

- Planning Objective 10: Population Health
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    - 2025/26

# The aim of Planning Objective 10

- To improve population health, reduce avoidable health inequalities and prevent avoidable disease impacting the Health Board.
- The underlying principles of Planning Objective 10 are to leverage the Health Board's capacity and capability as a healthcare provider, employer, anchor institution, and partner agency to improve population health outcomes.
- Key priorities for health promotion, health protection and healthcare public health activities are developed and reviewed in the annual planning cycle.
- Population Health is a Ministerial Priority for 2025/26.

# What have been the key achievements so far? Activities completed in Quarter 4 reporting period.

Key deliverable actions for reporting period, including those reported in previous quarters, are complete.

- **10.3 Deliver on National Immunisation Framework with a focus on increasing uptake of Measles Mumps Rubella vaccination (MMR) and seasonal immunisations** – Delivery of seasonal flu and autumn COVID-19 booster programmes completed to population eligible groups and healthcare staff throughout quarter with focused mop up offers. Targeted focus on offer of MMR2 and Pre-school booster communicated with Primary Care with uptake increase noted to 91% and communication arranged to all households via leaflets.
- **10.5 Delivery of Whole Systems Approach to Healthy Weight** – 110+ stakeholders engaged across the region, leading to ‘Access to Food’ as a priority sub-system; two of three Public Service Boards (PSBs) adopted healthy weight as a strategic priority, with place-based asset mapping completed to guide local solutions.
- **10.7 Progress the development of the Social Model for Health and Wellbeing (SMfHW)** – Launched ‘Creating Change Together’ across three counties, evolving into a dynamic community of practice aimed at driving local project- and partnership-based action, and fostering shared learning on health equity. SMfHW Maturity Matrix to be embedded in Wellbeing of Future Generations (WCFG) Maturity Matrix and Progress tracker to support embedding Social Model for Health and Wellbeing across Wales.
- **10.8 Alcohol and drug use** – The tender evaluation has been completed. Tender negotiations are currently ongoing as part of the procurement process, and we will be in a position to confirm further in April 2025.

# What have been the key achievements so far?

## A Reflection on 2024/25 - Key Achievements

### Give Children and Young People the best start in life

- Regional Partnership Board (RPB) Children and Young People's Board re-established.
- 100% of secondary schools and 74% of all schools are action planning for Whole School Approach to Emotional and Mental Wellbeing.
- Early Years Needs Assessment completed and knowledge mobilisation activities undertaken.

**Held a Social Model for Health and Wellbeing Summit** featuring keynote speakers, including Professor Sir Michael Marmot, to celebrate and promote the system-wide adoption of equity and wellbeing principles of the regional Social Model for Health and Wellbeing. This initiative is supported by a regional steering group with national leadership.

**Community of Practice Housing and Health** - Since September 2024, Hywel Dda University Health Board (HDdUHB) has convened a Community of Practice on indoor warmth. This has worked with fuel poverty organisations, housing partners plus other agencies to deliver a range of offers to help people maintain adequate heat in their homes and thus help to reduce NHS pressures. This includes existing partners, such as the Welsh Government Warm Homes NEST project, plus new partners, including Warm Wales, Severn Wye Energy Agency and Hope4U.

**Health Protection – Assertive Outreach work** commenced in June 2024, in partnership with The Wallich, a homeless charity. Nine outreach days held across 'hot spot' areas in Llanelli, Carmarthen and Ammanford. 54 Contacts, six of whom only came forward due to receiving a blood transfusion prior to 1991 (Infected Blood Inquiry).

**Health Protection – Find and Treat Bus** in partnership with Public Health Wales and University Hospital London a targeted Tuberculosis (TB) and Blood-borne Virus (BBV) screening service provided in Llanelli area for homeless, refugee/asylum seekers and at risk population.

**Harm Reduction – Drugs and Alcohol** 93.2% of those accessing drug and alcohol services successfully completing treatment, first in Wales.

# What have been the key achievements so far? A Reflection on 2024/25 - Outcomes

## Give Children and Young People the best start in life

- Number of health aspects completed by pre-school settings = 42.
- 86% of schools are engaged in an active Health Promoting Schools offer.
- 27 training courses provided for schools and pre-schools workforce with 859 participants attending in total.
- Pilot programmes commenced in Infant Feeding, First 1000 Days: Food, Nutrition and Movement, Starting Well - Arts in Health/Peri Natal Mental Health initiative.

## Social Model for Health & Wellbeing Summit

- 98 people attended from 18 different organisations across the region. seven speakers – two of them keynote and other high-level representation from key partners. Social Model for Health and Wellbeing Charter supported by organisations. Key messages and learning from the day will inform next steps for embedding a Social Model for Health and Wellbeing.

## Community of Practice Housing & Health

- We are leading a Bevan Exemplar project on housing and health, which has potential for All-Wales 'spread and scale'. Using a novel performance system developed by a multi-agency group in Phase 1 of the project, over the last three years the delivery of housing and health work has increased by 20% to 65%. The ambition is to continue the Phase 2 on that trajectory over the next three years to achieve >85%, potentially leading to an All-Wales programme.

## Health Protection – Assertive Outreach work

- 48 BBV tests, 34 syphilis test, 23 Hepatitis B vaccinations provided (43% of contacts).
- 10 Hepatitis C antibody positive (18.5%), seven Hepatitis C PCR positive (13% ongoing infection).

## Health Protection – Find and Treat Bus

- 85 people attended the screening in the local community – good response.
- 84 chest x-rays completed, 85 blood tests completed. four Hepatitis vaccinations provided.

# What needs to be done next?

- Increase immunisation rates: raising HPV coverage from 78% to 80%, MMR2 from 88% to 90%, and flu vaccination rates for priority populations by 3%.
- Expand Smoking Cessation Access: Aim for 5% of adult smokers to attempt quitting, increasing CO-validated quit rates to 20%.
- Accelerate HIV and Hepatitis Elimination: Increase testing and early detection to align with 2030 elimination goals.
- Reduce Drug-Related Harm: Target interventions for women in addiction, users of performance-enhancing drugs, and at-risk communities.
- Improve Childhood Health Promotion: Support activities in pre-school and school settings, pilot infant feeding services to boost breastfeeding rates.
- Embed Social Model for Health & Wellbeing: Strengthen community partnerships, volunteering, and social innovations.
- Develop Climate Change Adaptation Plan: Strengthen health system resilience and business continuity.
- Advance digital public health: improving productivity, reach and impact.
- **Strengthen Prevention through Health Services: Scale up training for Making Every Contact Count, health coaching, and weight management services.**

# What needs to be done next?

## Risks

- Low immunisation uptake: Expand school-based vaccination and targeted GP outreach.
- Low smoking cessation uptake: Strengthen referral pathways via Making Every Contact Count (MECC) trained professionals and pharmacy.
- Limited MECC and workforce capacity: Review and scale prevention training, reporting and service improvement efforts across Primary and Secondary Care.
- Limited digital tools: Confirm requirements early and integrate into digital and innovation strategies.

## Opportunities

- Funding and delivery mechanisms: Leverage value-based healthcare and social innovation and Artificial Intelligence (AI) driven efficiencies.
- Climate resilience: Position the Board as a leader in climate adaptation in healthcare.
- **Testing the 20-4-7 model: Targeted prevention in high-need communities, on priority risk factors and prevention priorities.**

# What are your take home messages for the Committee?

- A stronger focus on activity and outcome measures has been taken into the 2025/26 planning cycle.
- Developing and testing a 20-4-7 model to further embed prevention across health services is a key priority, requiring supporting action across directorates.