Our Year 2019-2020
Annual Quality Statement
Welcome

Our purpose, through our Long Term Strategy, is to work to achieve a healthier future for Wales. We have seven strategic priorities, which help us to focus on our aim and gain the support of our staff, partners and the people of Wales.

This Annual Quality Statement, which we have written for the public, gives us the opportunity to share examples of our work and the improvements we have made, including by working with others, during 2019-2020. We present it to you as ‘Our Year 2019-2020’, under the headings of our priorities. As it is not possible to cover the vast range of all of our work in this report, you can find more information on our website. Examples of our work are taken from the period April 2019 to February 2020. From February 2020 onwards, our entire organisation went into action to support the response to the Covid-19 pandemic. Next year’s report will explain this in more detail, and will include a ‘look back’ section from February 2020 covering our full response to Covid-19 (given the scale and pace that began in January and continues at the time of writing this report).

We are a national public health institute providing a wide range of services, programmes and functions, which includes working with communities, schools, workplaces, other agencies and international partners. We provide national screening programmes and microbiology services, and help to protect the public from infectious diseases and environmental dangers. We also support the NHS to improve outcomes for people who use its services. We provide evidence and advice to support and influence government health policies, and work with international colleagues to learn from other countries and share our experiences in Wales.

We aim to continuously improve the way we work and the quality of the work we do. Involving the public and getting feedback from them and other organisations is one of the main ways of achieving this, together with using the best evidence and information that is available. It is important that we listen to people and help them to play a key role in shaping our work and influencing policy developments, which affect decisions about the lives we want to lead. ‘Our Year 2019-2020’ provides an opportunity for us to ‘tell the story’ of good practice and initiatives we are taking forward, as well as highlighting what went well and where we are working to learn lessons and improve what we do.

We have taken on board the sustainable development principles identified in the Well-being of Future Generations (Wales) Act 2015 and the ‘five ways of working’ that support this. The importance of involving the public and working with them is part of our core values and, on behalf of the Board, we would like to thank individuals and groups who have taken the time to contribute their experience and knowledge, helping to shape what we do to improve health and well-being in Wales. We welcome their ongoing support and commitment to achieve a healthier future for Wales.

We would also like to thank all of our staff and key stakeholders who helped us to produce this ‘Our Year 2019-2020’ (our annual quality statement), particularly our Young Ambassadors, who have helped us with many of our activities and developments throughout the year.

Finally, we would like to give a special thanks to all of our staff over the last few months of 2019-2020. Since the beginning of the coronavirus pandemic, our people have been tremendous in going above and beyond in their roles and working hours and in working closely and supporting the public, our partners and the Welsh Government. We cannot thank you enough. Wales is very lucky to have you all.
The Melin Homes residents and Crownbridge pupils were asked to describe what health and well-being meant to them, how they felt about it and what makes them happy.

Working with the residents and schoolchildren, Marion ran three workshops that demonstrated a range of painting techniques which encouraged those taking part to be spontaneous and try something new. They made collages, which were put together by Marion to create images that reflected well-being.

Melin resident Edna said, “I have really enjoyed the art sessions. I wasn’t confident of my drawing skills, but it didn’t matter because art is really good for your mental health.”

A support worker at Crownbridge School said, “This has been a big deal for our pupils. They have all really come out of their shells and the artwork produced has been amazing.”

Fiona Williams from Melin Homes also worked on the project. She said, “We were so excited to work with our partners at Public Health Wales on this project and it was an honour to be asked. Health and well-being is really important at Melin Homes for both our staff and residents. It was great, and every week residents and pupils from Crownbridge blew me away with their creative talents. We had singing, laughter, and a real buzz around the room.”
This ‘Our Year’ document (Annual Quality Statement) reflects our work during 2019-2020. Together with our partners, our wonderful people delivered a significant amount during the year. We have been putting our strategic priorities in place across the organisation, and this report highlights some examples of the work our teams have done throughout the year.

However, in January 2020, Covid-19 arrived in Wales and since then we have had to adapt our work programme and organise our people at a pace and scale we have never experienced before. During February, Covid-19 became our single priority, and through February and March we had to suspend all other activities – including our screening programmes – due to its impact across Wales.

Since that time, our people have gone into action right across the organisation and established a number of new functions and activities. These have required new training and skills for our staff, and many of them have been involved in activities that are new to them. During January to the end of March our focus was on increasing Covid-19 testing across Wales, supporting the NHS in swabbing people with symptoms, tracing people who had been in contact with people who tested positive for Covid-19, providing information for the public and advice to the Welsh Government, and monitoring cases to guide our decisions and actions.

Because the pandemic has continued at a great pace, this report does not cover our activities during February and March that related to Covid-19. We will include those months in next year’s Annual Quality Statement.

Influencing the wider determinants of health

The wider determinants of health are social, economic and environmental factors that influence health, well-being and inequalities. By influencing how national and local policies and strategies relating to these determinants are designed and put in place, we will improve people’s well-being and reduce inequalities in health.

The main determinants of health and well-being are our family, our friends and communities, the quality and security of our housing, our level of education and skills, availability of good work, money and resources, and our surroundings.

For more information, go to: https://bit.ly/3c3hNB1
Improving capacity to influence wider determinants

The Public Health Network Cymru is now a part of our new Wider Determinants of Health Unit. The network has more than 1,400 members, including from education and research, health boards, private sectors, local authorities and the third sector (charity and voluntary groups).

These models identified ways of influencing these determinants in order to improve health and reduce inequalities. This work, agreed by public health directors in Wales, will guide our priority of building a healthier Wales, and is being supported by evidence of effective interventions for good and fair work and of the relationships between housing and health.

Developing our approach to improving health through action on good and fair work and on housing

As a result of a joint commitment between local and national public-health teams, we have developed models for improving how people can take part in good and fair work and have a safe, sustainable place to live that supports their health.

The network has involved its members through highly rated events such as Homelessness: Reversing the Trauma, bringing together policy, practice and research. This event was jointly chaired by John Puzey, Director at Shelter Cymru, and Rudy Harries, student and activist, who shared his experiences of homelessness, learning disability and arts and health. The network shares information through e-bulletins, podcasts, the website and social media.
How Brexit may affect the health and well-being of people across Wales

In September 2019, we published a report which looked at evidence that has emerged since January 2019 on the possible real-life effects of Brexit on people’s health and well-being. The report built on a previous health impact assessment which had analysed in detail the possible positive and negative effects of Brexit in the short, medium and long term.

The report ‘The Public Health Implications of Brexit in Wales: A Health Impact Assessment Approach, A rapid review and update’ found that the likelihood of positive effects has remained relatively stable since the previous analysis in January 2019. Meanwhile, the likelihood of some negative effects, such as those relating to food standards or environmental regulations, has increased.

The report also identified new possible effects of Brexit, both positive and negative, such as opportunities to increase exports due to the reduced value of the pound, and a negative effect on people’s mental health and well-being.

The review’s findings suggest that while Brexit will affect the general population as a whole, there could be groups of people who may be particularly affected, for example those who are elderly and have chronic (long-term) conditions or disabilities, people who need access to medication and health and social care services, and people who may also be on a low income. These groups of people are more likely to be affected negatively by Brexit, for example through the effect of inflation on food and fuel, the supply of medicines and medical devices, and staffing issues in the services they use. The report suggested that doing further research and actively involving vulnerable groups was critical to developing ways of protecting their health and well-being, regardless of the final outcome of Brexit.

For more information, go to: https://bit.ly/2ZyZBdm

Wales Violence Prevention Unit

The Wales Violence Prevention Unit (VPU) was set up in 2019 through Home Office funding. Its aim is to prevent all forms of violence in Wales through a public-health approach. The main team is made up of members from police forces, the Police and Crime Commissioner, Public Health Wales, Her Majesty’s Prison and Probation Service (HMPPS), Home Office Immigration, and the voluntary sector. In January 2020, the Public Health Institute, Liverpool John Moores University (LJMU), were commissioned to support the initial development of the VPU evaluation framework and provide standards to measure long-term success against.

The unit focuses on three key areas

- **Research and analysis**: The team commissions and carries out research into the effects of violence and what works to prevent violence, to support its partners to deliver interventions based on evidence.
- **Programmes and interventions**: The unit commissions service providers in Wales to use a public-health approach to deliver programmes and interventions focused on preventing serious youth violence.
- **Operational response and public-health advocacy**: The team works with colleagues in the health, police and criminal justice sectors to make sure responses to violence are guided by a public-health approach to prevention.
Cost of poor housing

Working in partnership with Community Housing Cymru and the Building Research Establishment (BRE), we published the 'Making a Difference Housing and Health’ report.

The report looks at the effect of housing quality, unsuitable homes and homelessness on health and well-being in Wales and identifies value-for-money priority areas where action is needed.

Of homes in Wales, 18% are an unacceptable risk to health, and poor housing costs Welsh society over £1billion a year. There is strong evidence that poor housing is associated with poor physical and mental health.

Among its recommendations, the report urges action to deal with the causes of ill health associated with poor-quality housing, such as cold and damp, and fall hazards. Priorities include improving the heating, thermal efficiency and ventilation of homes, including insulating older houses.

The report says that upgrading homes could lead to 39% fewer hospital admissions for circulation and lung conditions, and every £1 spent on improving warmth in vulnerable households could result in a £4 return on investment. Improving ventilation also has benefits, including improving asthma in children, which in turn is likely to reduce absences from school.

Improving mental well-being and resilience

We will help everybody realise their full potential and be better able to cope with life’s many challenges.

Improving mental well-being helps individuals to realise their full potential, cope with life challenges, work productively and contribute to their family life and community.

Good mental well-being positively affects physical as well as mental health and can influence related inequalities in health. Recent studies on adverse childhood experiences (ACEs) have shown how ACEs may affect adult life. They have also highlighted the factors that build resilience (reduce the impact of ACEs) for individuals and communities. Resilience is a key part of mental well-being.
Adverse childhood experiences (ACEs) are traumatic childhood experiences remembered throughout adulthood. They include verbal, mental, sexual and physical abuse, and being raised in a household where domestic violence, alcohol abuse, hostile parental separation or drug abuse is present.

The ACE Support Hub, funded by the Welsh Government since 2017, was set up to help tackle ACEs, create an environment for change, and support individuals, communities and organisations to become ACE-aware.

This year we launched #TimeToBeKind, a four-week campaign to encourage changing attitudes towards those suffering with ACEs, create a more ‘ACE-aware Wales’ and encourage the compassion and understanding needed so everyone can play a role in helping to make children more resilient. The campaign reached 2.5 million people and had positive feedback from members of the public. This was a great initial awareness-raising exercise, which we can build on.

The ACE Support Hub has supported using information about ACEs in public- and third-sector services, including education, youth work, housing, asylum seeker and refugee support and sport. We are developing work with higher-education providers, substance-misuse counsellors and young carers. We are making Wales a world leader in tackling, managing and preventing ACEs.

For more information about the ACE Support Hub, contact:

ACE@wales.nhs.uk  @acehubwales  acehubwales

Early Action Together

Early Action Together is an initiative between public-health, policing and criminal justice partners in Wales. It has been funded by the Home Office Police Transformation Fund for the last three years.

The programme has brought together professionals to look at the root causes of criminal behaviour, so that police and criminal-justice staff can intervene early when dealing with vulnerability issues. At the heart of the work is understanding the effect of adverse childhood experiences (ACEs) and a trauma-informed approach to policing.

More than 6,400 police officers and partner staff have had ACE training. Work continues through the Barnardo’s ACE Coordinators, who are using what they have learned in their everyday operations to provide advice and support to police officers and staff.

Early Help models have been developed across all four police forces, and are showing signs of working well with local systems and improved joint decision-making when making referrals. The programme is being evaluated, and a number of research reports will be published in 2020 to show the benefits of this work, how cost-effective it is, and how a public-health approach to policing and criminal justice in Wales will be put in place in the future. A learning network has been developed to share professionals’ knowledge, findings from research, best practice, and information about partner organisations to help continue to support the work of the programme and an ACE-aware workforce www.aces.me.uk.

Did you know?

The principle behind trauma-informed policing is that police officers will be better able to interact with the people involved in a criminal investigation if they have an understanding of trauma and the effect it has on a person’s emotional and mental well-being.

The key change introduced by trauma-informed policing is that police officers should approach a victim or a perpetrator by asking ‘What has happened to you?’ rather than ‘What is wrong with you?’
Brexit – farmers’ health and well-being

We wrote a report with the Mental Health Foundation which provides a frank insight into concerns that farmers and farming organisations have about the possible effects of Brexit on health and well-being in their communities, as well as the wider challenges the sector faces.

In the report, farmers and farming organisations talk openly about their concerns, including how viable farming is as a business, financial pressures, regulatory and administrative burdens, difficulties with planning for the future, isolation and loneliness, and a farming culture that can be a barrier to asking for advice and support from others.

The report says more action is needed to prevent uncertainty, to protect against the negative impact of Brexit on mental well-being, and to promote health and well-being among farmers.

It recommends reducing the number of administrative regulations, involving the farming community in developing a viable vision for the future of farming in Wales, and making sure rural communities are not left behind when accessing and using digital technology to support their health.

Promoting healthy behaviour

We will understand what drives unhealthy behaviour and make it easier for people to make healthy choices.

Health-related behaviour is influenced by a range of factors, including the social, economic and physical environment and mental well-being. By making it easier for people to adopt healthy behaviour we will reduce the likelihood of disease. We will also help narrow the gap in health inequalities arising from long-term conditions such as obesity, cancer, heart conditions, stroke, respiratory disease and dementia.

For more information, go to:
A healthy heritage: 20 years of the Welsh Network of Healthy School Schemes

The WNHSS (Welsh Network of Healthy School Schemes) was launched in September 1999 to encourage the development of local healthy school schemes within a national framework.

The World Health Organization (WHO) recognises WNHSS’s key role in promoting the health of children and young people. The scheme, which we run on behalf of the Welsh Government, has been in place across Wales since 2000. It takes a ‘whole school’ approach to health and well-being, working across 22 local authority areas in Wales to promote the health of all those who learn, work and play within the school.

The scheme supports schools to help pupils and staff control the parts of the school environment that influence their health, as well as formally teaching pupils about how to lead healthy lives.

Introduced in 2009, the independently assessed National Quality Award is the highest honour a nursery, primary, secondary or special school can achieve through the WNHSS. Over 13% of schools in Wales (210 in total) have achieved the award, which recognises excellence in whole school practice across a number of health-related themes, including:

- food and fitness (nutrition and physical activity);
- mental and emotional health and well-being, including staff well-being;
- personal development and relationships, including sex and relationships education;
- substance use and misuse, including alcohol, smoking and drug use and misuse (legal, illegal and prescription);
- the environment, including eco-initiatives and improving the school and the wider environment;
- safety, including a variety of topics such as child protection, sun safety, internet safety and first aid; and
- hygiene across school and non-school settings.

On the 20th anniversary of the scheme, Vaughan Gething, Minister for Health and Social Services, Welsh Government, said:

“The Scheme has been a huge success story; take-up has been phenomenal with over 99% of schools actively involved in Wales.”

“20 years is a significant milestone and demonstrates how vital the continued support of schools is in ensuring young people can make healthy choices. The programme also supports our vision for a healthier Wales to improve health and well-being with a focus on prevention.”

Did you know?

The Healthy and Sustainable Pre-Schools Scheme has now supported over 1000 pre-school settings across Wales to gain the Healthy and Sustainable Pre-School Scheme National Award. Settings include nurseries, day-care centres, playgroups, childminders and family centres. The total represents just under a quarter of settings registered with Care Inspectorate Wales.

For more information, go to: https://bit.ly/3bYR9tb
Help Me Quit

Each year, treating smoking-related illness costs NHS Wales £302 million. Smoking is still the single biggest cause of preventable ill health in Wales, accounting for two-thirds of cases of chronic respiratory disease. Help Me Quit is the NHS Wales stop smoking support system, and has ongoing development programmes around marketing, workforce development and quality of service, which are all designed to give more smokers the best chance of stopping.

The Help Me Quit programme is run alongside efforts to discourage smoking in Welsh society and make it normal not to smoke. Also, the information that Help Me Quit has gathered from smokers in Wales has contributed to a significant increase in smokers accepting NHS support to quit – up by 31% since 2015 to 15,600 in 2019. There have been significant decreases in smokers being helped to stop in other parts of the UK.

The success of Help Me Quit, and particularly the quality of the work of our creative-agency partner, was rewarded with the coveted public sector award at The Drum Digital Advertising Awards Europe 2019. The Drum is a global media platform and the biggest marketing website in Europe, so has considerable influence in the industry. The award reflects the excellent work we have done as a partnership in:

• using our social-marketing expertise;
• identifying our target audience;
• using behavioural science – recognising biases and ‘competition’ and building motivation; and
• developing highly effective creative messaging, delivered through the best mix of media channels.

We are continuing to work with the agency to improve Help Me Quit, including through recent technological advances to target how we market the programme, which has led to 50% more people asking us to contact them (January 2020) compared with 2019.

For more information, go to: https://bit.ly/32uKuUq

Securing a healthy future for the next generation

We will work with parents and services to make sure all children in Wales have the best start in life.

Welsh policy defines early years as the period from pregnancy to seven years of age. A child’s early years are an important time to make sure they have good outcomes later in life, including better learning, access to good work and a fulfilling life.

For more information, go to: https://bit.ly/3xzmtV
The first 1000 days are critical to giving children in Wales the best start in life

The first 1000 days - during pregnancy and up to a child’s second birthday - represent a critical time. It is the period when we see the most rapid phase of brain growth and the foundations of our brain connections develop. Experiences during pregnancy and early childhood affect our future health and well-being and can contribute to inequalities in outcomes. Positive and protective influences in the first 1000 days can improve health and well-being outcomes across the course of our lives.

The First 1000 Days Programme aims to support the early years system to make sure that we are doing all that we can to support families in Wales at this crucial time in a child’s development. This includes working to build and share the best available evidence for improving outcomes and reducing inequalities in the first 1000 days.

In 2019-2020 the programme has been promoting the first 1000 days complex system model. The model is based on the findings of three separate evidence reviews looking at the factors that influence:

- emotional, social and cognitive development;
- the risk of being exposed to adverse childhood experiences; and
- infant mental health.

It brings together in a single model the complex system of connected child, parent, family and wider environmental factors that encourage nurturing relationships and environments where children can explore, play and learn, develop well and lay the foundation for future health, well-being and prosperity.

On 2 December 2019 the programme held an event, chaired by Professor Jean White, Chief Nursing Officer for Wales and Chair of the First 1000 Days Programme Board, on ‘Creating the best start in life for children in Wales’. The event was an opportunity to highlight the critical importance of the first 1000 days and share the programme’s recently developed social model of parenting support and the soon-to-be published Evidence into Practice Briefing on the importance of family relationships in the first 1000 days. Both of these products build on key elements within the complex system model and are designed to help local areas and national policymakers prioritise the factors that are likely to have the biggest effect on improving outcomes and reducing inequalities for children in Wales.

In August 2019 the First 1000 Days Programme was reviewed by our Quality and Safety Committee. They considered the programme’s achievements so far and identified its priorities for the future. These have been used, alongside plans for a comprehensive programme evaluation, to guide the next phase of the programme’s work plan.

Did you know?

Social and emotional development means how children start to understand who they are, what they feel and what to expect when interacting with others. It means they can:

- form positive and lasting relationships;
- experience, manage and express emotions; and
- explore and get involved with the environment.

Positive social and emotional development is important. It influences a child’s self-confidence, empathy, the ability to develop meaningful and lasting friendships and partnerships, and a sense of importance and value to those around them. Children’s social and emotional development also influences all other areas of development.
In September 2019, Designed to Smile (D2S), the national programme to improve the oral health of children in Wales, celebrated its 10th birthday. Designed to Smile involves a wide range of professionals, including health visitors and other early years services. The programme aims to help start good habits early by giving advice to families with young children, providing toothbrushes and toothpaste, and encouraging going to a dental practice before a child’s first birthday. The programme also runs nursery and school-based tooth-brushing and fluoride-varnish programmes for children, to help protect their teeth against decay.

To mark the occasion and celebrate the successes of the programme, the D2S team held a week-long celebration event - National Designed to Smile Week. Between Monday 16 September and Friday 20 September, schools and nurseries across Wales were encouraged to carry out activities focused on good dental health, such as holding a school assembly or taking a class trip to a local dental practice.

To support schools and nurseries, the D2S team put together an ideas pack for teachers and nursery staff. There was also a national drawing competition asking children across Wales to design a 10th birthday card for Dewi, the D2S dragon. D2S is targeted at children in areas where levels of tooth decay are highest, with the aim of making sure that every child in Wales begins school decay-free and smiling.

For more information, go to: https://bit.ly/2ZHxI8x
More than 99% of newborn babies screened for serious diseases

Between April 2018 and March 2019, 31,048 newborn babies in Wales were tested for serious but rare medical conditions. The figure, as shown in the latest annual report from Newborn Bloodspot Screening Wales (NBSW), represents 99.5% of the eligible babies in Wales.

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The screening programme, managed by our Screening Division, offers all eligible five-day-old babies screening for the following rare diseases, as recommended by the UK National Screening Committee.

- Congenital hypothyroidism
- Cystic fibrosis
- Inherited metabolic disorders:
  - medium-chain acyl-CoA dehydrogenase deficiency
  - phenylketonuria
  - maple syrup urine disease
  - isovaleric acidaemia
  - glutaric aciduria type 1
  - homocystinuria
- Sickle cell disorders

The test is carried out by taking a small sample of blood from the baby’s heel. The sample is then screened for rare but serious diseases that respond to early intervention to reduce rates of disease and deaths.

In the period covered by the report, the programme identified 55 cases of serious conditions, including phenylketonuria, cystic fibrosis, congenital hypothyroidism, maple syrup urine disease and sickle cell disorders.

Ruth Lawler, Head of Maternal and Child Screening at Public Health Wales, said:

“It’s very pleasing to see that uptake of the test remains so high in Wales.”

“Most babies screened will not have any of the conditions. However, for the small number that do, screening means that they can receive early specialist care and treatment which can improve their health and prevent severe disability or even death.

“Expectant parents can find out more about the test and conditions screened for, and how the sample is taken, by speaking to their midwife or by reading the newborn bloodspot screening information leaflet.

“This is made available to women in pregnancy and after the birth and can also be downloaded from the Newborn Bloodspot Screening Wales website.”

Did you know?

You can learn more about any of the rare but serious diseases mentioned in the story by visiting https://www.nhs.uk/
Protecting the public from infection and environmental threats to health

We will use our expertise to protect the population from infection and threats from environmental factors, working with others to reduce these risks to human health.

Our priority is to use our expertise and resources to protect people from serious infection and the health effects of environmental problems such as air pollution and climate change. This will involve early detection, good planning, and delivering services alongside others to provide an effective response.

For more information, go to: https://bit.ly/3c3hNB1

Air quality

Air pollution is the largest environmental risk to health. Last year we increased our efforts to work with others to help reduce air pollution, risks and inequalities.

Building on guidance for the NHS in Wales, which we jointly published with the Welsh Government, we worked to raise awareness and encourage action to improve air quality across the NHS in Wales and among partner agencies and the public. We signed up as a champion supporter of national Clean Air Day in June 2019, publishing and promoting key messages around problems, risks and solutions through videos, media statements and posters.

We also committed to the Healthy Travel Charter in Cardiff, pledging to increase the number of our staff who walk, cycle or use public transport to get to work, as well as reduce the use of vehicles when commuting and providing our services. We are now using this approach in all our other offices, making sure we stress how practical measures such as these can not only help reduce air pollution but also benefit health and well-being.
To influence policy in Wales, our Environmental Public Health Team made a significant contribution to the Welsh Government’s new Clean Air Plan (issued for consultation in December 2019). This has meant that improving and protecting people’s health is now a priority in the plan and its proposals, and is helping to make connections between air quality, wider public health, planning, travel, and sustainability policy and practice. Developing the plan was a significant milestone, but we must now help to deliver it.

We will continue our efforts to deliver the plan’s priorities, which are mainly to improve local air-quality management, set new health-based exposure standards and develop a Clean Air Act for Wales. We will also continue to carry out research and surveillance to produce new evidence. A good example of this is the project we led last year in the Cwm Taf Morgannwg area (involving the health board, local authorities and Natural Resources Wales) to design and test new approaches to assessing the wider public-health risks of air pollution. It is important that we constantly try to understand problems and what we can do to address them. The more we know, the better prepared we are to contribute to action in Wales and share our experiences with others across the UK and internationally.

Did you know?

With the support of our Health and Sustainability Hub, we are working to make our organisation more environmentally sustainable, by focusing on healthy travel, buildings, energy and waste, the goods and services we buy, reducing plastics and protecting nature. Central to this work is involving our staff, demonstrating leadership, and learning from other organisations, with a focus on promoting the ‘Be the Change’ sustainable steps which we can all take in the workplace. We are sharing our experiences across the wider NHS and public sector in Wales through regional workshops and a national conference.

This work is an important part of supporting Welsh legislation, including the Well-being of Future Generations Act and the Environment Act (2015), and responding to targets set by the Welsh Government, including the decarbonisation of the public sector (reducing greenhouse gas emissions produced as a result of transport).
Cryptosporidium

Cryptosporidium is a microscopic parasite that causes gastrointestinal illness. One of the ways it is transmitted is through contaminated water. Most waterborne infections are controlled by drinking-water treatment, such as filtration and chlorine disinfection. But cryptosporidium can sometimes get through the system and is able to survive as it is resistant to chlorine. When this happens, the public may be at risk if the strain of cryptosporidium is one that is infectious to people. Some strains of cryptosporidium are only infectious to certain animals.

Water suppliers test for cryptosporidium by looking for evidence of the parasites under the microscope, using special dyes to show typical features. For more information, go to: https://bit.ly/35ES8xq

However, this doesn’t tell them if the cryptosporidium is infectious to people, where it might have come from, or how it is related to human illness. This is where we come in. We were funded by UK Water Industry Research to support the water industry’s response to cryptosporidium events by improving the methods for identifying the strains of cryptosporidium captured on the microscope slides – a process known as slide genotyping. You can find more details about the project here: https://bit.ly/2HasGWx

By carefully removing the material and oocysts from the slide, extracting their DNA, applying an amplification process known as polymerase chain reaction and looking at the DNA sequence, we have been able to identify the cryptosporidium strains in slides containing just single numbers of oocysts.

This work will help the water providers, water-quality regulators and public-health professionals by helping to understand where cryptosporidium in water has come from, whether it could be infectious for humans. This in turn will improve how the water industry responds to contamination events, investigates sources of contamination, manages water catchment areas and supports investigations into outbreaks.

In January 2020 we held a stakeholder event for water companies, water-testing labs, public-health professionals and suppliers of reagents (substances or compounds added to a system to cause a chemical reaction, or added to test whether a reaction occurs). We have produced guidance for the water industry on how and when to send samples for slide genotyping.

Did you know?

All of our microbiology labs have yearly accreditation assessments by United Kingdom Accreditation Service (UKAS).

All of our clinical laboratories are accredited to UKAS ISO 15189: 2012 Medical Laboratory standards, and all of our food, water and environmental laboratories are accredited to UKAS ISO/IEC 17025: 2017 Testing Laboratory standards.

For more information on UKAS, go to: https://www.ukas.com/
Care Home Cymru

In response to the Older People’s Commissioner report ‘A Place to Call Home: Impact and Analysis’ (2018) and ‘A Healthier Wales’ (2018), the Welsh Government commissioned our Improvement Cymru team to develop an improvement programme to support older people living in care homes. As a result, the Care Home Cymru programme has been working closely with care homes across Wales to train staff in continuous quality improvement.

This training will mean staff can identify areas where care and services could be improved and will also give staff the skills to record and evaluate the changes and improvements that care homes frequently make without even realising it. Most importantly, the training and support offered should make sure that improvement is permanent.

During the first phase of Care Home Cymru, almost a quarter of staff from the 16 care homes that were originally involved with the programme have taken part in the foundation level of quality improvement training and been awarded their Improving Quality Together (IQT) Bronze certificates.

Also, 22 IQT Silver projects are currently underway on areas of improvement, including advanced care planning, reducing social isolation, improving how information is recorded and increasing the choice of meaningful activities for care-home residents.

Supporting the development of a sustainable health and care system focused on prevention and early intervention

We will work alongside our partners to support the development of sustainable and accessible health and care systems focused on prevention and early intervention.

We will support models of care that focus on prevention, screening, timely intervention, and continuous improvement and care, to help as many people as we can.

For more information, go to: https://bit.ly/35J8NA2
By involving everyone in the care home, both staff and residents will have direct input into improving how care is given and received. As Care Home Cymru moves into its second phase, we hope the care homes already taking part will encourage and support the new care homes in quality improvement.

Care Home Cymru is the first programme to have worked directly with care homes to develop quality improvement, and the first improvement programme to have worked across both health and social care settings. Most importantly, the quality improvement programme could directly affect the home life of hundreds of residents across Wales, using ideas from not only care-home staff but also residents.

Did you know?

We have published a report ‘Improving winter health and well-being and reducing winter pressures in Wales - A preventative approach’. The report aims to describe the effect of winter and cold weather on health and well-being in Wales and how this affects health and care services, in a way that can help plan for the future. It includes information on the causes of ill health during winter, the reasons why some people are more likely to become unwell during colder months, and solutions that have been shown to help reduce winter-related deaths and illness.

The report provides insights from stakeholders from a range of sectors in Wales and summarises what we have learned in a plan that supports developing a long-term preventative approach to reducing the effect of winter on health and well-being and on care services. The plan recommends actions in the following four areas:

• Strengthening prevention
• Health and care service interventions
• Community approaches
• Research priorities

Supporting reduction in waiting times

Our Improvement Cymru Cancer Diagnostics programme supports the priorities of the NHS Wales Cancer Implementation Group and Wales Cancer Network to help health boards and trusts to improve the ‘single cancer pathway’ announced at the end of November to transform the way cancer patients are referred for diagnosis and treatment, and speed up waiting times. At the Royal Glamorgan Hospital, we are supporting the radiology department to assess their services and identify ways they can improve.

Our team has spent time with the service, observing patient and information pathways, contributing to an in-depth data analysis and using ‘design thinking’ (see below) to come up with over 60 ideas for change.

The detailed analysis and support helped the team think about the steps in their process which could improve patients' experience. The radiology team could then start asking questions of their system.

We worked with the local team to develop action that would make improving the system a priority.
Early testing, data analysis and feedback have helped us try out changes in initial ‘quick win’ areas, such as improving the vetting process (the process of making sure requests for appointments are valid and necessary) and clearing the backlog for reporting on images. These have been supported by two-weekly learning sessions with the local multidisciplinary expert group. We’ve started a pilot scheme to teach a multidisciplinary team ‘patient flow’ principles. This will further support the team to really understand their system so that they can redesign it to meet demand and make sure all patients are diagnosed as quickly as possible.

Did you know?

‘Design thinking’ is a process used to solve problems and develop new innovations. It is increasingly being used to support quality improvement, as it is a useful way of tackling complex problems that are not very well defined. The process starts by understanding people’s needs and has five stages. The five stages are:

- Empathise
- Define
- Ideate
- Prototype
- Test

Building and mobilising knowledge and skills to improve health and well-being across Wales

We will develop the skills, policy, and knowledge based on evidence to help us and our partners improve health and well-being.

We play a key role in supporting evidence-informed policy and practice that has been informed by evidence. We can add value to how joined-up policy is developed, put in place and evaluated, at a local, national and international level, in a way that supports protecting, improving and promoting health and well-being and reduces health inequalities across Wales.

Did you know?

Mobilising knowledge is making information accessible and easy to use.

For more information, go to:
Over 60 and online

We worked with Bangor University to publish Population Health in a Digital Age: Patterns in the use of social media in Wales. The report provides a valuable insight into how people in our communities use social media.

Of people in Wales, 77% aged 16 and above use one or more social media platforms, and 65% use social media every day. Many over 60s are online and actively using social media, which can be an important tool for public health.

Not everyone has access to the internet in Wales, but for those that do (87% of people in Wales aged 16 and above), the report found that:

- almost all (99.6%) of 16- to 20-year-olds were on social media (people tended to use social media less as they got older, but use still remained high in older age groups); and
- 76% of those aged 60 to 69, and 60% of those over 70, were using one or more types of social media.

Lead author Dr. Jiao Song, Public Health Statistician, Research and Evaluation Division, Public Health Wales, said:

“It’s interesting that social media is often considered something for younger people, but the report’s findings have highlighted that a high proportion of those in the older age groups do engage with social media.”

Dr Alisha Davies, Head of Research and Evaluation for Public Health Wales, said:

“We need to continue efforts to address inequalities in access, but recognise that social media may offer a platform to reach a wider audience and engage differently with populations about health.

“At present, health systems largely use social media as a channel to share information, but this approach does not capitalise the reason social media works - the networking element. Looking to the future, health systems need to learn how to engage in conversations on such platforms to support attentiveness and appeal with their audiences; to address beliefs, attitudes, intentions and behaviours for health.”

The report used information collected in the 2018 Digital Technology and Health survey—a representative survey of 1,252 residents in Wales aged 16 years and above. The survey included questions on access to the internet and digital technology, people’s health, and population statistics. It also asked people for their views on sharing health-related information on social media.

For more information, go to: https://bit.ly/32yuAbv
WHO Collaborating Centre

We have a national focus as well as a global responsibility, as stated in our 10-year International Health Strategy. Our World Health Organization (WHO) Collaborating Centre on Investment for Health and Well-being has been working to establish Wales as a ‘European and global influencer nation’. We have organised high-level meetings between WHO and the Welsh Government.

We take an active part in developing key programmes and documents which aim to achieve healthy prosperous lives for all – in Wales and beyond. We are working closely with our partners from different sectors and countries across the world to improve health and well-being, prevent childhood trauma, reduce health inequalities and make the case for investing in prevention.

Welsh Public Health Conference 2019

Over 800 people came together for the 2019 Welsh Public Health Conference (WPHC) at the International Conference Centre in Newport on 17 and 18 October 2019.

Over two days, people from across a huge range of different professions and sectors created a fantastic atmosphere and space to experience, think, network, discuss, generate and share solutions to help build a healthier Wales.

The theme this year, ‘Building a healthier Wales, Transforming a nation to create healthier lives’, provided an opportunity to focus on the drivers of health and well-being that go beyond healthcare to contribute to healthier communities worldwide.

Highlights of WPHC 2019 included the following:

- Minister for Health and Social Services, Vaughan Gething MS, launched the Healthy Weight strategy.
- The International Health Coordination Centre launched the NHS Wales Charter Implementation Toolkit.
- Chris Brown of the World Health Organization explained the importance of addressing inequality in health and shared some specific ways to do this.
- Our speakers – Ann Beynon OBE, Professor Laura McAllister, Derek Walker and Councillor Huw David – held a discussion, asking ‘Is Wales brave enough?’
- Chief Medical Officer Dr Frank Atherton opened day two, which featured our brilliant panel session with Rachel Royall (IBM), Mark Palmer (Google), Professor Peter Bradley (Public Health England) and Rebecca Campbell (S3 Advertising).
- Pupils from Y Pant Comprehensive School joined us once again this year, making sure the voice of young people was heard loud and clear.
- Spotlight sessions included contributions from Transport for Wales, ARUP, Cardiff University, South Wales Police, WYG and many more.

If you have a suggestion on what you would like to see at future public-health conferences, we would love to hear from you.
Did you know?
The drivers of health and well-being are four broad factors (other than genetics) that influence our health over the course of our lives. These factors are:

- the social and economic environment (whether we have access to, for example, a quality education, job opportunities, safe neighbourhoods, social support, and healthy foods);
- health behaviour (the choices we make that affect the length and quality of our lives);
- clinical care (any involvement with the healthcare system, ranging from preventive activities like vaccines and screenings to the treatment of particular diseases and conditions); and
- the physical environment (the natural and built environments, including transport systems, buildings, and public facilities).

There is a growing recognition that, to meet the health challenges and opportunities facing the people of Wales, we need to manage a large shift towards preventing ill health.

To support this, we have developed a proposal to encourage action across public, private and voluntary sectors. The proposal, **Building a Healthier Wales**, forms the prevention part of ‘A Healthier Wales - our plan for Health and Social Care’. It represents the vision within ‘A Healthier Wales’ and helps drive the ambitious transformation outlined in ‘Prosperity for All’, the Well-being of Future Generations Act and the Social Services and Well-being Act (2015).
Building a Healthier Wales

Has five key priority areas that can have the greatest effect on transforming health and well-being in Wales, through focusing on prevention and early intervention.

1. Tackling the wider determinants of health
   Focuses on health and housing and employment, and considers planning infrastructure and the environment.

2. Giving people the best start in life: making the most of our early years

3. Encouraging healthy behaviours
   Focuses on reducing smoking, promoting a healthy weight and increasing physical activity.

4. Minimising the effect of clinical risk factors and the burden of disease
   Focuses on the community, particularly primary care, with the emphasis on normal blood pressure, blood glucose, body mass index (BMI) and cholesterol.

5. Promoting transformational change
   Focuses on supporting changes in our culture, leadership and behaviour that are needed to deliver this change in how we work, our delivery models, and partnership working.

We considered these priorities at a Health and Social Care Leadership event with partners from across sectors in March 2019. All partners agreed them in principle.

The Minister for Health and Social Services has set up a Building a Healthier Wales Co-ordination Group, made up of multi-agency partners to drive the priorities forward.

Building a Healthier Wales Co-ordination Group and Project Group

Huw David, Health and Social Care Spokesperson for the Welsh Local Government Association (WLGA) and Leader of Bridgend County Borough Council, chairs the Co-ordination Group.

The purpose of the group is to focus on the shift to prevention, which would reduce the amount spent on treatment (currently £8 billion), with the initial focus on helping to put these joint priorities in place at a local and regional level. It is supported by a project group.

Cymru Well Wales members are keen to provide a broader connection and network for Building a Healthier Wales with third-sector organisations.
Funding for preventing ill health in the early years

One of the early successes of the Building a Healthier Wales partnership has been securing additional resources for preventing ill health. The Minister for Health and Social Services confirmed that an extra £7.2million will be made directly available to health boards (£6.120million) and Public Health Wales (£1.080million) from 2019-2020 onwards, to support the prevention of ill health in the early years.

The allocation letter, sent to Health Board Chief Executive, Public Health Wales Chief Executive and chairs of regional partnership boards, states that

"jointly agreed targeted prevention schemes will need to demonstrate clear alignment with the themes and priorities agreed by the Building a Healthier Wales Strategic Coordinating Group".

The work of Building a Healthier Wales has been paused during the Covid-19 pandemic.

Enabling functions for delivering our Long Term Strategy

Our ‘enabling functions’ provide professional advice to support our work and are critical to delivering our Long Term Strategy. As an influential part of the organisation, they provide support in the following areas: robust governance, corporate planning, financial stewardship, our staff, and digital services.

During 2019-2020 we identified that we needed to transform these functions through new approaches and strategies. These include developing a new People Strategy, setting out a performance management framework and investing in how we deliver complex change programmes. We have also developed new approaches to our communications, innovation, involving staff and the public, and improving the quality and impact of our services.

We will continue to transform these functions, focusing on:
- adopting new ways of working;
- using information and knowledge; and
- prioritising our digital service to improve outcomes.
Our People Strategy

Our workforce is at the heart of our ability to deliver our services, programmes and functions. In January 2020 we published our first ever long-term People Strategy, setting out our vision for all those who work in, or want to work in, Public Health Wales.

We wanted to look towards 2030 and consider how the world might change and what that could mean for us. We worked with staff and stakeholders, including our new starters, our Young Ambassadors and our diversity networks, to make sure everyone had a voice.

They identified a number of key themes which will be important for us to work on. These include leadership and culture, employee experience (inclusion, well-being and Welsh language), flexible working, training and development and greater use of digital technology.

Our approach to Welsh language

Care provision and language go hand in hand. We are working hard to improve the availability and quality of our Welsh-medium services, by putting in place the Welsh Language Standards Regulations and ‘More Than Just Words’, the Welsh Government’s plan for Welsh-language services in health, social services and social care.

We are making progress, but there is still much to do in 2020-2021. We will publish our five-year plan to increase our ability to provide our screening, Help Me Quit, health protection and microbiology services in Welsh.

We are also working hard to integrate the Welsh language into our organisation’s culture. We want to see and hear more Welsh in our workplaces and see a more active approach to encouraging the use of both English and Welsh in our day-to-day activities. In 2019 we consulted our workforce on our ideas for a policy on our use of the Welsh language. We amended the policy in the light of the feedback we received and we will publish it in 2020. We launched our Welsh Language Promotion Programme for staff in September 2019, with our first Welsh Language Week and our new monthly bilingual newsletter Iaith Pawb. We continue to encourage and support our staff to learn Welsh and we support our learners through our learners’ network.
Diversity and Inclusion Week

In January, we held our second Diversity and Inclusion Week. This involved a range of speakers, a cake sale and Rainbow Day, where we invited everyone to dress in bright colours to show their support for LGBT+ colleagues.

Stonewall Index

We took part in the Stonewall Workplace Equality Index (WEI) benchmarking exercise again this year. The WEI is the standard employers use to measure their progress on lesbian, gay, bisexual and transgender inclusion in the workplace.

We were delighted to learn that we were placed 100th out of 502 organisations that took part. Since we started to take part in the Stonewall WEI we have made great improvements every year. In 2017 we were placed 338th, then in 2018 we jumped to 173. Our latest result means we are entering the Stonewall Top 100 Employers list for the first time.

This a clear indication of how we are becoming a more inclusive organisation and making big improvements every year. Although the WEI looks at how inclusive we are for LGBT+ staff, making further improvements means we can improve equality and inclusion across the business so we can continue to be more inclusive.

All events were very well attended, both by staff in our Cardiff office in Capital Quarter and other offices around Wales through Skype. Feedback from the events has been very positive, and there is a lot of support for more events.
Time to Move

Amser i Symud (AIS)/ Time to Move (TTM) gives our employees the opportunity to use one hour (or an amount of time proportionate to how many hours they work) of paid work time each week to do a physical activity of their choice.

The initiative was launched as a one-year pilot in June 2018. The pilot was designed to help us understand the benefits, issues and any barriers to putting the initiative in place in the longer term. Staff could choose how to take the time depending on their own needs (and bearing in mind the needs of the service) and following agreement with their line manager. For instance, they could take the time in a one-hour block or divide it up across the working week. The type of physical activity was not set, and they were able to choose a different activity each week.

There are well-known benefits for mental well-being from taking physical exercise, which the pilot has shown. Findings from the pilot suggest that providing paid work time to take part in physical activity is a successful way of improving employees’ health and job satisfaction on a large scale and has led to positive outcomes. We evaluated the pilot using online questionnaires, physical health measures and focus groups, and we’ll be looking at how we can take this further in 2020.
Virtual Hospital

We joined with Cardiff and Vale University Health Board staff to put on a Virtual Hospital event for Year-10 GCSE science pupils at Whitchurch High School.

We held a similar event in 2017, and due to great feedback from the pupils and schools we were asked to do it again the following year.

Volunteers included Cardiff and Vale University Health Board nursing staff, lab scientists from Haematology, and Biochemistry and Public Health Wales Microbiology lab and medical staff. Each volunteer had a specified station through which the students moved to search for information with which to diagnose a patient suffering from a mystery illness.

All the groups rotated around to find their answers (the two possibilities were either tuberculosis (TB) or HIV infections). The pupils found from their analysis that the patient had HIV. They learned about sexually transmitted infections and symptoms, and how HIV is no longer a life-threatening disease. So, amongst the fun, there was a serious message for them to learn and understand.

Staff and pupils enjoyed these sessions and we received a lot of positive feedback, and a request to return next year!

Our Young Ambassadors Programme

Our Young Ambassadors Programme approach was approved at our formal Board meeting in July 2019. The programme aims to give young people across Wales the opportunity to develop skills and knowledge to support and influence how the Public Health Wales Strategy is delivered and improve health outcomes in their own communities.

We recognise that involving children and young people in our work will provide new ways of looking at how we think about health and well-being, while increasing their knowledge and understanding of the broader issues which affect the health of individuals, communities and the wider population. They can then take this with them into other opportunities they have at local and national levels.

The programme also helps to support the importance of the voice of children and young people in achieving the ambition of the Well-being of Future Generations (Wales) Act and supports the principles laid out in the Rights of Children and Young Persons (Wales) Measure 2011. This places children’s rights and the requirement for children and young people to be listened to and treated with respect at the heart of policy and how services are developed and delivered. (Core aim number five states ‘I will be listened to and treated with respect’.)

We are looking forward to putting our programme in place over the next year and providing further updates on the young people’s progress and how they influence and affect our work and opportunities.
Supporting quality and improvement in Public Health Wales

We have started work to review our approach to quality and improvement. This will also help us to begin to meet the aims of the Health and Social Care (Quality and Engagement) (Wales) Act, which became law in 2020 and will be put in place over a two-year period. This will fix quality at the centre of everything that we do.

We are also looking at ways of taking forward ‘Our Approach to Engagement’, a strategy of how we will engage with the public and train our staff on good practice for engagement activities, which aims to provide greater consistency and quality to the important matter of how we involve and consult the people of Wales and those who use our services. Our screening programmes have worked closely with community health councils, and this has been invaluable in making improvements which matter to people.

Putting Things Right

Putting Things Right is the name of the guidance which supports NHS requirements for all organisations to have arrangements in place to effectively handle concerns, complaints and incidents and what to do when things have gone wrong. We must also show how we improve services and the experiences of those who use our services, and how we learn lessons.

This year, there has been a significant improvement in how we handle incidents. In August, our Board approved a fully revised Incident Management Policy and Procedure, and this was accompanied by a new risk-assessment process to make sure that we can understand both the effect of an incident and the risk of it happening again. Our performance in responding to concerns within agreed timescales has improved during 2019-2020.

We plan to work over the coming year to further improve our arrangements for ‘Putting Things Right’, most importantly to make sure we can promptly learn lessons and put improvements in place.

One example of where we have learned a lesson this year and taken action to improve is our Diabetic Eye Screening Wales service.

A person taking part in the screening service was assessed as lacking capacity to give consent, and the screening did not go ahead as planned at that time. The person’s daughter was unhappy that the screening did not take place as planned and about the lack of information about the issue of consent. As a result, our screening invitation letter now includes advice to contact the service before an appointment if the person who was due to attend is unable to give consent. We also now advise people to bring the power of attorney document for personal welfare to the clinic.

We are also doing a considerable amount of work to improve our consent policy, taking legal advice to make sure we are keeping to the law while better meeting the needs of potentially vulnerable people who use our services. This work is due to be completed in 2020.
Learning from our mistakes

Most people who use our services, programmes and functions have a positive experience and we regularly receive compliments. These are very welcome and we pass them on to the staff involved. However, occasionally we make mistakes, and when this happens it is essential that we fully investigate to make sure we learn from our mistakes to prevent them from happening again.

The Keith Evans review of concerns (complaints) handling within NHS Wales, ‘Using the Gift of Complaints’, makes a number of recommendations to help NHS Wales organisations improve how they learn from and respond to mistakes.

An example of how we have looked more closely at how we are responding to learning from concerns is provided by way of an audit which was carried out.

Review of lessons learned from complaints

A learning organisation must be able to use information from concerns and complaints to make sure they learn from it and share it if appropriate. In September 2019 we carried out a review to see if we have been fully following the lessons learned. The review found that service areas and programmes were identifying lessons learned when investigating complaints, and revealed that:

- 44% of lessons identified have been fully put in place; and
- 56% of lessons and recommendations have been partly put in place.

The actions partly put in place relate to Diabetic Eye Screening Wales as, during the year, we decided we needed a broader approach to improvement. This will be completed in 2020.

Overall, the review highlighted that we are learning from lessons across the organisation. The evidence given to the review showed that we were taking action to put learning in place. Also, the review did not identify any service areas that had not taken any action.

The review made seven recommendations and we now have an action plan in place to deal with the issues raised. The report was received by the Quality, Safety and Improvement Committee. As well as acting on feedback about concerns, it is just as important to actively involve our people and communities, to learn from their experiences. Feedback from the public is central to improving the quality of our services and other people’s experiences of using our services.
The example below sets out a good-practice approach to involving people and listening and learning.

The All Wales NHS Safeguarding Network, for which the National Safeguarding Team provides leadership and support, was asked to develop principles of good working practice that offer NHS practitioners, independent contractors and those working within private practice support and guidance relating to using a chaperone, in response to the Independent Inquiry into Child Sexual Abuse.

We completed an equality impact assessment (EIA), which is supported by the ‘five ways of working’ of the Well-being of Future Generations Act. The EIA helped to plan how we could involve people who share one or more protected characteristics, so making sure that all communities had the opportunity to be involved.

We involved stakeholders through patient groups, third-sector partners and staff networks. We developed our approach following discussion through the Task and Finish Group, with advice and support from other Public Health Wales teams.

Although these principles of good working affect all men, women, children and young people, our work involving stakeholders focused on groups whose protected characteristics meant they were likely to be most affected by the guidance.

We aimed to check out any assumptions, questions and gaps in understanding highlighted through the initial drafting of the principles and make sure that, in the final EIA, we fully address any issues that we need to consider further.

Also, during February and March, we asked the public for their views on having a chaperone present for intimate procedures. We met with a number of individuals and groups and also had meetings and discussions with the following:

- Barod CIC (a community interest company who work with and for people with learning disabilities)
- BAWSO (lead organisation in Wales providing practical and emotional support to black minority ethnic (BME) and migrant victims of domestic abuse, sexual violence, human trafficking, Female Genital Mutilation and forced marriage)
- The Board of Community Health Council Wales
- Stonewall Cymru (an organisation that campaigns for the equality of lesbian, gay, bisexual and trans people)
- Unique Transgender Network (an organisation that campaigns for the equality of trans people in Wales) and Trans Social Meet Up (a voluntary group supporting trans people in South Wales)
- Women Connect First (whose mission is to empower and improve the lives of disadvantaged Black, Asian and Minority Ethnic (BAME) women and communities in South Wales)
- Mencap Cymru (who provide support so that people with learning disabilities can live independently)
- Velindre Cancer Centre

By listening, learning and putting into practice the wide experiences of all of these groups, we produced the ‘Good Working practice principles for the use of Chaperones during Intimate Examinations or Procedures within NHS Wales’.
Wales for Africa

Our International Health Coordination Centre (IHCC) continues to support international health work across the NHS, sharing good practice and learning and opportunities for staff development.

The IHCC celebrated the fifth anniversary of the Charter for International Health Partnerships in Wales with a recommitment ceremony and by publishing a toolkit on how to develop sustainable and fair global partnerships that benefit all those involved. It was developed jointly by us and NHS health boards and trusts. We also co-sponsored the annual Wales for Africa Health Conference, which focused on ‘the Challenge of Climate Change’.
During 2017-2018 and into 2018-2019 we carried out significant work with our people and partners to develop our new Long Term Strategy. Given the impact that Covid-19 has had on delivering the strategy, we will be reviewing our Operational Plan for 2020-2021.

As a public health institute, our immediate priority has to be to provide and continue an effective response to the pandemic through our health protection work. We will also be analysing the effect that Covid-19 has had on the health and well-being of the wider population and this will be a second key priority area for us. We also plan to reintroduce a number of our essential services, including screening programmes and the support that Improvement Cymru can provide for health and social care partners. All of these activities are consistent with our current priorities, though each will have a different priority and focus for the next year.

We will also be looking at the impact Covid-19 has had on how we work, people’s resilience and well-being, and how we want to move forward together as an organisation during our next year, for example through social-distanced working and working from home.

Helping with equipment

Regular donations of unused laboratory equipment are transported to UK distribution centres and then flown over to African distribution centres.

One of our laboratory biomedical scientists became involved with the Dolen Ffermio Charity, based near Welshpool. This charity is helping to set up a vets’ laboratory in Uganda, with the aim of improving animals’ health and the milk yield from their goats.

These overseas links highlight the contribution we are making to support initiatives in Africa, and we need to work with our African and international partners to increase the awareness and needs of laboratories across Africa.

Looking forward

During 2017-2018 and into 2018-2019 we carried out significant work with our people and partners to develop our new Long Term Strategy. Given the impact that Covid-19 has had on delivering the strategy, we will be reviewing our Operational Plan for 2020-2021.

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