons, All



Year

2024

Area

Hywel Dda Universi...

Sex

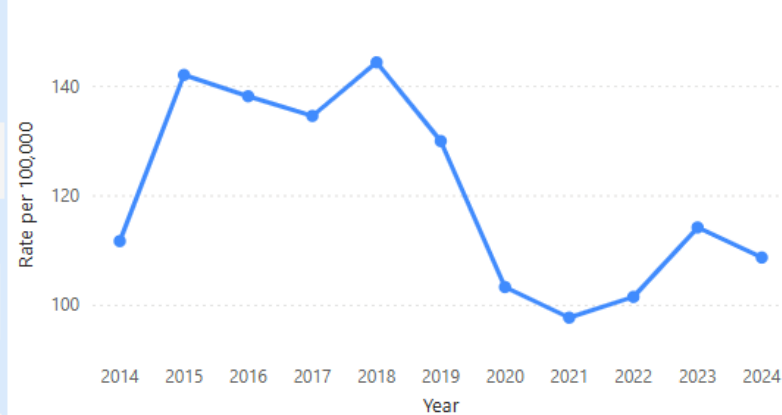
Persons

Respiratory condition

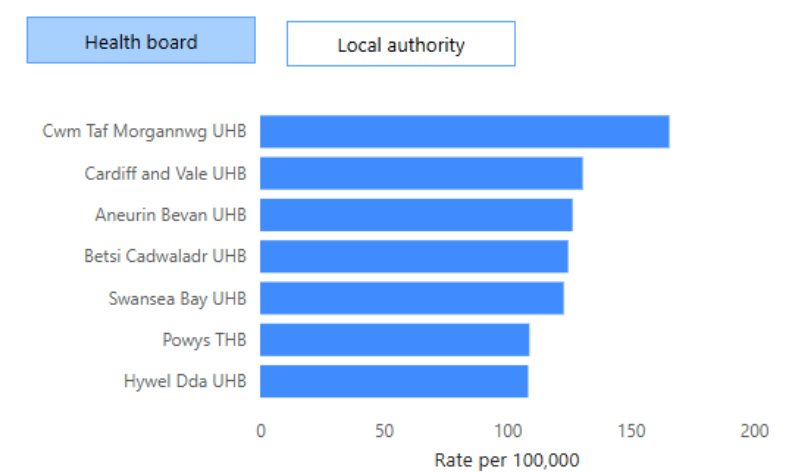
All

Respiratory disease mortality rates per 100,000 population
Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Hywel Dda University Health Board, Persons, All



By area: 2024, Persons, All



Respiratory Disease Admission and Mortality Carmarthenshire

Year

2024/25

Area

Carmarthenshire

Sex

Persons

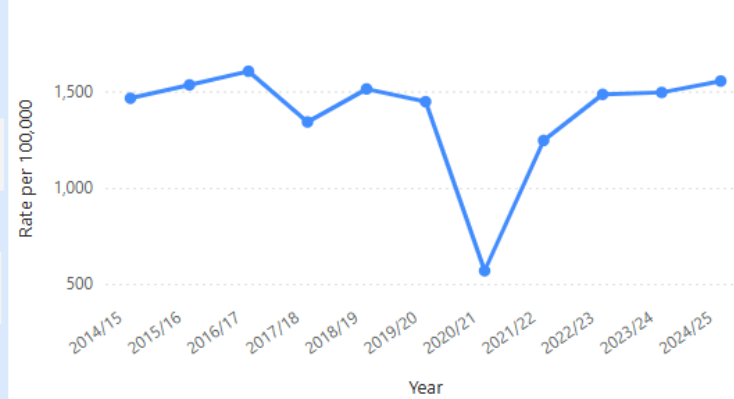
Respiratory condition

All

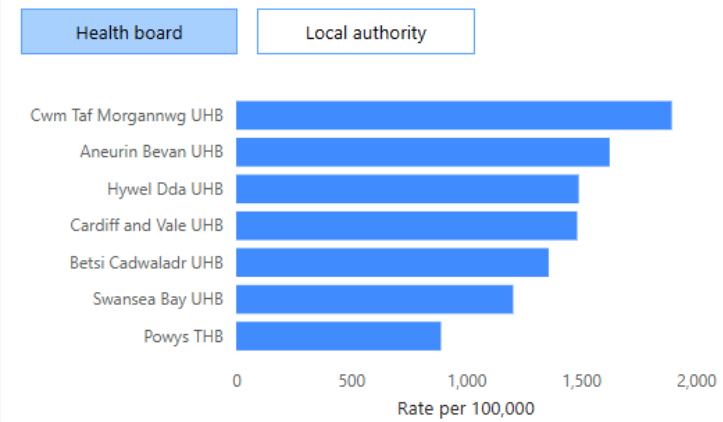
Respiratory related hospital emergency admission rates per 100,000 population

Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Carmarthenshire, Persons, All



By area: 2024/25, Persons, All



Year

2024

Area

Carmarthenshire

Sex

Persons

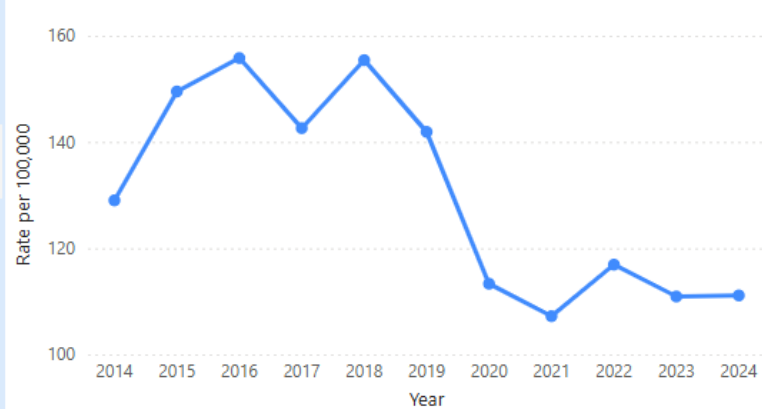
Respiratory condition

All

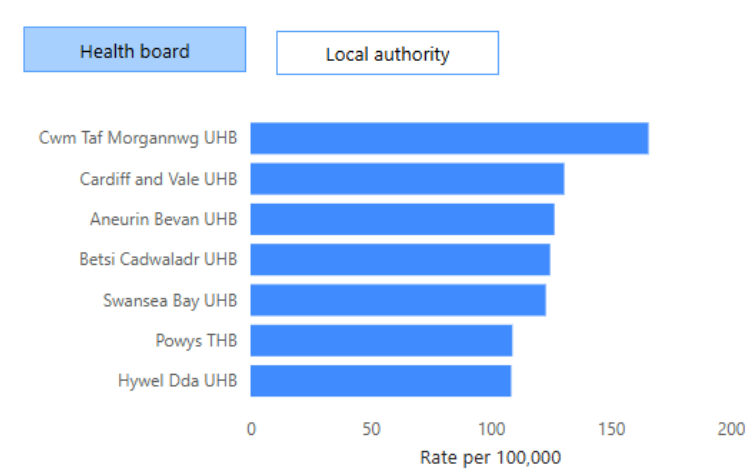
Respiratory disease mortality rates per 100,000 population

Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Carmarthenshire, Persons, All



By area: 2024, Persons, All



Respiratory Disease Admission and Mortality Ceredigion

Year

2024/25

Area

Ceredigion

Sex

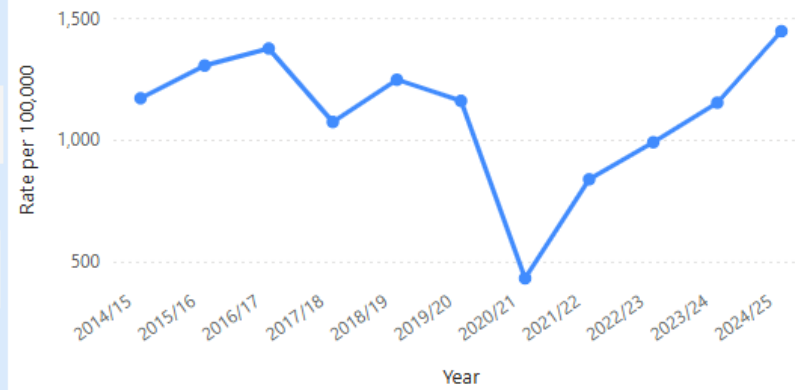
Persons

Respiratory condition

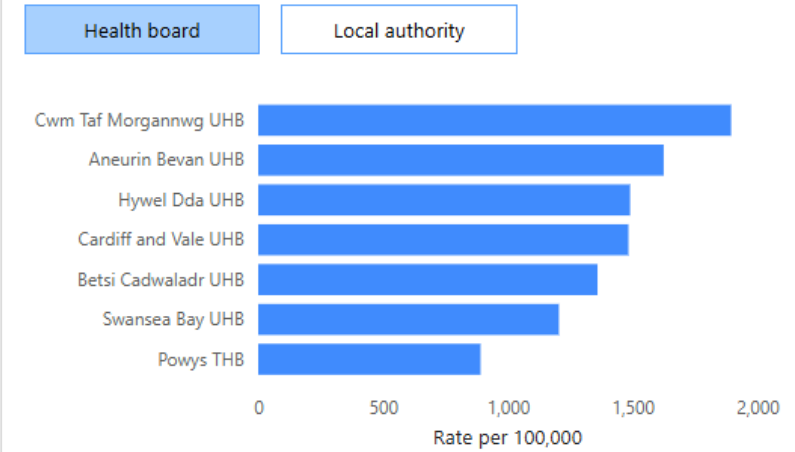
All

Respiratory related hospital emergency admission rates per 100,000 population
Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)

Trend: Ceredigion, Persons, All



By area: 2024/25, Persons, All



Year

2024

Area

Ceredigion

Sex

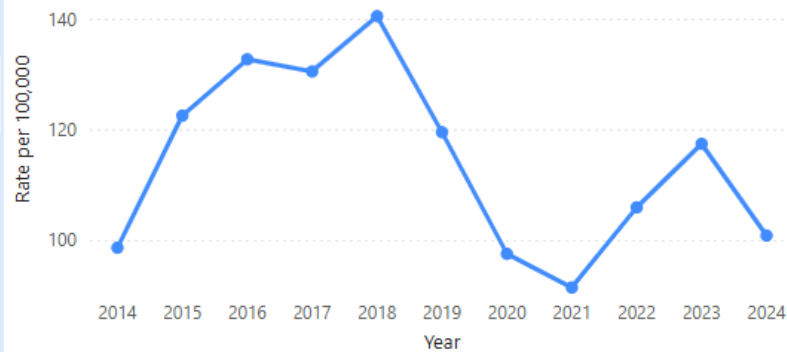
Persons

Respiratory condition

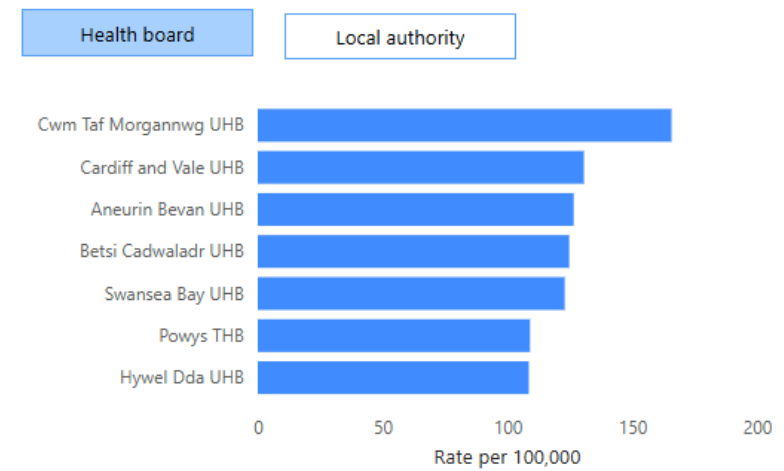
All

Respiratory disease mortality rates per 100,000 population
Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)

Trend: Ceredigion, Persons, All



By area: 2024, Persons, All



Respiratory Disease Admission and Mortality Pembrokeshire

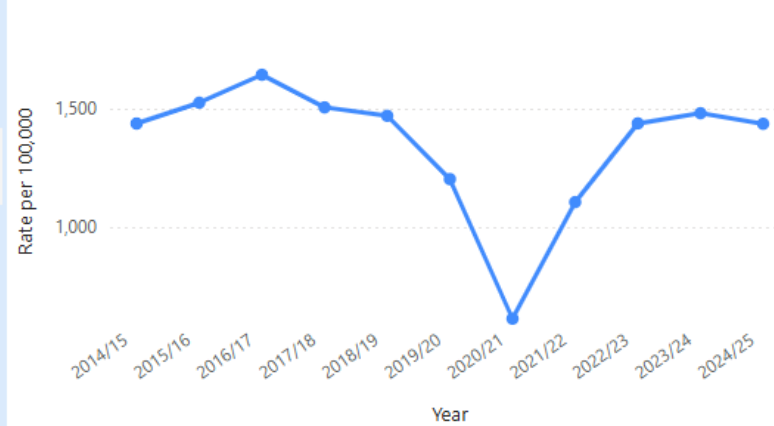
Year
2024/25

Area
Pembrokeshire

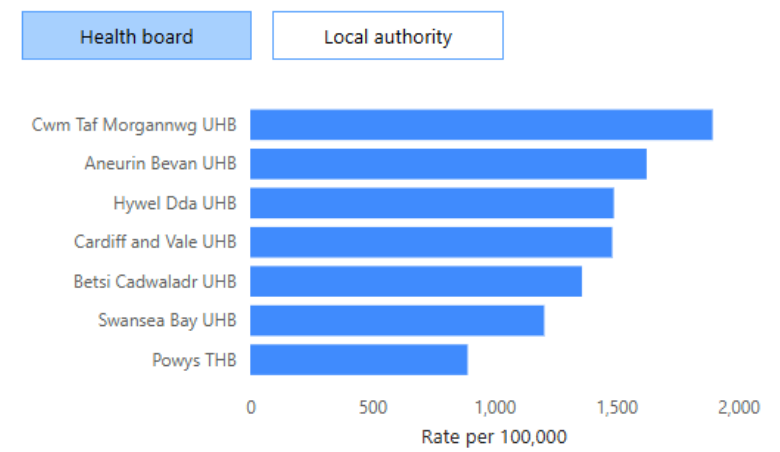
Sex
Persons

Respiratory condition
All

Respiratory related hospital emergency admission rates per 100,000 population
Data source: Admitted Patient Care (APC) dataset for Wales (accessed via Health Maps Wales, DHCW)
Trend: Pembrokeshire, Persons, All



By area: 2024/25, Persons, All



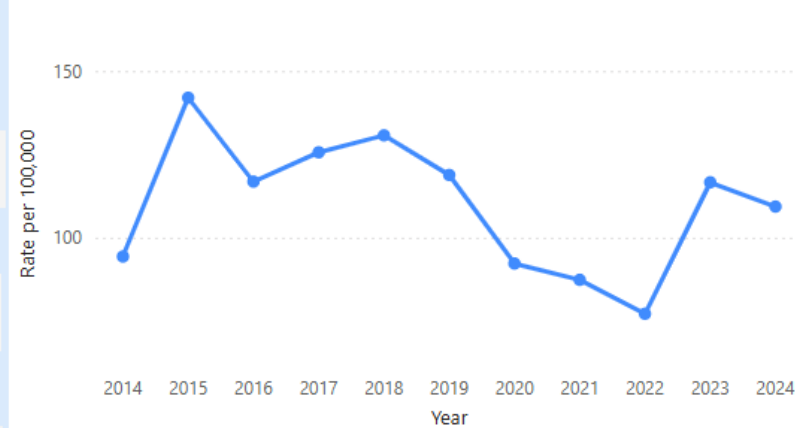
Year
2024

Area
Pembrokeshire

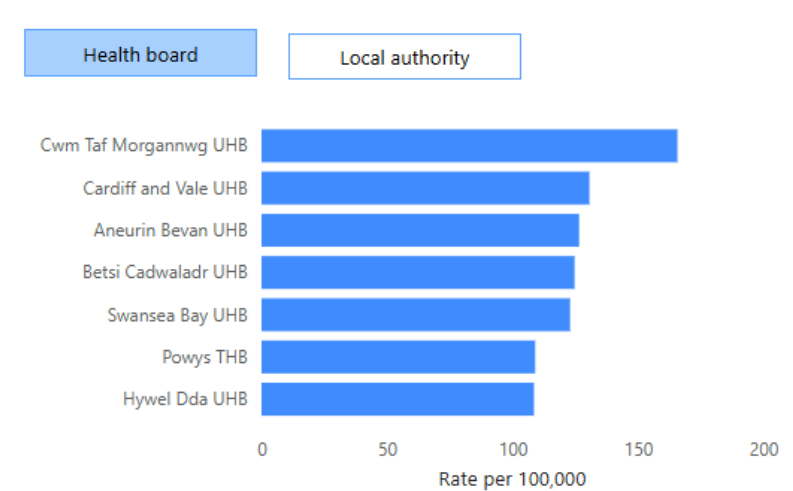
Sex
Persons

Respiratory condition
All

Respiratory disease mortality rates per 100,000 population
Data source: Annual District Deaths Extract (ADDE), Office for National Statistics (accessed via Health Maps Wales, DHCW)
Trend: Pembrokeshire, Persons, All



By area: 2024, Persons, All



- Live Link to Our Population Health Dashboard:
- [Our Population Health dashboard](#)

Population Health Intelligence

Comprehensive Health Needs Assessment completed as part of the Pharmaceutical Needs Assessment April/ May 2026

- Provides an up-to-date overview of the health needs of the population served by Hywel Dda University Health Board (HDdUHB)
- Detailed view of the area and its population
- Focuses on:
 - the health needs of the population in the seven priority health domains where early intervention can improve outcomes, reduce system pressure and support healthier lives.
 - the four modifiable behavioural risk factors which together drive a substantial proportion of preventable illness, early death and health inequality
 - Health Issues that relate to different section of the population
- Can be used to inform planning, delivering, and reviewing pathways, services, and treatments.

Population Health Intelligence

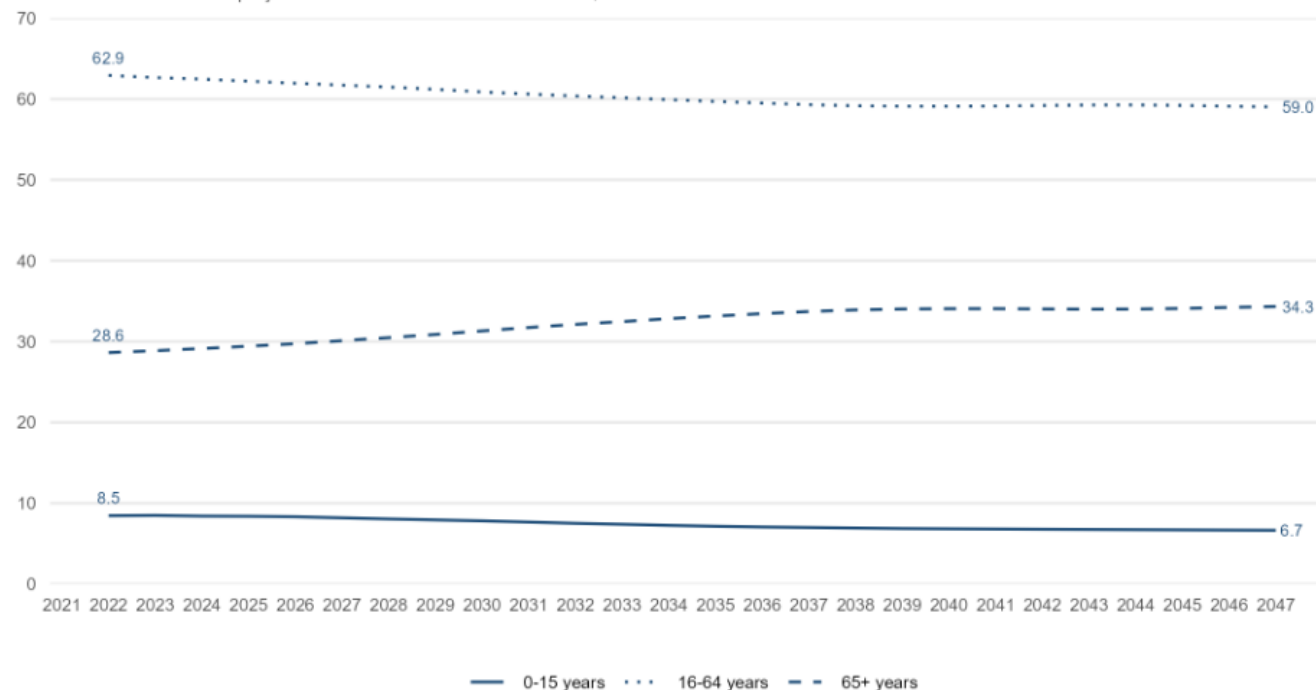
Population profile:

HDdUHB has an ageing population, this is set to increase over the next twenty years, and at a faster rate than Wales as a whole (34.3% of the population of HDdUHB will be 65 and over compared to 28.7% in Wales)

This is likely to lead to a rise in the prevalence of chronic conditions, meeting the needs of these individuals will be a key challenge for us and our partners.

Population Projections, Percent Distribution by Age Cohort, Hywel Dda UHB, 2022-2047

Prepared by: Hywel Dda Public Health Team
Source: 2022-based projections for local authorities in Wales, Welsh Government



Population Health Intelligence

Chronic condition register change from earliest available data to 2023/24

Group	Condition	From	Count	Count in 2023/2024	Percentage increase
Diabetes	Diabetes (aged 17+)	2009/10	19783	29267	47.9%
Cardiovascular Disease	Atrial Fibrillation	2009/10	7881	12994	64.8%
	Heart Failure	2009/10	3905	5792	48.3%
	Hypertension	2009/10	62859	68650	9.2%
	Stroke/ <u>TIA</u>	2009/10	8716	9925	13.8%
Respiratory	Asthma	2009/10	26459	29632	12%
	COPD	2009/10	7394	9544	29%
Musculoskeletal	Osteoporosis (50+)	2012/13	352	818	132.4%
	Rheumatoid Arthritis	2013/14	3505	3916	11.7%

Table: A table showing a number of disease registers and the percentage and count change between when data was first collected and the latest available data. Quality and Outcomes Framework and the Quality Assurance and Improvement Framework, Welsh Government

Population Health Intelligence

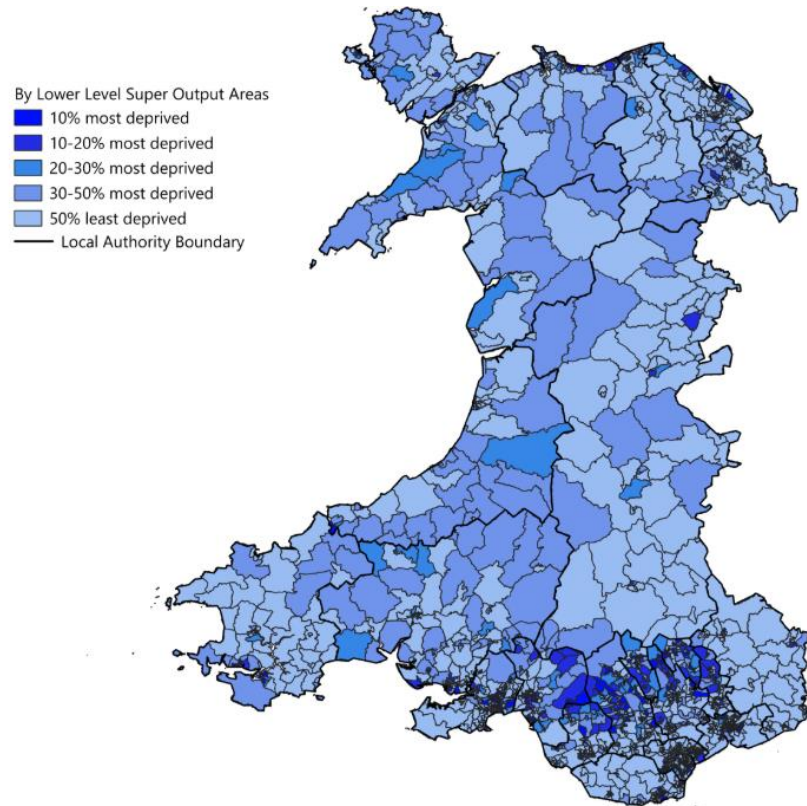
Life Expectancy and Healthy Life Expectancy

- Life expectancy in Wales has stalled.
- Male healthy life expectancy has declined since 2011-2013 from 61.3 to 59.2 years in 2022-24. Female healthy life expectancy has declined more from 61.9 in 2011-2013 to 58.5 in 2022-24.
- The difference in healthy life expectancy between deprivation quintiles remains high at roughly seven years between the most deprived and least deprived. These inequalities shape quality of life, mental wellbeing, and the ability to work, and they place significant demand on health and social care services.
- Levels in HDdUHB are similar to the Wales average but not all the population have an equal experience.

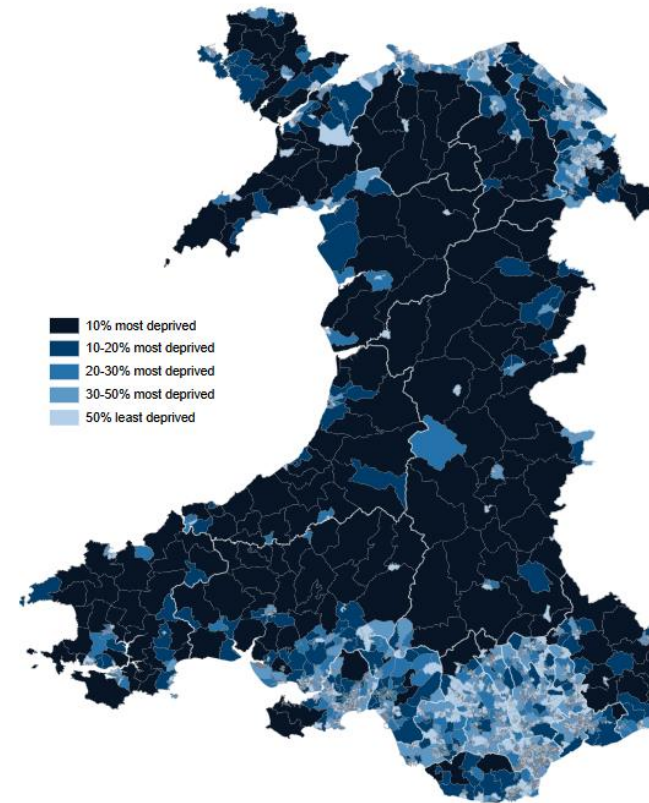
	Males			Females		
	Life Expectancy	Healthy Life Expectancy	Percentage of life expectancy in good health	Life Expectancy	Healthy Life Expectancy	Percentage of life expectancy in good health
Ceredigion	79.7	63.3	79.4	83.3	63.2	75.9
Pembrokeshire	78.8	61.6	78.2	83.1	61.5	74.0
Carmarthenshire	78.7	57.7	73.3	81.9	56.2	68.6
Hywel Dda UHB	79.1	60.1	76	82.4	59.3	72
Wales	77.9	59.2	76	82.4	58.5	71

Population Health Intelligence

Deprivation: the lack of access to opportunities and resources, which we might expect in society.



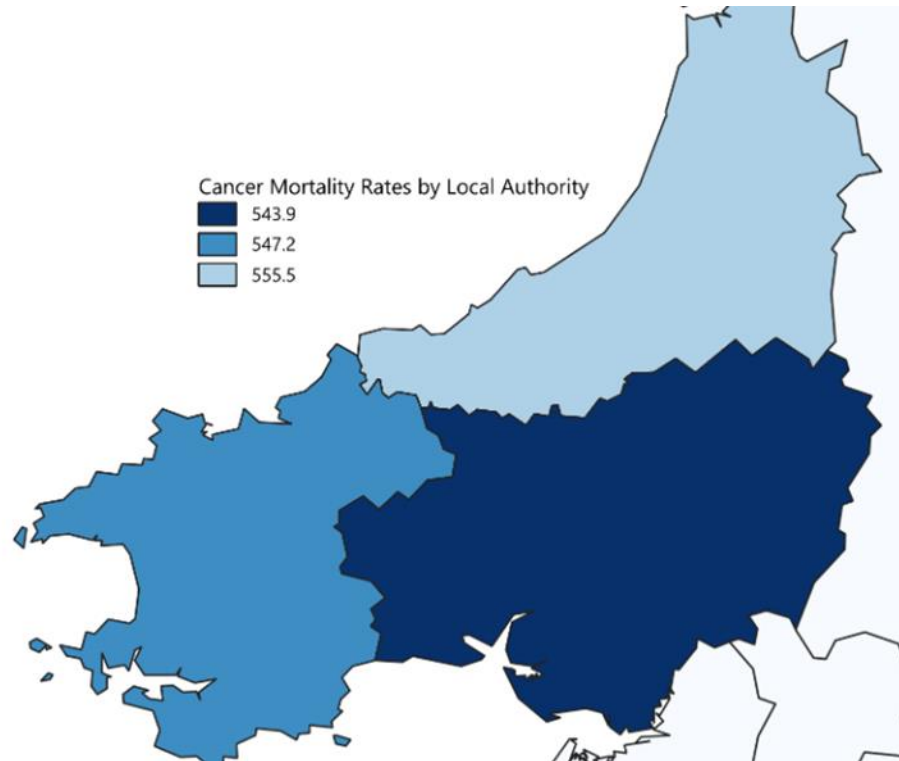
5 areas in Carmarthenshire in the most deprived LSOAs in Wales, 3 in Pembrokeshire and 1 in Ceredigion



Welsh Index of Multiple Deprivation 2025: Access to services domain. Ceredigion has 44% of areas in the 10% most deprived, Pembrokeshire has 35% and Carmarthenshire has 23%

Seven Priority Health Domains: Cancer

- In HDdUHB the lowest age standardised mortality rates per 100,000 population for cancer was in Carmarthenshire at 541.9, with Ceredigion being the highest at 555.5.
- HDdUHB's mortality rate for men with prostate cancer is 48.5 in 2024 which is slightly above the Wales average of 42.6. Female breast cancer rates in HDdUHB are slightly below the Wales average at 29.5 (Wales average – 32.1).



Population Health Intelligence

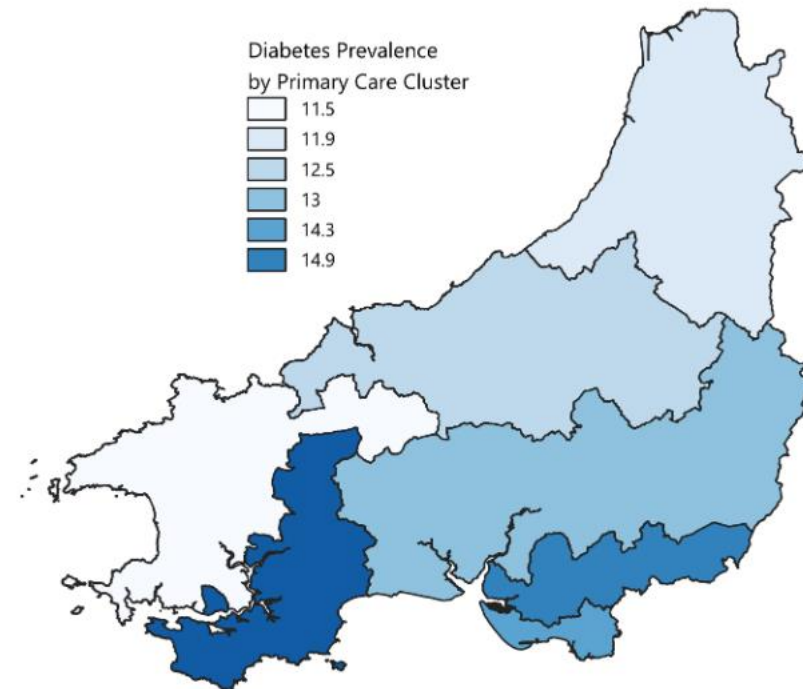
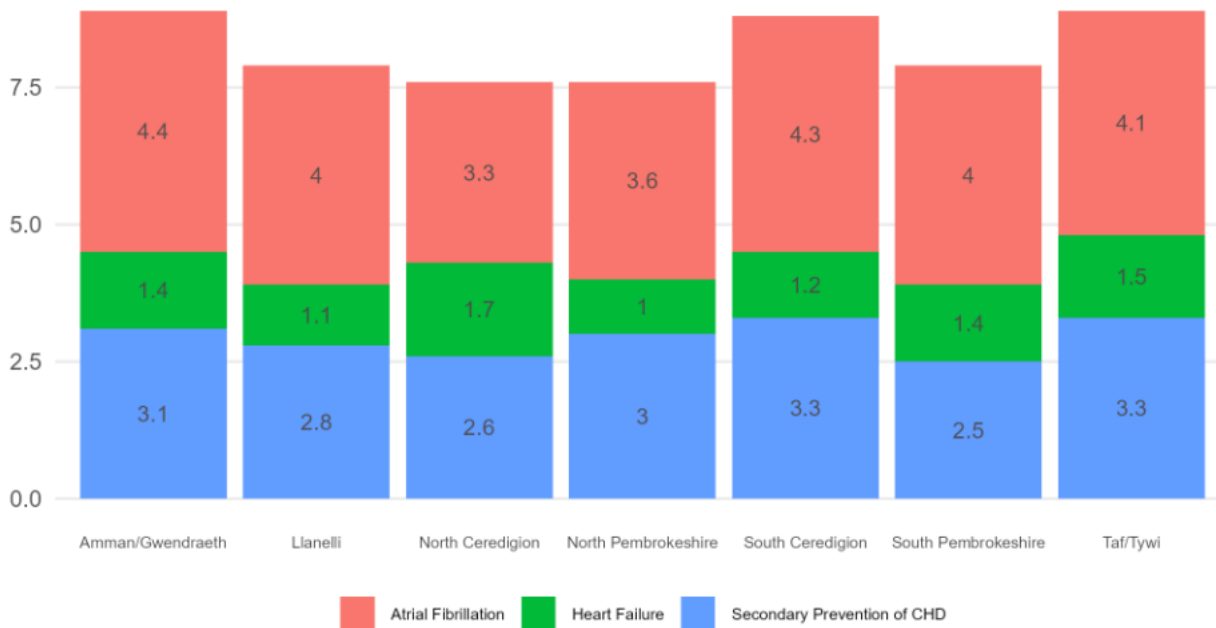
Carmarthenshire has the highest number of cardiovascular deaths.

Amman Gwendraeth, South Ceredigion and Taf Tywi GP Clusters have the higher rates of atrial fibrillation, heart failure and secondary prevention of CHD

Diabetes prevalence is highest in Amman Gwendraeth, South Pembrokeshire and Llanelli clusters.

Cardiovascular Disease in Hywel Dda, 2022

Prepared by: Hywel Dda Public Health Team



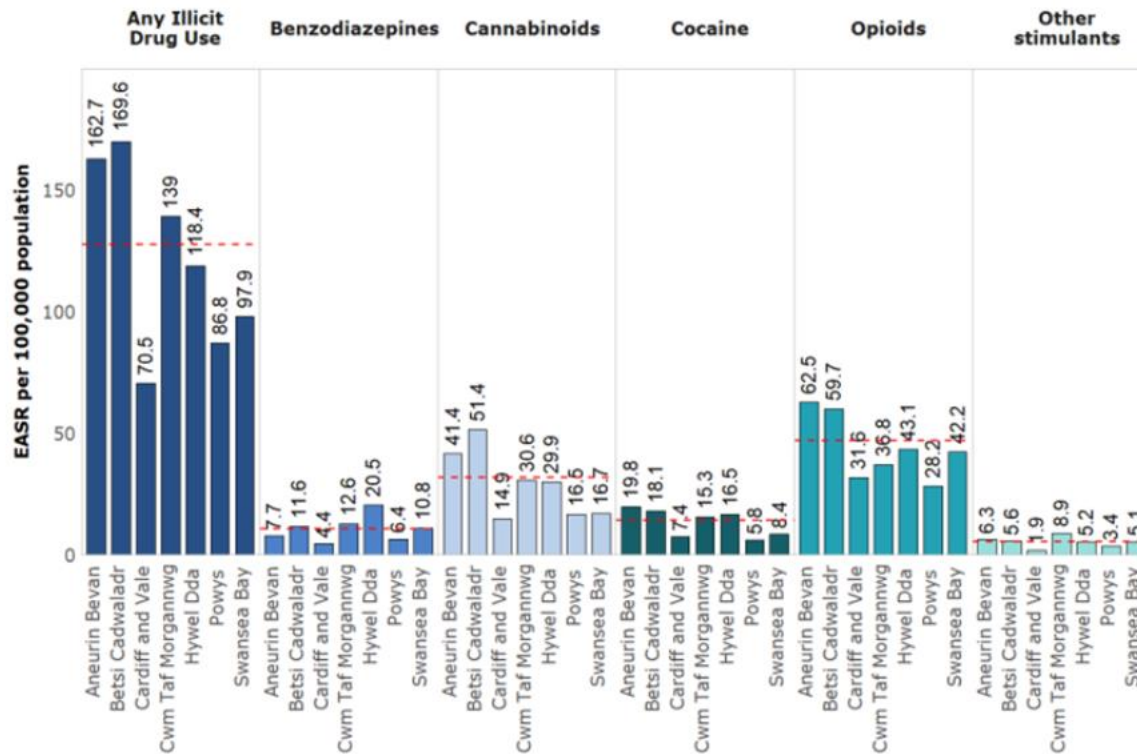
Population Health Intelligence

Mental health

Ceredigion has the highest sense of worthwhile, lowest sense of anxiety and the highest percentage of life satisfaction of the three counties, and higher than the Wales average

Substance misuse

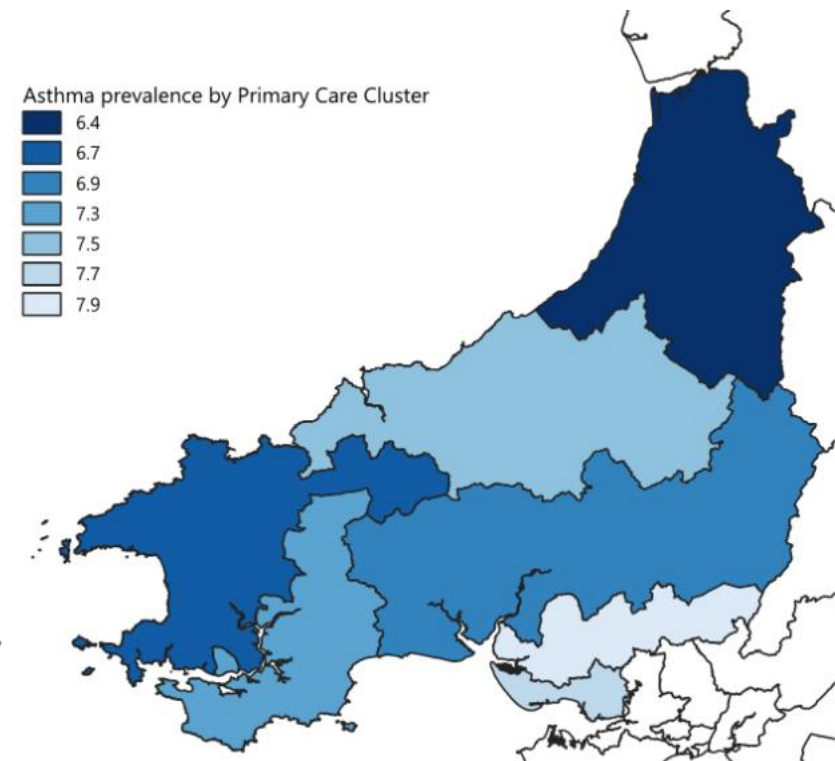
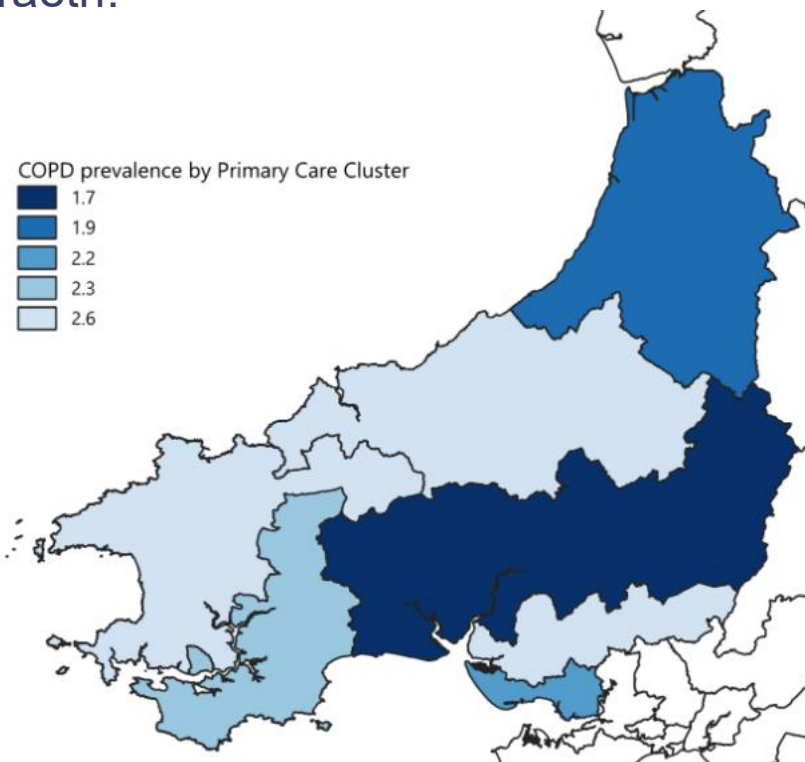
HDdUHB has a lower rate of hospital admissions related to illicit drug use than the Wales average.



Respiratory Disease

The most common respiratory diseases are COPD, asthma, occupational lung diseases such as coal miners' pneumoconiosis, pneumonia and pulmonary hypertension.

COPD prevalence is highest in North Pembrokeshire, and asthma prevalence is highest in Amman Gwendraeth.



Child and Maternal Health

Across Wales the percentage of children who were up to date with their Hib/MenC booster, '4 in 1' DTaP/IPV pre-school booster and MMR vaccines by four years of age was 85.3%. The percentage in HDdUHB was 87%, with slight regional variation (Carmarthenshire 86.1%, Ceredigion 89.4%, Pembrokeshire 87.3%), which remains below the World Health Organisation (WHO) target of 95%. The gap in uptake between the most deprived and least deprived quintile in HDdUHB is 12.1%.

HDdUHB have the second highest rate in Wales of pregnant women having a Body Mass Index (BMI) of 30+ at initial assessment (33.1% (Wales 32.1%))

10.3% of women giving birth were recorded as smokers, lower than 12% across Wales

Rates of breastfeeding at birth, six weeks and six months are higher in HDdUHB than for Wales at 69.2% compared to 61.9%, 34.3% compared to 30.7% and 26.2% compared to 23.2% for exclusive breastfeeding respectively

Pembrokeshire has the highest teenage conception rate in the locality and is higher than the rate for Wales (18 per 1000 females under 18 compared to 15.7 per 1000)

Population Health Intelligence

Frailty, falls, and physical decline.

- In HDdUHB there were 1,333 people were admitted to hospital following a 999 call due to Level 1,2 and 3 falls in people 60 and over in 2025.
- Falls are a major cause of disability and death in older people in Wales, and result in significant human costs in terms of pain, loss of confidence and independence.
- Dementia is the leading cause of death in England and Wales
 - Estimated number of people living with dementia in West Wales is 6,161
 - Total number of people living with a diagnosis of dementia in West Wales in 2025 is 3,210
 - In 2024 the dementia diagnosis rate in West Wales was 52.1%
 - Estimated that 2,951 in West Wales are undiagnosed with dementia
 - There is a projected regional increase of 41% to 2030 (severe dementia) in West Wales, with variation as follows (West Wales MSR 2020): Carmarthenshire=41%, Ceredigion=37%, Pembrokeshire=44%

Population Health Intelligence

The four modifiable behavioural risk factors

Smoking

- Smoking prevalence in HDdUHB has decreased significantly in the last two decades from 26% in 2003-05 to 13.4 % in 2021-23 (Carmarthenshire (14.1%) Ceredigion (13.9%) and Pembrokeshire (12.6%))
- The European Age Standardised Rate (EASR) for smoking attributable mortality for HDdUHB is 172, per 100,000 lower than the Wales rate of 190 per 100,000. ⁴⁸ Similarly, the smoking attributable hospital admission rate per 100,000 people in HDdUHB is significantly lower at 734 per 100,000 than the Wales rate (862 per 100,000).

Nutrition

- Latest figures released last month show that the prevalence of children living with obesity was the highest All-Wales prevalence recorded since the Child Measurement Programme began (12.8%), as was the prevalence of children living with overweight or obesity (27.3%).
- The prevalence of children living with obesity in the HDdUHB area is the highest in Wales at 13.9% (along with Cwm Taf Morgannwg), with variation by locality (Pembrokeshire 11.8%, Ceredigion 13.7%, Carmarthenshire 15.2%)
- The prevalence of children living with overweight or obesity in HDdUHB was the highest in Wales (30.1)

Population Health Intelligence

Alcohol

- 16.8% of residents of HDdUHB drink more than the recommended guidelines, higher than the Welsh average of 16.4%.
- Pembrokeshire (20.3%) is higher than the Welsh average. Ceredigion with 16.3% and Carmarthenshire, with 14.9% of its residents drinking more than the recommended guidelines are lower.
- In relation to hospital admissions for an alcohol specific condition Pembrokeshire had a higher rate (443 per 100,000) than the Wales rate (370 per 100,000), both Carmarthenshire and Ceredigion had lower rates (343 per 100,000 and 352 per 100,000 respectively).

Physical Activity

- 18.7% of children in HDdUHB surveyed reported at least 60 minutes of physical activity every day for the last seven days, at a similar level to All-Wales, and this was similar for all three counties. (School Health Research network' Student Health and Wellbeing survey for 11 – 16 year olds 2023)



DIOGEL | CYNALIADWY | HYGYRCH | CAREDIG
SAFE | SUSTAINABLE | ACCESSIBLE | KIND



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board