

CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 May 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Hywel Dda UHB Director of Public Health Annual Report 2022/23
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jo McCarthy, Deputy Director of Public Health
SWYDDOG ADRODD: REPORTING OFFICER:	Jo McCarthy, Deputy Director of Public Health

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

The Director of Public Health in Hywel Dda UHB produces an annual report for board, sharing key achievements over the past year. The board are asked to accept the report and note the content, which we hope will be useful for our new Director and ensuring further progress around the areas outlined going forward.

Cefndir / Background

In the 2020/21 Director of Public Health Annual Report we focussed on our inequalities agenda, and I am delighted to say we have now made progress in this area, with our inequalities options appraisal presented to board seminar in April and plans in place to take forward a number of streams of work.

In 2021/22 we presented a tribute to our Director of Public Health 2017-22 Ros Jervis and her influence on population health in West Wales.

In 2022-23 we have been without a Director in post, so as a team we have focussed on key relationships and partnerships which have helped us progress work around the cost-of-living crisis and a number of other priority areas for public health.

Asesiad / Assessment

We all know that eating healthy, taking regular exercise, and not smoking are important to prevent our risk of disease, but how can we keep these things at the top of our agendas when we are all struggling with acute situations and getting through the 'here and now'. When eating healthily or paying a heating bill are competing for finances, the heating bill will normally be the priority.

The answer to getting through this is, undoubtedly, strong partnerships. Alone very little can be achieved, but when we work in partnership, driving improvements together and building on the community spirit developed during the pandemic we are all stronger.

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The 2022-23 Hywel Dda University Health Board Director of Public Health Annual Report has been developed as a thank you to partners who have worked with the Public Health Directorate around the cost-of-living crisis response and a number of initiatives that simply wouldn't have been possible alone.

Public services in West Wales owe it to our population to continue to drive improvements together, responding to changing needs of people living in the area and ensuring that we do all we can to ease the most challenging of times.

The report covers partnership working through the cost-of-living crisis, our healthy weight focussed partnerships, our work in response to the war in Ukraine, work of the health equity group, our screening work with schools and important partnership working around our naloxone programme. We also cover emergency planning and health protection response work, outlining how key partnerships have enabled us to get through the pandemic.

Argymhelliad / Recommendation

The Board is asked to consider and accept the information within the Hywel Dda UHB Director of Public Health Annual Report.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr	Not Applicable
Cyfredol:	
Datix Risk Register Reference and	
Score:	
Galluogwyr Ansawdd:	Not Applicable
Enablers of Quality:	
Quality and Engagement Act	
(sharepoint.com)	
Double on Arranged de	Niet Augliegelie
Parthau Ansawdd:	Not Applicable
Domains of Quality	
Quality and Engagement Act (sharepoint.com)	
Amcanion Strategol y BIP:	4. The best health and wellbeing for our individuals,
UHB Strategic Objectives:	families and communities
Amcanion Cynllunio	7a Population Health
Planning Objectives	
Amcanion Llesiant BIP:	4. Improve Population Health through prevention and
UHB Well-being Objectives:	early intervention, supporting people to live happy and
Hyperlink to HDdUHB Well-being	healthy lives
Objectives Annual Report 2021-2022	
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Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Outlined throughout the report
Rhestr Termau: Glossary of Terms:	Terms are explained throughout the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd lechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	N/A, the Director of Public Health Annual Report comes directly to board.

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	N/A – the report is for information
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A – the report is for information
Gweithlu: Workforce:	N/A – the report is for information
Risg: Risk:	N/A – the report is for information
Cyfreithiol: Legal:	N/A – the report is for information
Enw Da: Reputational:	N/A – the report is for information
Gyfrinachedd: Privacy:	N/A – the report is for information
Cydraddoldeb: Equality:	N/A – the report is for information



Hywel Dda University Health Board Director of Public Health

Annual Report 2022/23



Introduction

2022 should have been a year of recovery and rebuilding for Wales and the rest of the UK following the difficulties of 2020 and 2021. However, as we are all aware, the financial situation and long term impacts from the pandemic have meant that in many ways the past 12 months have been some of the hardest many people have experienced.

The current cost-of-living crisis is more than an economic problem, it presents considerable and far-reaching challenges to the health and well-being of individuals and to communities across Wales. Lack of access to financial resources impacts negatively upon mental and physical health, being unable to afford sufficient food leaves people malnourished and being unable to keep a home warm leaves people at risk of developing respiratory diseases. Staggering rises in inflation and energy bills, alongside stagnating wages, have led to a dramatic rise in the numbers of people struggling financially.

When finances are so stretched, prevention becomes both the most important tool we have, and a luxury we often cannot afford. We all know that eating healthy, taking regular exercise, and not smoking are important to prevent our risk of disease, but how can we keep these things at the top of our agendas when we are all struggling with acute situations and getting through the 'here and now'. When eating healthily or paying a heating bill are competing for finances, the heating bill will normally be the priority.

The answer to getting through this is, undoubtedly, strong partnerships. Alone very little can be achieved, but when we work in partnership, driving improvements

together and building on the community spirit developed during the pandemic we are all stronger.

The 2022-23 Hywel Dda University Health Board Director of Public Health Annual Report has been developed as a thank you to partners who have worked with the Public Health Directorate around the cost-of-living crisis response and a number of initiatives that simply wouldn't have been possible alone. Public services in west Wales owe it to our population to continue to drive improvements together, responding to changing needs of people living in the area and ensuring that we do all we can to ease the most challenging of times.

Jo McCarthy, Deputy Director of Public Health, Hywel Dda UHB

on behalf of Ros Jervis, Director of Public Health, Hywel Dda UHB 2017-2022



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Partnership working through the cost of living crisis

Over the past year, we have all been surrounded on a daily basis by news stories about inflation, rising interest rates, spiralling food costs, energy bills at levels that were previously unthinkable, and predictions of a UK recession. This is a public health emergency, with far-reaching impacts on the health and wellbeing of individuals and communities across Wales.

There is plenty of evidence to show that the implications of unaffordable day-to-day living are devastating in health and wellbeing terms. Lower income families are most at risk from a higher cost of living simply because they have less money to spend in the first place. World Health Organisation estimates suggest that around a third of the higher number of deaths that already occur every winter, compared to summer, are due to cold homes. In a particularly cold winter or where energy prices are unaffordable, there is a significant risk that this will be even higher and we have seen both of these things happen in Wales this year as rising fuel bills coincided with one of the coldest winters on record. Increased poor health places greater strain on health services, already experiencing severe pressures as the NHS continues its recovery from the impact of the COVID-19 pandemic.

In Hywel Dda University Health Board, the evidence already showed us that our population would be hit hard by any economic crisis. Our 2020/21 Director of Public Health annual report warned that 25% of local children aged up to four years were living in poverty even before the cost-of-living crisis. Statistics published by the Bevan Commission in February 2023 showed the very

real implications of the economic situation for households in Wales. One in four said, when surveyed, that they had not been able to afford to heat their homes at some point during the winter. A quarter of households said they had skipped meals or cut portion sizes, and 21% had to reduce how much their child was eating. One in 10 people said they believed they were in danger of becoming homeless in the next three months.

As costs started to rise in the summer of 2022, Health Board colleagues working with families started raising concerns with the public health directorate. Stories included pupils coming to school hungry, families isolated from community groups and support networks as fuel costs rose and even children failing to attend hospital appointments because missing their free school meal meant missing the only guaranteed meal of the day. Meanwhile our workforce directorate was hearing worrying tales of the impact on our own staff, struggling to make ends meet despite having employment, and not qualifying for government support. The two directorates came together to form a Financial Wellbeing Group focused on mitigating the impacts of rising living costs for both our staff and community.



In a joint paper to our Executive Team, we asked them to support us in delivering some immediate actions to help our community and our staff. We received immediate agreement to provide a free hospital canteen meal to any child attending for an appointment who would normally have received a free school meal. The "Hapi" app already available to support staff health, wellbeing and progression at work was adapted to include advice on financial wellbeing and sources of help, from NHS discounts offered by retailers through to how to access emergency grants. We have also successfully secured funding to run community cookery sessions across the area, showing families how to prepare meals that are easy, nutritious, but also inexpensive.

As ever, this is a situation in which it is evident that we are strongest when we work together with our partner organisations across the Health Board area. In December 2022, we held a multi-agency workshop which was well attended by public and third sector organisations who worked with us to share best practice, share concerns and commit to tackling this crisis together. It was very clear that our partners recognise the very real impacts of rising living costs on the communities they work with, are keen to act, and welcomed protected time to identify the areas where we still need action. Together we mapped the support services already available to our local population and discovered many effective and important community initiatives already running. A key message from attendees was that local people, especially those who have never experienced financial hardship before, often have no idea what

support is available and may feel worried at needing to ask for help. A key next step will be working together to collate and publicise information on available sources of support through public-facing services across the area, to make sure that everyone in our community knows about the support available and can access it without embarrassment or hesitation.

Even before the cost-of-living crisis emerged, the Health Board had committed to a strategic objective around tackling health inequalities, which are unfair, preventable differences in health across the population and between different groups in society. In Hywel Dda, as in other areas of Wales and the UK, there are gaps in health and wellbeing between the least and most socioeconomically advantaged groups, and between the least and most vulnerable. We know that features of our area, such as rurality, contribute to these inequalities. This year, the public health team has developed an options appraisal for our Board to consider, setting the scene in terms of the health inequalities that exist in our local population and the different approaches that could be taken to reduce inequalities and improve the health and wellbeing of our communities. Running through this piece of work is a clear message that the cost-of-living crisis is exacerbating inequalities more and more as time passes and prices keep rising, and that this needs to be a priority area for action. By developing a clear and ambitious plan to make life fairer for everyone in west Wales, we can not only reduce health inequalities but also fight the cost-of-living crisis.



Camau lach / Healthy Steps

The stress and impact of the rising cost-of-living on families has led to the need for development of new innovative projects, including 'Camau lach'.

The early years are a crucial stage in development and have a lifelong impact on health and wellbeing. The first 1000 days, from when a baby is conceived to age two, can have a positive influence on how they develop, grow and learn and have an impact later in life. 'Camau lach' is a sixweek programme for parents and pre-school children encompassing eating healthy and living a healthy lifestyle. The project aims to give the best start in life by promoting health and wellbeing, reducing health inequalities and improving health outcomes for future generations.

The 6 weeks will include healthy cooking skills; educating families on budgeting; cooking from scratch; growing produce to utilise, recognising the importance of healthily living and addressing habits impacting health; keeping fit and active; the importance of outdoor activities improving physical health and mental wellbeing and introducing a healthier way of living for families by having fun together and learning language literacy and numeracy skills at the same time.

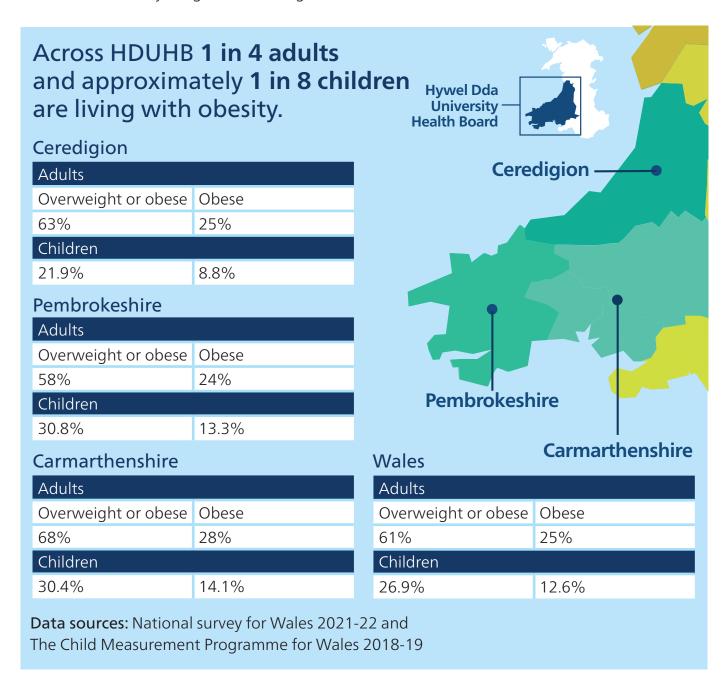
Children can learn about nutrition and its relationship to health from a very young age and that provision of a healthy balanced diet and healthy drinks is essential alongside being physical active. Establishing healthy habits early in life gives babies and young children the best possible start and reduces the risks of poor physical and emotional health throughout childhood and into adulthood.

This is a Hywel Dda University Health Board project working in collaboration with a wide array of internal and external stakeholders ensuring that it's fully inclusive and accessible to all, including seldom heard voices, using a whole system approach. Project delivery will be across the Hywel Dda region in key settings including family centres, community groups and settings, Cylchoedd Ti a Fi, Mudiad Meithrin, Flying Start, Early Years Teams and others. We will be working alongside Midwives, Health Visitors and GP clusters with referrals or self-referrals. The project will be open to all to attend and undoubtedly make a difference to the lives of our children and their support networks. Roll out of the Camau lach project will commence in April 2023.



Working together towards a healthy weight

Camau lach will support young families, but we know that we need to do more in the current, very difficult climate to help people in Hywel Dda make the healthiest affordable choices possible. We have too many people suffering poor physical and emotional health and at risk of dying early as a result of being an unhealthy weight. Research undertaken during the COVID-19 pandemic showed that being overweight or obese put people at greater risk of serious illness or death from COVID-19, as well as from many other life-threatening diseases, making the case for action on unhealthy weight even stronger.



The cost-of-living crisis has potential to move many more into food insecurity, a risk factor for obesity and other health problems and further increase obesity among those experiencing financial hardship, widening health inequalities. In the context of an already well-established obesity crisis, it has the potential to create the perfect storm, negatively impacting the health and well-being of our communities. This is a stark reminder of how the environment around us shapes and affects our health and wellbeing. In relation to maintaining a healthy weight, we know that excess weight is affected by environmental, societal and individual factors that interact across a system, making it a complex issue to address. A growing body of evidence, including Foresight's Tackling Obesities: Future Choices report (2007) and findings from Australia and the Netherlands suggest that a 'whole systems approach' could help us address complex problems like obesity.

Welsh Government has recognised that a Whole Systems Approach (WSA) to healthy weight is needed in Wales and have made it a key component of their 'Healthy Weight: Healthy Wales' Strategy (2019). The strategy sets out action to be taken over the next ten years to help prevent and reduce overweight and obesity in Wales, achieved through a series of two-year plans. The current 2022-24 plan reflects actions that should now be prioritised in light of what was learnt in the COVID-19 pandemic. It has seven priority areas:



Shape the food and drink environment towards sustainable and healthier options.



Promote and support families to provide the best start in life, from pre-pregnancy to early years.

Enable active environments and spaces to encourage more movement in daily life.





Enable our education settings to be places where physical and mental health remains a priority.



Remove barriers to reduce diet and health inequalities across the population.

Build on the development of equitable support services for people to become or maintain a healthy weight.



Enhance the development of the system of prevention which enables leadership at every level



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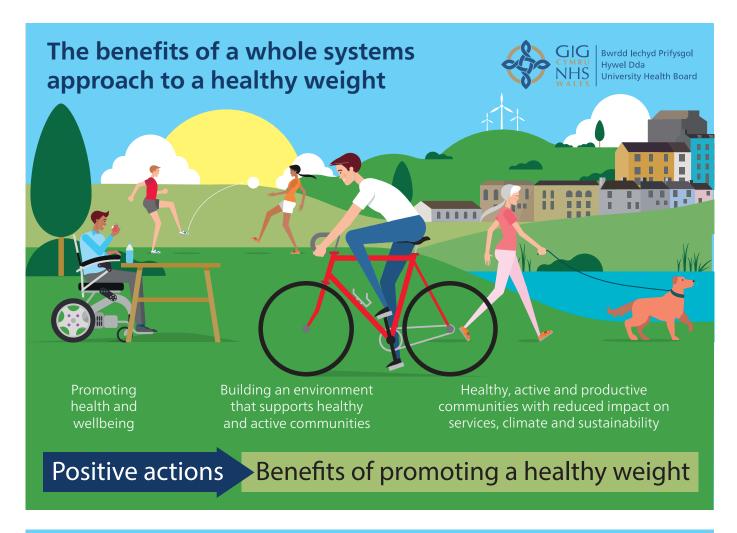
Swansea Bay and Hywel Dda University Health Boards (UHB's) are taking a regional Whole System Approach to healthy weight, aligned to the nationally agreed nine step approach developed by Public Health Wales (PHW). The focus of the work, based on an agreed definition is to:

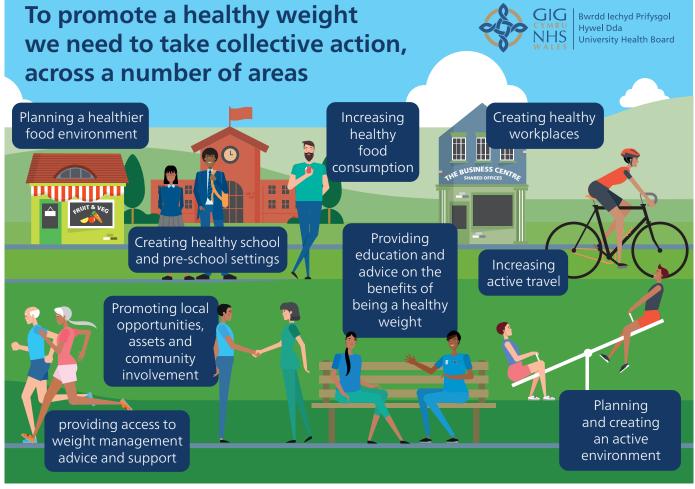
Step 9: Review respond to complexity through Step 1: an ongoing, dynamic and Step 8: Set Up flexible way of working. To Mobilise and and Buy In Manage bring together communities, partner organisations and stakeholders to share an Step 2: understanding of the reality System The necessary Step 7: Definition and of the challenge, consider Action Plan steps to embed Mapping how the local system is operating and where there the approach are the greatest opportunities for change. Stakeholders Step 3: agree actions and decide as a Step 6: System network how to work together Network **Narrative** in an integrated way to bring Analysis about sustainable, long term Step 4: systems change. Step 5: System Priorities Engagement and Goals

During January and February 2023, partners and stakeholders were invited to a series of workshops to begin to map the healthy weight system across each of the five Public Service Board areas in the Swansea Bay and Hywel Dda UHB regions. Workshops were held in each county across Hywel Dda and were attended by people representing Health, Local Authorities, Universities, the Third Sector, Natural Resources Wales and the Mid and West Wales Fire and Rescue Service.

From these workshops, a series of system maps illustrating the factors driving unhealthy weight locally have been developed and are currently being analysed. They will be shared back with partners in April to agree where they and communities could come together across the system, to drive change.

This is an important first step in improving our food and physical activity environment which has potential benefits, not only to individuals, but for the climate emergency and sustainability.





Developing and building strong partnerships to support people seeking sanctuary in the Hywel Dda UHB area from the war in Ukraine

March 2022 saw the opening of the first welcome centre in Wales for those fleeing the war in Ukraine. The centre was based in Llangrannog, Ceredigion and immediately a strong partnership was formed between health, local authority colleagues and leads and the Urdd centre, the location chosen to host the Welcome Centre.

Bringing over 200 people to a rural location in west Wales, organising screening and immunisations, registration with a local GP surgery and creating an environment that people felt safe and at home, with access to the services they needed, was a huge challenge. On site translation was organised, a health centre to assist people in those first few days was established on site, and local charities, organisations and Ceredigion Local Authority went above and beyond to ensure people seeking sanctuary were supported in many ways, such as connecting families with a local Mosque when requested and providing the children with on site education.

In the wider community where Ukrainian people seeking sanctuary were staying with hosts, our Community Development Outreach Team supported drop-in sessions and events and made sure people were registered with GP's and encouraged the building of friendships and social groups to support

wellbeing. The team also facilitated translation of information about NHS services, delivered health sessions on how to access services, supported families to make GP appointments and ring 111 for advice and linked with the 'Arts for Health' team to increase support beyond the core medical needs for those families staying with us.

The welcome that people from Ukraine had in west Wales is something everyone living in the area should be incredibly proud of. While the situation has been an extremely sad one, the community spirit and west Walian welcome people have received during such a difficult time is testament to the close communities we have in the area, especially during a time where everyone has been so financially stretched.





10/22¹⁰ 13/2

Case study

Maria arrived in the area after fleeing war in Ukraine. She was visibly distressed and found it difficult to engage with people due to the language barrier. Maria started attending the Multicultural drop in English lesson weekly, which the Community Development Outreach Team support. Prior to this she had no understanding of how to use the NHS and was worried about family members she had left behind.



credit: WalesOnline/Gayle Marsh

The Community Development Outreach Team supported by:

- **1.** Providing information that she needed in Ukrainian including Interpretation request cards.
- **2.** Providing information about mental health support in Ukrainian.
- **3.** Supporting Maria to meet others.
- **4.** Inviting Maria on the Wellbeing Walk.

Likely outcome without support provided:

- **1.** Her mental health could have deteriorated.
- **2.** She may not have a support network.
- **3.** She may not have attended events.
- **4.** If she was in need of medical attention or advice she maynot have been able to access it.

Outcome following receipt of support:

- **1.** Maria knew where to turn when she was struggling with emotions.
- **2.** Maria made friends and has developed her own peer support group.
- **3.** Maria is now confident about asking for interpretation at the hospital and GP surgery.

Working together towards health equity

Equity is the absence of avoidable, unfair, or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically or by other means.

The Hywel Dda Equity Advisory group was developed in April 2022 as a continuation of the successful Hywel Dda Vaccine Equity group. The group was adapted to ensure that we aim to identify, develop, and deliver support and services that are accessible to all. The group focusses on all elements of Health Board delivered programmes and initiatives, identifying areas of inequity and where possible be innovative and transformative in addressing the inequities across the Health Board

The group has representation from multiple partners and organisations across Hywel Dda University Health Board and has established a dialogue and a route for all concerns to be raised. The relationships developed through this partnership has allowed for significant improvement and flexibility in how we have advise services across the Health Board area, recognising inequities that impact on fair access and fair opportunity, and discussing and raising awareness of barriers and challenges that disproportionately affect the whole of our population.

One of the groups the multidisciplinary health equity group have worked with is local people who identify as part of the Gypsy or Traveller population in the region. One site has been particularly isolated due to COVID and other ongoing issues. The Community Development Outreach Team, through the work of the health equity group, have been working with the Local Authority to open a community room to run health information and wellbeing sessions. Two winter well-being events have been held in partnership with Citizen's Advice, Gypsy and Traveller Wales, the Fire Service and the Community Immunisation team. Regular presence of the Community Development Outreach Team on sites allows people to have issues resolved such as being unable to read or understand clinical letters and confusion surrounding appointments.

Overview of situation:

A woman from the Gypsy community lives in a caravan with limited space for cooking and storing food. She also lived on a piece of land with no facilities. She was feeling "run down "fat" and unhealthy" and was relying on expensive take aways. She was worried about spiralling costs of daily fast food as well as seeing an effect on her health

Likely outcome without support provided:

The lady may have continued to struggle paying for takeaways and making unhealthy choices which were affecting her health and wellbeing

Outcome following receipt of support:

The Community Development Outreach Team had a conversation with the woman about how she could make cheaper more nutritious meals at home using fresh ingredients, but she was concerned about her lack of facilities and space. The team made a referral to FRAME, where she was given a slow cooker and receives recipe cards. She is also able to access the community fridge which has fresh food available. She has been able to cook healthy slow cooked meals which has saved her money and saves on space. This has not only benefited her but her whole family.

Close links between the health equity group and partners working in vaccination has ensured that those living in the region who are homeless or at risk of homelessness have had opportunity to receive vaccinations. The community development outreach team, Community Immunisation Team and Local Authority colleagues working in housing teamed up to facilitate drop in sessions, allowing people to access vaccination outside of General Practice or mass vaccination centres. Subsequently partnership working with Dyfed Drug and Alcohol Service has led to an increase in services attending out of hours drop ins. Alcohol and smoking reduction messages have been shared and appropriate referrals to services made.

Responsiveness and listening to communities are key to making improvement that actually matter to people living in west Wales. Wellbeing walks were developed in response to a Syrian lady sharing with the Community Development Outreach Team that she was lonely due to not having the social connections she once had. In Llanelli, the walks happen in partnership with the Llanelli Multicultural Network, where a women's wellbeing walk is held, known as "walkie chattie" by some attendees. The walks are an opportunity for women to come together, talk, have fun and they provide a safe space for women to have conversations around health. The walks have led to more women being active and thinking about what they eat. They have also been a way of connecting several women from around the world and facilitating development of friendship groups. People with clinical skills have been identified and signposted to the Health Board's recruitment opportunities, and a Ukrainian language walk was set up to welcome new arrivals and show them the local area, including places to buy healthier food.

A Partnership Approach To Saving Lives

Illicit drug related deaths have fallen across Hywel Dda since the 2020 COVID-19 pandemic. This reduction is in no small part due to impactful partnership work between the Area Planning Board (APB), Dyfed Powys Police, the Community Drug and Alcohol Team (CDAT), the Dyfed Drug and Alcohol Service (DDAS) as well as our three local authorities, the Health Board's mental health service, local housing providers and probation. One of the key areas of improved provision has been the increase in access to Naloxone across Hywel Dda.

Naloxone can reverse the effects of opioids and prevent death if used within a short period following an heroin overdose. The effects of Naloxone in reversing opioid overdose last for about 20 minutes. As this is shorter than the duration of opioid effects, the person may return to overdose state when the effects of Naloxone wear off, meaning more than one dose of Naloxone may be required. Importantly, Naloxone has no effect on someone who does not have opioids in their system, and it is not a treatment for opioid use disorder. Examples of opioids include heroin, fentanyl, oxycodone codeine, and morphine.

Naloxone should be given to any person who shows signs of an opioid overdose or when an overdose is suspected. Naloxone can be given as a nasal spray or it can be injected into the muscle, under the skin, or into the veins. When used as a nasal spray, it is known as Nyxoid.

Research has shown that a high proportion of overdoses are witnessed, yet medical help is often not sought or is sought too late. Witnesses at an overdose event are, however, often willing to intervene so providing training in cardiopulmonary resuscitation, recognition of overdose and the use of Naloxone by a wide range of people, can improve chances of an individual surviving an opioid overdose. Studies indicate that at least 50% of opiate users will have experienced a non-fatal overdose at some point in their lives and are at increased risk of suffering a fatal overdose.





14/22¹⁴ 17/25

The APB is driving the increase in access to Naloxone via the following projects:

Frontline Dyfed Powys Police officers carrying Nyxoid (see case study). The lifesaving pilot started on December 1st, 2021, and is now being rolled out to all police staff

Spike on a Bike - Naloxone and needle exchange services made mobile for the most rural of communities

A&E and Minor Injury Units - the opportunistic distribution of Naloxone via the Alcohol Liaison Nurse service

Peer 2 Peer Naloxone distribution (see case study)

Community pharmacy pilot - the first of its type in Wales

Probation staff carrying Nyxoid - part of an all-Wales pilot

Housing officers carrying and deploying Naloxone successfully

DYFED POWYS POLICE AND NALOXONE: A LIFE SAVING PARTNERSHIP

PC Gareth Rees, one of several officers across the force carrying nasal spray Nyxoid in a trial launched on Wednesday, 1 December, was called to a man shouting for help on the floor in Llanelli late at night on December 9th, 2021. By the time PC Rees arrived, the man was unconscious, and his breathing was laboured. Identifying this as a sign he was suffering an overdose, PC Rees administered the spray.

"Within five to ten seconds he was conscious," said PC Rees. "It's quite amazing how it works so quickly, it definitely made a difference for this man."

Chief Inspector Christina Fraser, who is driving the pilot forward for Dyfed Powys Police, said the force had been using Naloxone within custody suites for many years but the introduction of the Nyxoid nasal spray, meant officers could easily use it whilst out on patrol. She added: "We have trained officers on a voluntarily basis to carry and utilise Nyxoid spray as part of our first aid provision. We went live with the pilot on 1st December, and I am pleased to report that we have been notified of its first successful use as early as the 9th December. It is really heartening to see the use of Nyxoid making a difference in saving peoples' lives."

Dyfed APB Prevention and Population Health Improvement Strategy Manager, Craig Jones, said, "Response officers are quite often the first on scene to an overdose and by providing them with Naloxone, they will be able to save lives. Numbers of drug related deaths in Hywel Dda have fallen since 2020 and we see this as another initiative to keep the data moving in the right direction."

PEER 2 PEER: A CASE STUDY OF CHANGE

'Peer 2 peer naloxone' is a model for Naloxone distribution which doesn't rely on people accessing drug treatment services. In the project a team of 'peers' (people with lived experience of drug issues) will proactively take Naloxone out on the streets, approaching people who use opiates. They will give out the drug and train people in how to use it there and then. The simple mantra behind the concept is that an overdose is reversible, death is not.

DDAS is the first point of contact for any adult over the age of 18 with a drug or alcohol problem and covers the counties of Carmarthenshire, Pembrokeshire, and Ceredigion. This service is also for anyone concerned about another's drug and/or alcohol use. DDAS also leads on the Peer 2 Peer Naloxone programme

Following a successful period of residence in local authority housing, a female DDAS service user started to increase her social and volunteer activities and signed up to deliver the Peer 2 Peer programme in Llanelli. She found this training with other peers across Dyfed very informative and started delivering Naloxone training across the Aberystwyth area to peers and professionals. The volunteer role has inspired her to do the very best she can.

She has continued to develop her skills, confidence, and motivation. In addition to the peer work, she has also sat on a DDAS Ceredigion interview panel to help recruit a new DDAS Active Treatment worker and assist in training multiple pharmacists Naloxone and overdose awareness. She has expressed her interest in becoming a BAROD Volunteer and is currently working towards this. She is now in her own tenancy and her son recently celebrated his first birthday with no social services special measures in place. A real success story as she is no longer a peer, as she is not in service, but continues to help others.



Working together in Emergency Preparedness, Resilience & Response (EPRR)

Strong partnerships are never as important as during an emergency, and the EPRR team have formed close and effective partnerships with several colleagues and organisations to keep communities in West Wales safe when there are threats such as pandemics, extreme weather, service disruption or unexpected events.

Responding to a range of risks, major incidents and emergency situations requires a workforce that has understood the challenges faced by the Health Board. These challenges need to be assessed and planned for, and our response trained and exercised in order to prepare for and mitigate the risks as far as possible whilst minimising the effect on health or patient care.

These may involve a range of situations from extreme weather events to infectious disease outbreaks, pandemic events (COVID-19) or full-scale major emergencies. The Civil Contingencies Act (2004) requires the Health Board to show that it can deal with such incidents while maintaining services.

The EPRR team works on a multi-disciplinary, multi-professional basis across the health board to develop relevant emergency and business continuity plans, and facilitate a comprehensive training and exercise programme to support our response.

The EPRR team also plays an integral part in Dyfed Powys Local Resilience Forum (LRF). The LRF is a multi-agency partnership made up of representative from local public services including emergency services, local authorities, the wider NHS, Natural Resources Wales and others. Also responding to the criteria set out in the Civil Contingencies Act 2004, the LRF aims to plan and prepare for localised incidents and catastrophic emergencies. It works collaboratively to assess identified national risks and identify potential local impact and produce multi-agency, regional plans to either prevent or mitigate the impact of any incident on local communities.



¹⁷20/25

Partnerships through the pandemic

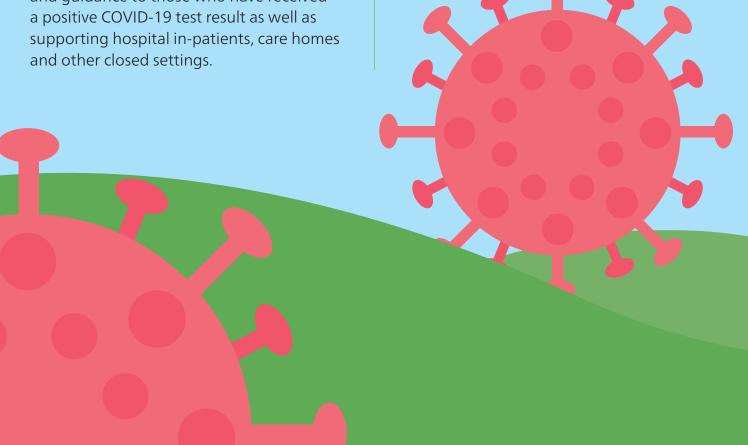
One of the biggest challenges in recent years for those working in the emergency planning and local resilience spaces, as for us all, has been the COVID-19 pandemic. More than ever excellent structures and communication between multiagency teams was essential.

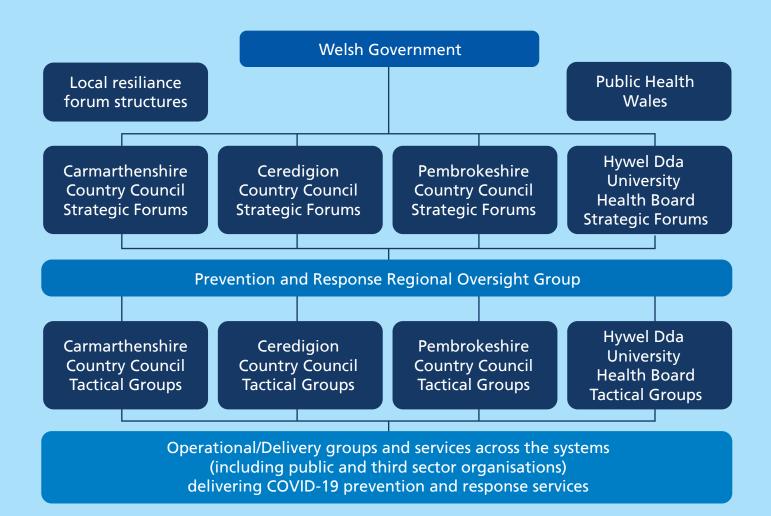
Since its launch across Wales on 01 June 2020, "Test, Trace, Protect" has been a fundamental part of the Welsh Government's strategy to control the spread of COVID-19. Regional partnerships were developed with Health Boards, Local Authorities and Public Health Wales to lead this process collaboratively. Across the Hywel Dda region we built on the strong foundations of existing projects and partnerships to establish an approach that has evolved since the start of the pandemic and is still as strong today as we have transitioned into a "COVID stable" state and a new normality.

Contact tracing in Hywel Dda has been undertaken by a Regional Response Cell working closely with the three local authorities Tracing Teams to provide advice and guidance to those who have received a positive COVID-19 test result as well as supporting hospital in-patients, care homes and other closed settings.

Guidance and policy changes have been frequent as new evidence, variance and situations have arisen. The teams have worked across organisations sharing knowledge and working together to meet these challenges. From care homes. hospitals, workplaces big and small, community groups and clubs, and even learning about maritime regulations for the ships that came into port, the partnership rose and flexed to meet each situation.

Testing has been steered by a multidisciplinary cell which has developed a dynamic, innovative approach to implementing Welsh Government guidance on both Health & Social Care staff testing and the Patient Testing Framework.

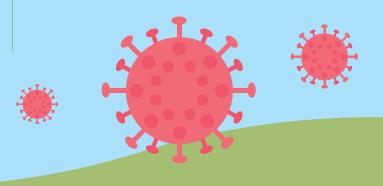




In March 2022 the Welsh Government launched its transition plan "Together for a Safer Future" and this highlighted the vital role that TTP played in reducing the transmission of COVID-19 throughout the pandemic. In line with this plan, a Regional Strategic Oversight Group has now superseded the role of the Regional Incident Management Team (IMT) and county IMTs in steering this process as we move forwards. Partner contributions are positive and have maintained a "can do" attitude to responding to on-going

challenges. The focus now is to develop multiagency agile health protection teams which can respond to a range of health protection challenges and disease outbreaks.

Key to getting through the pandemic has been not just responding to COVID-19, but preventing it through measures including vaccination.



¹⁹22/2!

Hywel Dda University Health Board has supported the mass vaccination delivery in Wales since the commencement of the vaccination programme, seeing high uptake rates amongst our population. In 2022/23 we planned a Winter Respiratory Vaccination Programme which promoted how we would work together in this unprecedented season to minimise the co-circulation of influenza (flu) and COVID-19, protect those most at risk, and reduce the impact of respiratory illness on health and social care services over the winter period. Maintaining the pace of vaccine delivery has been challenging but made possible due to our partnership working across Health Board, Primary Care Contractors, Local Authority and volunteers.

Key work with stakeholders included, and continue to include regular meetings between senior leaders in the Health Board, in Government and Local Authorities, effective communication with the police and education colleagues, cascade systems to book vaccinations, use of social media and public briefings to share accurate information and more.

Hywel Dda UHB is using a blended approach in order to deliver the COVID-19 Vaccination Programme at pace, and accommodate the logistical issues caused by the vaccine characteristics, vaccine supplies, our demographics and rurality and changing national policy and advice.

Throughout all vaccination programmes partnership has been key to success. From identification and securing of suitable vaccine centres, volunteers to support with all aspects of vaccination including car parks and queuing systems, maximising uptake in groups who may struggle to access vaccination through links with Local Authority colleagues and working with education to ensure schoolsbased programmes for flu vaccination have been a success.

The National Immunisation Framework for Wales, published on 25 October 2022, describes the recent integration of the COVID-19 and flu vaccination programmes, bringing together the strategy, planning and governance of these programmes. The Framework reflects on the success of this and sets out the ambition for continued vaccination transformation, with a deepening of integration, to improve service provision for everyone in Wales. There is no doubt that to ensure a vaccination programme which enables good patient experience, benefits from a national infrastructure and produces value-based outcomes, that strong partnerships with our communities and colleagues across a number of sectors will be essential.

Collaborating to prevent cancer - Moondance Cancer (Bowel Cancer) Learning Programme for Schools

The programme is an investment to influence long-term behaviour change within younger generations by educating them about cancer, cancer treatment, and the connection to healthy behaviours. It also explores intergenerational engagement, by raising awareness of bowel screening, signs, and symptoms amongst the wider school community, including family learning and awareness raising.

The programme has a fully developed curriculum package with supporting materials, for delivery across our schools. Two schools in Pembrokeshire, Haverfordwest High VC School and Milford Haven Comprehensive School are currently running the programme in partnership with the Moondance Cancer Initiative, Pembrokeshire Health Promoting School Scheme and Hywel Dda University Health Board.

An annual Virtual Fair brings all participating schools together, consolidating curriculum learning about bowel screening and introducing learners to all the partnerships involved in the project and the role they play in raising awareness of and treating cancer. Contributors include Innovation and the Tritech Institute discussing Artificial Intelligence and Machine Learning within Healthcare, and Research and Development both from Hywel Dda University Health Board along with the Public Health Wales Screening Team. Careers in Health is also a

major topic aiming to inspire and inform the next generation of the wide variety of health-related roles and careers within the Welsh NHS.

Schools play a vital role in the well-being of learners, families and their communities and the programme showcases an excellent example of partnership working across education, health, and the wider community. Young people learning about health and keeping well through school and with their families is a great way of raising awareness and working towards preventing future ill health in our communities.

For more information about the Moondance Cancer Initiative's Bowel Cancer Programme here: https://moondance-cancer.wales/ projects/bowel-cancer-programme



²¹24/2!

Thank you

This report has allowed us chance to touch on just some of the partnerships the Directorate has been part of over 2022-23. There are many areas that we hope to update you on in 2024!

We are incredibly fortunate to be part of our motivated forward thinking public service boards (PSBs) in west Wales and have had opportunity to contribute to the PSB led wellbeing assessments and plans, and look forward to working with partners to see the plans through to fruition. Our work on Ros' vision of 10,000 meaningful conversations with people across Hywel Dda UHB is ongoing and would not be possible at all without third sector partners helping us better understand our population, and 2022 saw development of the regional preventions board, a multiagency partnership strengthening the prevention agenda across the region.

As a Directorate we would like to thank partners for their support and understanding following the retirement and incredibly sad passing of our Director of Public Health, Ros Jervis, in June 2022. As we look to the future and new public health leadership going forward, we continue to benefit from the incredible way in which Ros inspired everyone around her to think about health in a different way, putting prevention at the heart of everything we do. The relationships Ros formed with key partners have allowed us to make progress in a number of critical areas this year, and we have been able to be far more effective thanks to her lasting influence.

We can always do better and will continue to strive towards doing all we can to ensure the best health for the population of west Wales.

Thank you for taking the time to read our 2022-23 Hywel Dda University Health Board Director of Public Health Annual Report.

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