

Planning Objective 10 – Population Health

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Period of reporting: Quarter 1 Progress Update

Population Health and Prevention

Throughout the coming year, we will align our local objectives with Ministerial Priorities and continue to make prevention everyone's business. Our approach involves closer collaboration between healthcare services, Local Authorities (LAs), the third sector, and the communities we serve. By taking this more holistic view of health, we aim not only to tackle immediate risks but also to create sustainable foundations for improved wellbeing in the years ahead.

Key focus on delivering:

1. Strengthening prevention and population health programmes
2. Advancing prevention in healthcare services
3. Embedding the Social Model for Health and Wellbeing (SMfHW)
4. Addressing priority population-level risks
5. Driving innovation and system development

What have been the key achievements so far?

PO10	Quarter (Q) 1	Q1 Progress updates	RAG Status
1. Strengthening Prevention and Population Health Programmes	Strengthened immunisation outreach, including planning for targeted GP and school-based interventions.	<p>The spring COVID-19 immunisation campaign for immunosuppressed individuals saw an increase in uptake compared to last year, though figures remain low.</p> <p>The school Human Papilloma Virus (HPV) immunisation programme targeted the two lowest-performing schools in Hywel Dda University Health (HDdUHB), with final uptake data pending.</p> <p>Respiratory Syncytial Virus (RSV) catch-up clinics are scheduled for July and August 2025 to supplement access through general practices.</p> <p>Planning is underway for the Autumn/Winter 2025/26 COVID-19 and influenza vaccination campaigns, with an emphasis on co-administration where feasible. Progress is also being made in planning for the delivery of influenza vaccines to infants (2-3 years old) in nursery settings.</p> <p>All actions align with current Welsh Health Circulars.</p>	<div style="background-color: yellow; width: 100%; height: 100%;"></div>
	Planning for early years and school health promotion initiatives, including embedding 'Whole School Approaches' to health and wellbeing.	<p>The Infant Feeding Service pilot is progressing well, with positive outcomes reported by staff and patients. The evaluation report from TriTech is delayed but expected in Q2.</p> <p>Thirty 'health aspects' have been completed by pre-school settings, achieving 54% of the annual target. Currently, 92% of all schools are engaged with an active health-promoting school offer, surpassing the end-of-year target of 89%. Additionally, there has been a 2% increase in schools' action planning for the 'Whole School Approach to Emotional and Mental Wellbeing,' with 77% of schools now participating.</p>	<div style="background-color: green; width: 100%; height: 100%;"></div>
	Planning for smoking cessation and vaping prevention initiatives, setting targets and aligning with Welsh Government guidance.	<p>We are supporting schools across the three counties to quit or temporarily abstain from smoking and vaping during the school day. National resources have been shared for inclusion in the school syllabus, and we have collaborated with CHOICES to develop an educational package for schools requesting information sessions. This package has been updated to include nicotine pouches and oral snuff (SNUS), with handouts and resources distributed to each LA and healthy school lead due to increased usage across the Health Board.</p>	<div style="background-color: green; width: 100%; height: 100%;"></div>

What have been the key achievements so far (con't)?

PO10	Quarter 1	Q1 Progress updates	RAG Status
	<p>Developed 20-4-7 prevention model, defining core interventions for priority communities.</p>	<p>The integration of a population health domain into the Health Board’s Escalation Framework aims to promote healthier behaviours and build resilience to public health and operational challenges. Phase 1 (April 2025-October 2025) focuses on influenza vaccination uptake among healthcare staff (31.86% vaccinated) and Business Continuity Plan completion rates (171 plans). Phase 2 (September 2025 - March 2026) will introduce indicators for smoking status recording, Level 1 Making Every Contact Count (MECC) training, and Measles, Mumps and Rubella (MMR) vaccine uptake among healthcare staff. Future aspirations include outcomes related to cancer, respiratory diseases, diabetes, and cardiovascular disease.</p> <p>Following consultation, a Task and Finish Group was launched to co-develop a 20-4-7 implementation toolkit for delivery early in Q3, supported by cross-directorate coordination and Executive sponsorship.</p> <p>This initiative has been significantly delayed owing to Consultant and other senior staff vacancies and absences in the Directorate.</p>	
<p>2. Advancing Prevention in Healthcare Services</p>	<p>Planning and consultation for improved screening for Human Immuno-deficiency Virus (HIV) Hepatitis B and C, aligning with Welsh Government (WG) targets.</p>	<p>We have collaborated with Fast Track Cymru, signing the Paris declaration to end HIV transmission by 2030 in West Wales. A multiagency regional steering group is developing a workplan to support delivery of this commitment.</p> <p>Outreach events have targeted at-risk populations, including homeless charities and the Polish community in Llanelli. The Wallich outreach bus has been used to reach substance users not engaged with existing mainstream services.</p> <p>Hywel Dda University health Board (HDdUHB) has partnered with Gilead for a 9-month project aiming to achieve 100% blood-borne virus (BBV) testing in substance misuse services, innovative services to improve the efficiency and effectiveness of testing with for Hepatitis C and other BBV including:</p> <ul style="list-style-type: none"> • Dry Blood Spot Testing (DBST): A method where blood samples are collected on special filter paper, dried, and then tested for infections like Hepatitis C in a lab. • Point of Contact Testing: Tests performed at the time and place of patient care, providing immediate results for quicker diagnosis and treatment. • Cephid Machine: A diagnostic device used for rapid testing of infectious diseases, including Hepatitis C, providing instant results. <p>BBV testing projects are also arranged for Criminal Justice services, including an 8-week High Intensity Test and Treat in Haverfordwest and Llanelli probation offices, and DBST in the Llanelli custody suite.</p>	

What have been the key achievements so far (con't)?

PO10	Quarter 1	Q1 Progress updates	RAG Status
3. Embedding the SMfHW	Social Model for Health, prevention, and population health plans approved and commenced.	<p>Following the release of the SMfHW Summit report, a draft three-year Delivery Plan has been consulted on internally and with external partner agencies via established governance mechanisms. Revisions are currently underway to align the final delivery plan with existing Health Board mental health, primary care, and related plans, as well as the Health Board Strategic Refresh.</p> <p>Engagement with Public Service Boards (PSBs), LAs, and other partners, including Swansea Bay University Health Board (SBUHB), is ongoing to continue embedding and scaling the model in practice. Specific engagement is occurring to identify community assets and innovations for research, development, and future scaling, informing partnership with the Centre for Social Innovation and others.</p> <p>The Regional Partnership Board (RPB) Preventions Board is providing additional support to the stewardship of the SMfHW, including hosting a dedicated webpage.</p>	
4. Addressing Priority Population-Level Risks	Climate Adaptation Plan developed, outlining system-wide resilience measures.	A dedicated Governance Structure and Project Team is localising the Welsh Climate Adaptation Strategy. Through workshops and stakeholder engagement, supported by an external expert consultancy (Local Partnerships), a draft action plan and risk register were developed, aligning with the national Health and Social Care Climate Adaptation Toolkit. Training sessions, risk assessments, and internal consultations have been initiated, with the project progressing towards for the final Health Board Climate Adaptation Plan for Board approval by December 2025.	
	Planning and consultation on expanding MECC training, digital prevention initiatives, health coaching, and weight management capacity with operations, finance and related teams.	<p>Planning and consultation to expand MECC training, digital prevention tools, health coaching, and weight management services was conducted, engaging operations, finance, digital, Value-Based Healthcare and Clinical/Operational Primary and Secondary Care teams. While a detailed business case for health coaching and weight management services was developed and submitted, the Executive Team, facing significant financial pressures, agreed to defer full implementation, instead committing to a slower-paced rollout beginning in early 2026, dependent upon resource availability. This phased approach aims to preserve momentum, enable early evaluation, and strengthen the case for sustained investment in the next financial year.</p> <p>The proposed approach involves gradually adopting a stepped care model that integrates enhanced lifestyle support across community and clinical settings, customised to individual patient requirements. The steps include: (1) community care delivered in partnership with third sector organisations, (2) guided, routine care supported with digital tools and workforce training, (3) health coaching provided by a team combining Bands 4 and 5 staff, and (4) specialist care for complex or high-need cases through established services in weight management, smoking cessation, and support for alcohol and other drug misuse.</p> <p>This initiative has been significantly delayed owing to consultant and other senior staff vacancies and absences in the Directorate.</p>	

What have been the key achievements so far (con't)?

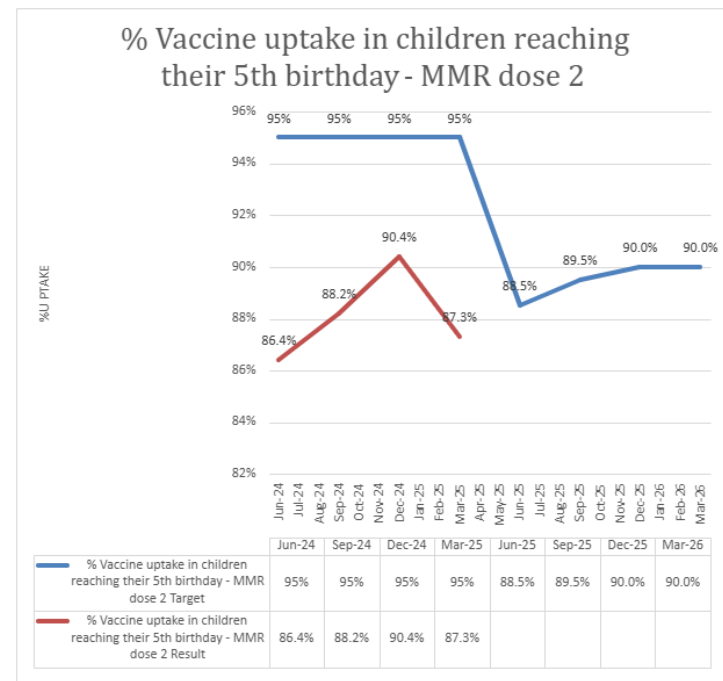
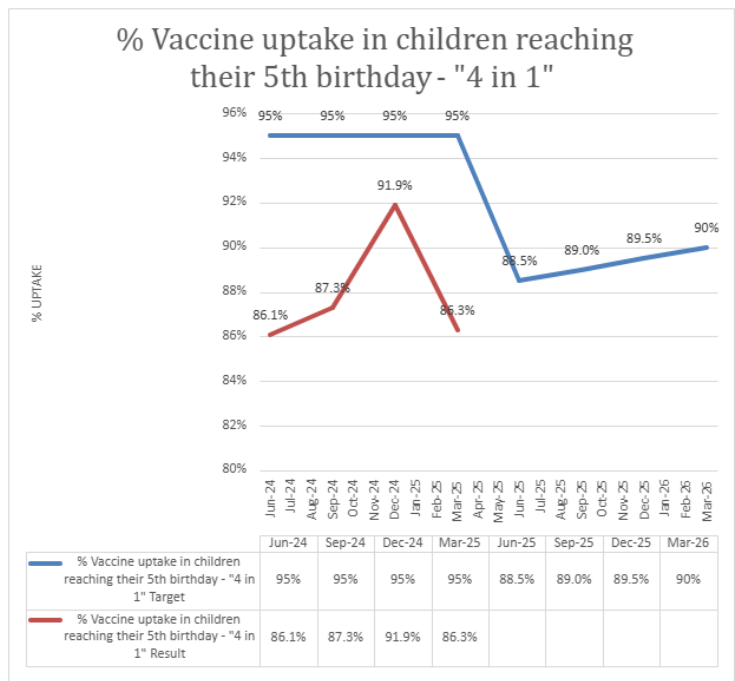
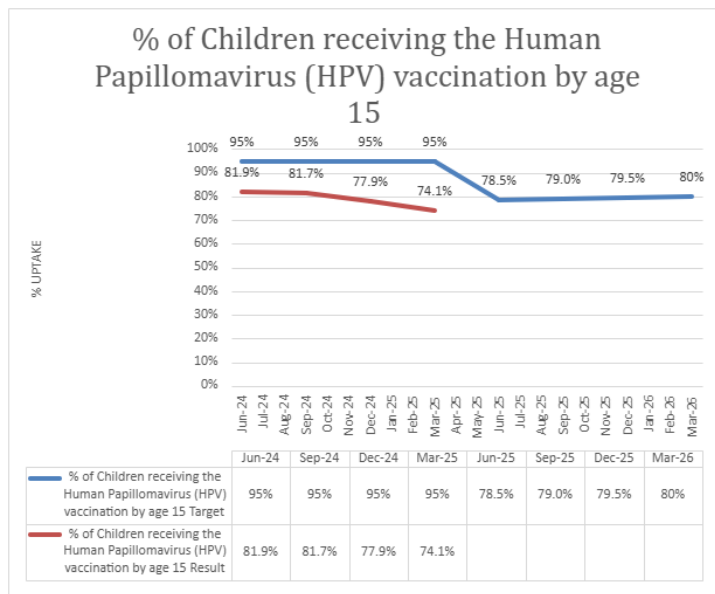
PO10	Quarter 1	Q1 Progress updates	RAG Status
5. Driving Innovation and System Development	<p>Planning and consultation with operations, Finance, Board, and Value-Based Healthcare (VBHC) teams to align prevention in system-wide transformation.</p>	<p>Cross-system planning and consultation were conducted with Operations, Finance, and VBHC teams to embed prevention as a core component of system-wide transformation. This work focused on aligning prevention priorities with strategic planning and financial frameworks, initiating change processes, and integrating long-term prevention goals into the Health Board's Annual Plan and Strategic Refresh. Specifically, this relates to the development of health coaching and weight management services referred to above .</p> <p>A draft three-year Healthy Weight Implementation Plan has been presented to the Healthy Weight Oversight Group, focusing on: (1) healthy procurement and catering, (2) Tier 2 and Tier 3 weight management services for children and young people, (CYP) (3) digital weight management services, (4) promotion of healthy weight to children, young people, and families, (5) working with partners as part of a whole system approach to healthy weight, and (6) developing a health coaching service. A short-term, cross-organisational Task and Finish Group is underway to map existing food access arrangements within the Health Board, review relevant policies, contracts, and regulatory frameworks, validate key assumptions and opportunities with stakeholders, and develop phased actions aimed at achieving measurable improvements.</p> <p>Elements of this initiative have been delayed due to consultant and senior staff vacancies and absences in the Directorate, as well as limited financial and other resources for implementation across the Health Board.</p>	Yellow
	<p>Plans drawn up and partnership opportunities scoped for digital innovation and rural public health research.</p>	<p>Consultation was conducted to plan digital innovation and rural public health research with internal Health Board teams and the Centre for Social Innovation. However, rural public health research priorities and partnership projects are yet to be identified or brokered. Progress on digital innovations is partially dependent on the health coaching business case and the Healthy Weight Implementation Plan referred to above.</p> <p>This initiative has been significantly delayed due to consultant and senior staff vacancies and absences in the Directorate.</p>	

How do we know what we are doing is having an impact?

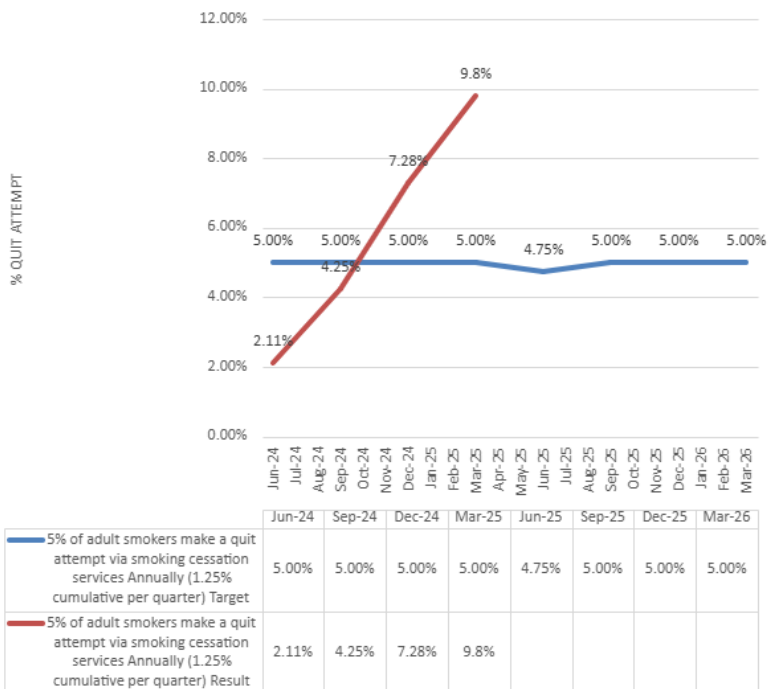
By the end of 2025/26, we will have:

- Increased immunisation rates, raising HPV coverage from 78% to 80%, MMR2 from 88% to 90%, and influenza vaccination rates for priority populations by 3%, using rolling averages for monitoring.
- Expanded smoking cessation access, ensuring at least 5% of adult smokers attempt to quit, with a focus on CO-validated quit rates increasing from 8% to 20%.
- Piloted a new infant feeding service to increase breastfeeding initiation and continuation rates and provide holistic and responsive infant feeding support.
- Supported the continuous improvement of health promotion activities in pre-school and school settings.
- Accelerated action to eliminate HIV and Hepatitis B and C, establishing clear plans and expanding screening and early detection pathways, aligning with 2030 elimination goals.
- Developed and begun implementation of a Health Board Climate Adaptation Plan, strengthening system resilience and business continuity in response to extreme weather events.
- Embedded the SMfHW in everything we do as a Health Board, expanding community partnerships, volunteering, and social prescribing to address wider health determinants.
- Expanded the prevention workforce, increasing MECC training, health coaching, and weight management service capacity, prioritising action on cardiovascular disease, cancer and Type 2 diabetes.
- Reduced drug-related harm, delivering targeted interventions for women in addiction, users of image and performance-enhancing drugs (IPEDs), and at-risk communities.
- Advanced digital public health to improve productivity, reach and impact.

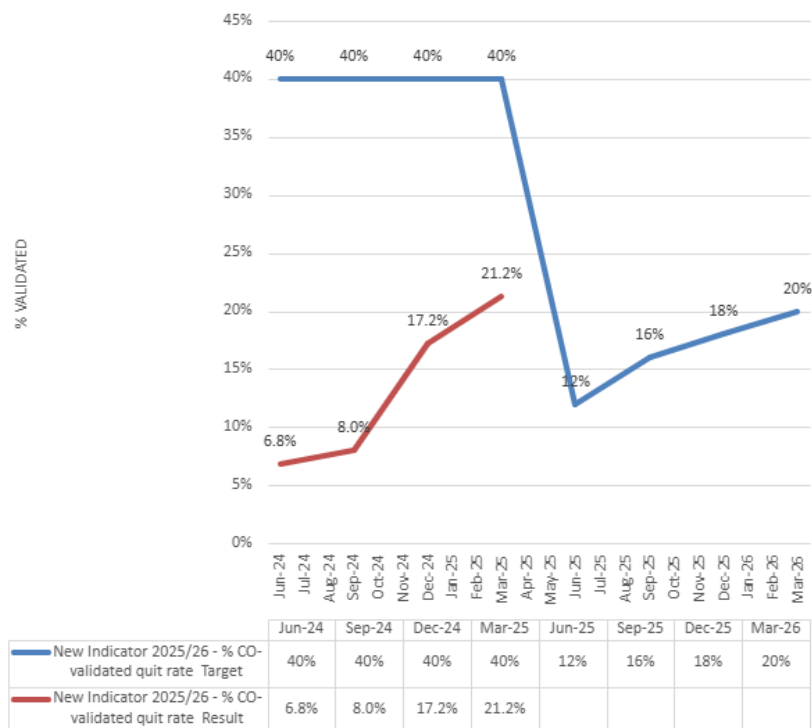
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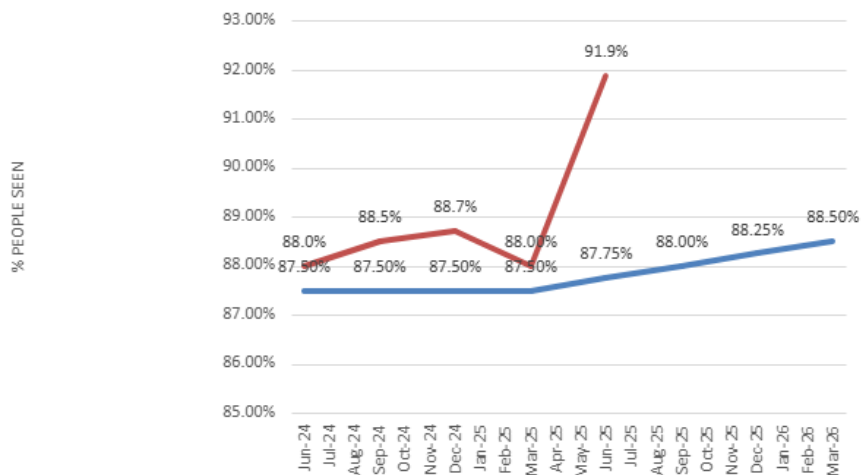
5% of adult smokers make a quit attempt via smoking cessation services Annually



% CO-validated quit rate

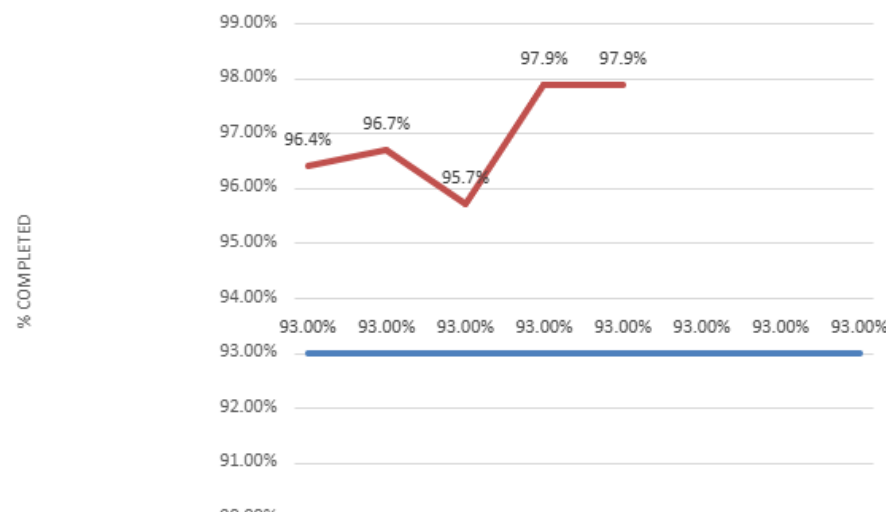


% of people who have been seen for treatment within 20 days for substance misuse (drugs or alcohol)



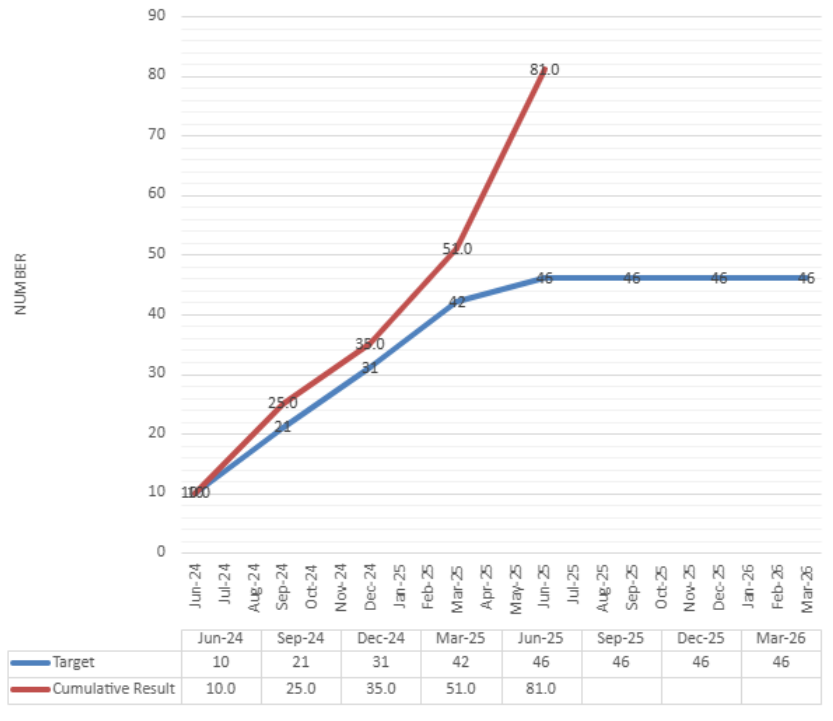
	Jun-24	Sep-24	Dec-24	Mar-25	Jun-25	Sep-25	Dec-25	Mar-26
Target	87.50%	87.50%	87.50%	87.50%	87.75%	88.00%	88.25%	88.50%
Result	88.0%	88.5%	88.7%	88.00%	91.9%			

% Treatment completion rate for substance abuse

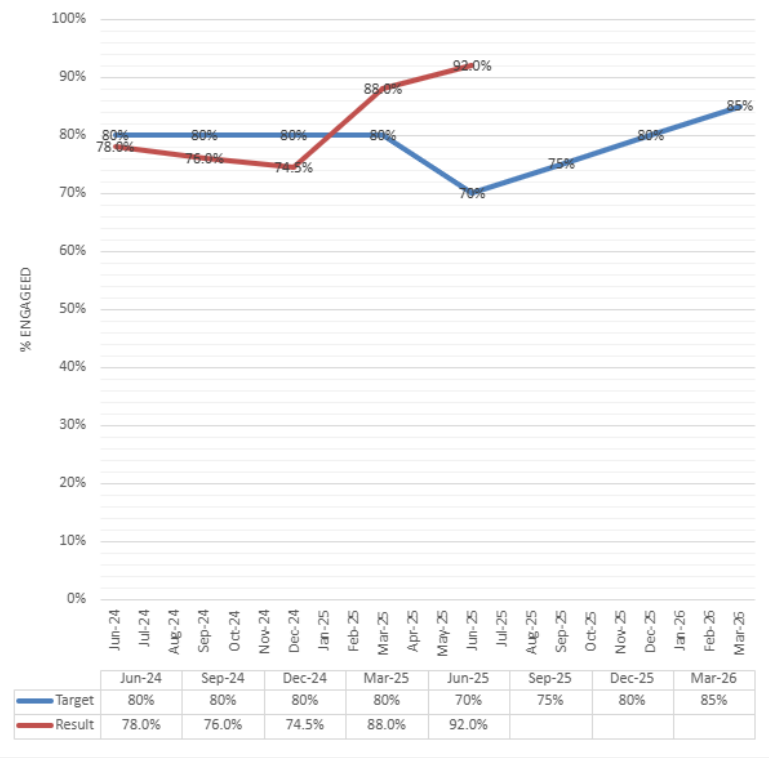


	Jun-24	Sep-24	Dec-24	Mar-25	Jun-25	Sep-25	Dec-25	Mar-26
Target	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%	93.00%
Result	96.4%	96.7%	95.7%	97.9%	97.9%			

Number of health aspects completed by pre-school settings in Hywel Dda UHB



% of schools engaged in an 'active offer' in Hywel Dda UHB



What are the key risks?

- **Risk 1884:** There is a risk that the HDdUHB Public Health Team may struggle to support the Health Board's priorities for 2025/26 or fulfil statutory functions, including responding to acute outbreaks, due to limited capacity. Only two of four consultants are currently in post, with a locum/fixed-term consultant covering two days per week until November 2025. A new Consultant of Public Health will commence in September 2025. This is a Directorate risk, with a current score of 16.

What are your recommendations for the Committee?

The Directorate is making good progress against planning objectives, despite capacity gaps, particularly at the consultant level, which have contributed to budget underspend.

The committee is asked to:

- **RECEIVE ASSURANCE** on Quarter 1 progress for Planning Objective 10 – Population Health and the Directorate’s commitment to improving population health and wellbeing through embedding prevention and reducing inequities.