



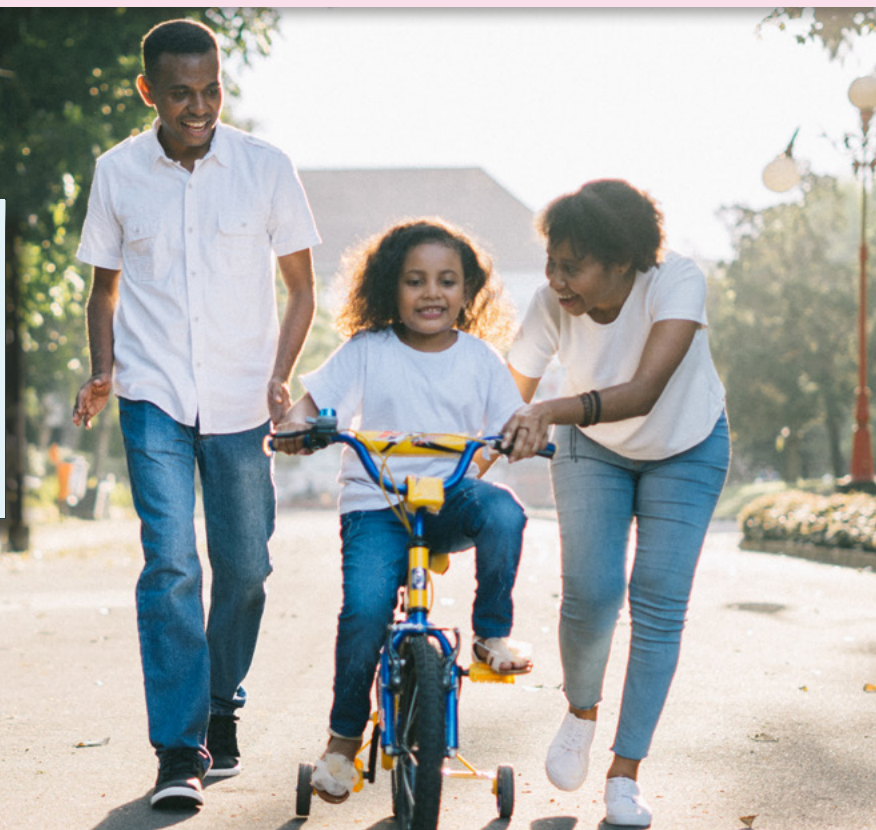
# WORKING TO ACHIEVE A HEALTHIER FUTURE FOR WALES

## ANNUAL REPORT 2021/22



GIG  
CYMRU  
NHS  
WALES

Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales



This document is also available in Welsh





# CONTENTS

<b>Foreword – Jan Williams</b>	<b>4</b>
<b>Foreword – Tracey Cooper</b>	<b>6</b>
<b>Introduction</b>	<b>10</b>
<b>Our Operational Plan 2021/2022</b>	<b>12</b>
<b>Progress against our Operational Plan 2021/22</b>	<b>16</b>
<b>Health Protection Response to COVID-19</b>	<b>18</b>
Population surveillance	19
COVID-19 testing	20
Public Health Wales Pathogen Genomics Unit	22
<b>Population Health Outcomes</b>	<b>24</b>
International Horizon Scanning	26
National Public Engagement Survey	27
<b>Continuation and Reactivation of our Public Health Functions, Programmes and Services</b>	<b>28</b>
Vaccination and Immunisation	28
Surveillance and information sharing	29
Microbiology services	31
Supporting the reduction in Healthcare Associated Infections (HCAI)	32
Recovery and Development of Screening Services	33
Health Improvement	36
Improvement Cymru	38
Primary Care	44
Safeguarding	45
Data, Knowledge and Research	47
<b>Organisational learning, knowledge and our COVID-19 narrative</b>	<b>52</b>
Collecting and collating learning	52
<b>Enabling the organisation</b>	<b>54</b>
Long Term Strategy Review	54
Informed decision making	55
Risk Management	55
Quality and Improvement	56
The Health and Social Care (Quality and Engagement) (Wales) Act 2020 ('the Quality Act')	56
Integrated Governance Model	56
Putting Things Right	57
Our Estate	59
<b>Our People</b>	<b>60</b>
Sickness absence rates	62
Staff Wellbeing	62
Staff achievements	63
<b>Conclusion and looking forward</b>	<b>64</b>
<b>Well-being of Future Generations</b>	<b>66</b>

# FOREWORD

## JAN WILLIAMS OBE, CHAIR OF THE BOARD

**2021/22 began with Public Health Wales continuing to provide effective system leadership in response to COVID-19, with Health Protection, Surveillance and Microbiology services ramping up in-year, this time in response to the Omicron variant.**

**Throughout the year, everyone demonstrated a tireless commitment to the public health and protection of the people of Wales; I was delighted when the Minister for Health and Social Services sent a special message to all staff, paying tribute to Public Health Wales' vital system leadership role and commenting on the value placed on the advice and guidance from our professionals throughout the pandemic.**

A further example of the altruism and public spiritedness of Public Health Wales' staff came in the humanitarian response from so many following the invasion of Ukraine. As the National Public Health Institute in Wales (NPHI), we are also working with others in the International Association of Public Health Institutes to support Ukrainian public health colleagues. I mentioned last year that the pandemic had seen Public Health Wales come into its own as an NPHI and the 2021/22 annual report sets out the ongoing development of that role.

Public Health Wales employs extraordinarily talented and dedicated staff, a number of whom Kate Eden, vice-chair, and I had the privilege and pleasure of 'dropping in' on virtually throughout the year on teams from Ports and Borders, the ACE Support Hub, Research and Evaluation, Improvement Cymru, Vaccine and Preventable Disease Programme to the World Health Organisation Collaborating Centre (WHO CC), and People and Organisational Development. Across the organisation, we heard both of strong delivery against the Operational Plan- a great achievement, given the challenges- but also ambitious plans for the future. The Screening Division not only focussed on reactivation, but also on opportunities for transformation, whilst PenGu continued on

its world-leading course, achieving 200k genome sequencing and UKAS 15189 accreditation- a great achievement for both the lab and our bioinformaticians!

In our NPHI role, we also kept the longer-term harms resulting from Covid-19 firmly in focus; together with the WHO and Welsh Government, the WHO CC team produced the Welsh Health Status Report initiative (WHESri), a ground-breaking commentary on the nation's health and well-being; the Policy and International Health team also made sure that Wales had the benefit of international horizon scanning. The importance that the WHO placed on Public Health Wales' WHO CC status was underscored by the speed with which it re-designed the CC for a further four-year term, a fitting tribute to an outstanding first term.

Throughout the year, a series of reports demonstrated Public Health Wales' influence as a NPHI on policy and practice, including: *Basic Income Report; the Triple Challenge of Brexit, Austerity, and Climate Change; Uncharted Territory Review; COVID-19 and unemployment changes in Wales.*

The Board focussed on good governance and Audit Wales' Structured Assessment Report included another 'substantial' rating, a tribute to all those who work so hard behind the scenes on governance matters.

In year, the Board spent some time on its role in setting the tone and culture of the organisation; Board directors are clear that all staff should be able to come to work and be their best, authentic selves, without fear of discrimination or disadvantage of any kind. The Board takes pride in having a 'line of sight' to the front line and 2021/22 we had the privilege of meeting with each of the five Staff Networks, to find out more about their views and issues. Our meeting with the BAME Staff Network prompted us to sign up to Race Council Cymru's Zero Racism Tolerance pledge; we were also delighted to move up the Stonewall Top 100 Employer Index, from 100 to 64, and to gain a silver cultural competence certificate from Diverse Cymru. The Board is always conscious that there is more to do, but this last year saw real achievements on which to build.

We said farewell to Judi Rhys, whose term on the Board ended in March 2022. Judi was a consummate non-executive director; fully prepared, focussed on the key issues, constructive in challenge and always ready to offer help and support. I count myself most fortunate to have worked alongside Judi, as I do to work alongside all my Board colleagues, to whom I owe a debt of gratitude for their unfailing support and knowledgeable contributions at all times, whether in full Board or in Committee meetings. Kate Eden, and Dyfed Edwards, Chair of Audit and Corporate Governance Committee, continued to give me the benefit of their wise counsel and, once again, I thank them both, as I do the Committee Chairs and lead Executives.

Under Tracey's inspirational leadership, the Executive Directors provided agile and effective leadership of the organisation, ensuring that the vital corporate enabling functions played their full part in delivering the Operational Plan, alongside their service delivery, policy and research counterparts. NHS Wales continues to be fortunate in having Tracey in its senior leadership cadre, for her vision and unfailing commitment to the public health of the population; it continues to be my privilege to work alongside her.



**'Board directors are clear that all staff should be able to come to work and be their best, authentic selves, without fear of discrimination or disadvantage of any kind.'**

Particular tribute goes to Huw George, Angela Fisher, Jane Matthews and the finance team; under Huw's sure-footed and wise leadership, Public Health Wales ended the year in financial balance and on a very sound footing with which to begin 2022/23.

2021/22 saw the return of strategic direction-setting, with the start of the Long Term Strategy refresh, including the launch of Improvement Cymru strategy *'Achieving Quality and Safety Improvement'* the in-house Quality and Improvement Strategy, and the blueprint for the Behavioural Sciences Unit. The last three will inform the next Long-Term Strategy and, in March 2023, it will be my privilege and pleasure to reflect on the production of this, together with another year of achievement for Public Health Wales.

**Jan Williams OBE**  
Chair of the Board  
Public Health Wales

# FOREWORD

## TRACEY COOPER, CHIEF EXECUTIVE



**It is my pleasure to introduce our Annual Report for 2021/22. Once again, our exceptionally dedicated people have gone above and beyond, working in collaboration with one another and with our partners across Wales to deliver yet another extraordinary year of protecting and supporting the health and well-being of the people of Wales. I am so very proud to share with you the exceptional work that all of our people have done right across the organisation, to support Wales at such a challenging time.**

As the National Public Health Institute in Wales, our vision is *'Working to achieve a healthier future for Wales'*.

Over the last two years, we have mounted an unprecedented response to the Coronavirus pandemic. This has been part of a system-wide effort to respond effectively to the challenges we have faced as the pandemic has evolved.

2020/21 was an exceptionally challenging year with the entire organisation focused on providing system leadership for, responding to and advising on the COVID-19 pandemic. As we moved into 2021/2022, this challenge did not subside and, in some ways, increased in scale as we began the gradual mobilisation and repatriation of staff back to their core roles. Reactivating the breadth

of our public health activities and our statutory public health functions have been a key focus for the year. This was done in conjunction with maintaining our focus on responding to, advising on and evolving our health protection response into a more sustainable response model that will continue to be fit for purpose beyond COVID-19 - and the associated increase in staff recruitment to support the health protection response.

We have also increased our focus on our evidence based understanding and advising on the medium and longer term direct and indirect population health impact of COVID-19, which has become even more significant for us and for the people of Wales.

The continued pace of work through this year, against a backdrop of an exceptionally busy 2020/21, has also meant that the well-being, welfare and resilience of our staff remains a key focus. Our people have worked tirelessly and we have been mindful of this as we have moved through the reactivation and recovery stages of the organisation. The focus on our people's well-being and welfare continue to be a significant priority for us, together with increasing our focus on equality, diversity and inclusion and the development of our Work Where Works Best approach which we are co-designing with our people to determine our ways of working as an organisation going forward.

Within this Annual Report, we outline the many extraordinary achievements and a wide range of delivery activities by our people throughout the year – this represents just a sample of the excellent work undertaken across the organisation. We have had a lot of highlights throughout the year across the wide range of our functions, and it is difficult to do them all justice in an introduction, so I have given a flavour of some of the highlights below.

During early 2021, we refreshed our Operational Plan to ensure that it clearly articulated the planned action on our agreed priorities. As part of this process, we validated our existing priorities and refreshed the underpinning milestones to ensure that we were delivering maximum value for Wales.

The need for timely surveillance and epidemiology data support to the COVID-19 pandemic has far exceeded anything previously experienced. Our Communicable Disease Surveillance Centre (CDSC) has also kept other essential surveillance schemes running, re-prioritising, reducing or enhancing as appropriate, and targeting analytical resource.

Pathogen genomics has grown significantly within Public Health Wales in the last 12-18 months, exemplified by the contribution of genomics to the COVID-19 pandemic response. Since starting sequencing SARS-CoV-2 in March 2020, our Pathogen Genomics Unit has processed over 150,000 SARS-CoV-2 samples, including for non-Welsh residents to support a UK-wide response. Globally, Wales ranks in the top ten of submitted genomes for COVID-19.

Our microbiology services have continued to provide non-COVID testing at unprecedented levels in addition to our pandemic response. Prior to the pandemic, collectively over 1.3m samples have been processed and tested and that rose to 1.7m in 2021/22. On top of this, the service has undertaken a similar volume of COVID-19 testing during this time which is an extraordinary achievement.



Another key focus during the year was on prevention, sustainability and building the health and resilience of our communities. Working with our partners to strengthen the wider determinants of healthy life expectancy, we aimed to influence healthy behaviour through targeted public health programmes.

We also continued to reactivate and develop our screening programmes.

After consultation and involvement with Welsh Government colleagues and external partners, Improvement Cymru has developed a new Improvement Cymru strategy, *Achieving Quality and Safety Improvement 2021-2026*, which was launched on World Patient Safety Day (17 September 2021) and aligned to the publication of the Welsh Government's *Quality and Safety Framework*. Improvement Cymru worked with key stakeholders to develop a strong understanding of the quality and safety needs of the health and care services in response to ongoing challenges, the pandemic and policy developments and has accelerated its response to supporting the NHS at this challenging time.



Our World Health Organization Collaborating Centre has utilised our strong international links and partnerships to establish an International Horizon Scanning system for COVID-related issues, providing up to date policy summaries, intelligence and insights into other developments worldwide. Their ground-breaking work has resulted in this well-deserved re-designation for a further four years, until 2026.

The long term response to the COVID-19 pandemic requires a safe and effective vaccine to be available for all who need it and our Vaccine Preventable

Disease Programme Team have been at the heart of providing advice and support to the vaccine programme in Wales. In addition, the hard work of our Research and Evaluation Division over the last year has resulted in some significant opportunities, such as the Research and Development Office being instrumental in supporting the delivery of COVID-19 Vaccine Clinical Trials across Wales and is providing a 'One Wales' response and strategic oversight for all COVID-19 trials delivered, in partnership with Health Care Research Wales.



Our Corporate and enabling functions are pivotal to the successful delivery of our public health priorities and in supporting wider organisational recovery. They have played a critical role in the leadership and delivery of a number of major areas of work, alongside our role in the continued response to COVID-19, supporting the organisation as it continues to move towards recovery and in the delivery of our full range of statutory functions and activities.

Finally, I would like to personally thank each and every one of our people across Public Health Wales for their relentless hard work, passion and commitment to the people of Wales which has often resulted in personal sacrifices in order to deliver the pace and scale of our work. I would like to thank our Board for all of their support during the year, and especially Jan Williams, our chair, who has been extraordinary in her ongoing support to me personally and to our whole organisation, and, of course, a very large thank you to all of our partners who we have worked with through the year to make a difference.

**Dr Tracey Cooper**  
Chief Executive  
Public Health Wales







# INTRODUCTION

**Over the last two years, Public Health Wales has mounted an unprecedented response to the Coronavirus pandemic. This has been part of a system-wide effort to respond effectively to the challenges we have faced as the pandemic has evolved.**



Throughout this, we have prioritised the need to deliver an effective health protection and microbiology response, while utilising our expertise in relation to behavioural insights and change, evidence and research, prevention, and national/international horizon scanning. In addition, we have continued to deliver our maternal and neonatal screening programmes throughout the pandemic, including New-born Hearing, New-born Bloodspot and Antenatal screening.

We have also recognised, from an early stage, the impact of the broader and longer-term implications for the people of Wales. The evidence shows us that the pandemic has exacerbated existing health inequalities and disproportionately negatively impacted upon our most deprived communities. We also know that the impact on the wider health and social care system has been dramatic and will require an equally effective response to address this over the coming years.

2020/21 was an exceptionally challenging year with the entire organisation focused on providing system leadership for, responding to and advising on the COVID-19 pandemic. As we moved into 2021/2022, this challenge did not subside and, in some ways, actually increased in scale as we began the gradual mobilisation and repatriation of staff back to their core roles to achieve the reactivation of our core and statutory public health functions. This was done in tandem with maintaining our

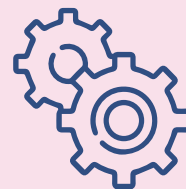
focus on evolving our health protection response into a more sustainable response model that will be fit for purpose beyond COVID-19 - and the associated increase in staff recruitment to support the health protection response following the Minister's approval of the business case during 2020/2021.

While our focus continued to be on ensuring the delivery of an effective and sustainable response to COVID-19, we also recognised the importance of undertaking work on the wider population health implications for the people of Wales. It is critical that we understand fully the broader impacts (both positive and negative) of COVID-19, including on vulnerable groups and in relation to health inequalities and learn how to prevent them in the future.





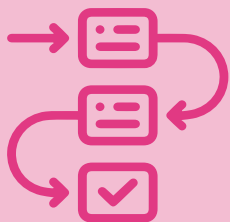
# OUR OPERATIONAL PLAN 2021/2022



**During early 2021, we refreshed our Operational Plan to ensure that it clearly articulated the planned action on our agreed priorities. As part of this process, we validated our existing priorities and refreshed the underpinning milestones to ensure that we were delivering maximum value in our role as the National Public Health Institute for Wales.**

This was guided by our long-term strategy 'Working to Achieve a Healthier Future for Wales', and a number of key strategic prevention-focused drivers, particularly the Well-being of Future Generations (Wales) Act and the upcoming Socio-economic Duty. A number of strategic

and policy drivers shaped and informed the development of our priorities for 2021-2022, including key legislation, mitigating the 'four harms' stemming from COVID-19 and delivering against key Ministerial priorities.



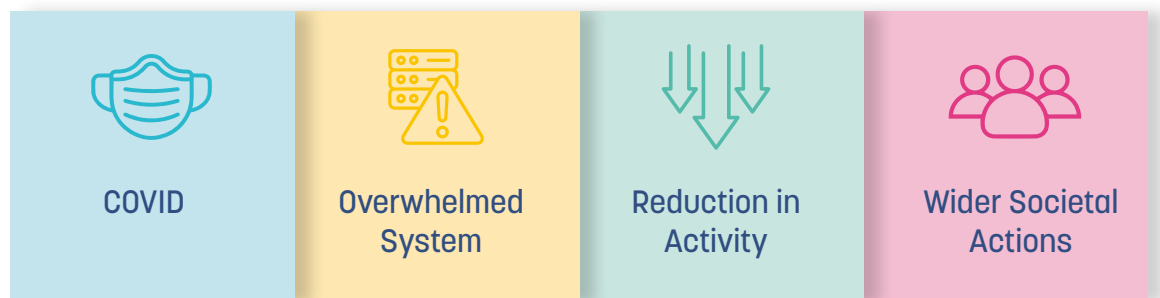
Our operational plan reflects the ambitions set out in A Healthier Wales (2018) and seeks to support the development of a whole system approach, which is focused on health and well-being and preventing illness.



Our plan took full account of the four harms and priorities set for NHS Wales by the Minister for Health and Social Services, as illustrated in the diagram below:

## Delivery of Key Strategic Drivers

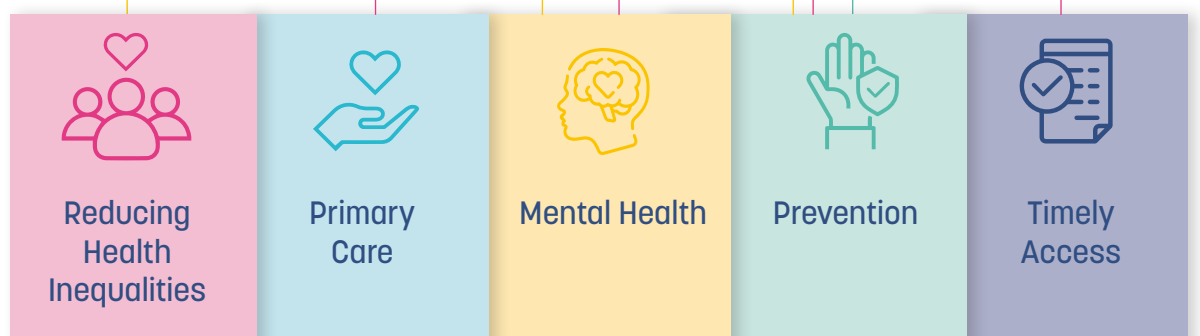
### Four Harms



### Public Health Wales' External Priorities



### Ministerial Priorities



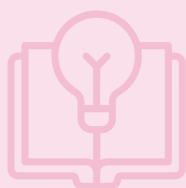
Our key focus during the year was on prevention, sustainability and building the health and resilience of our communities. Working with our partners to strengthen the wider determinants of healthy life expectancy, we aimed to influence healthy behaviour through targeted public health programmes. We also continued to reactivate and develop our screening programmes.

**Our priority areas for 2021/2022, agreed by the Board in June 2021 were:**



## Public Health Wales' Operational Plan 2021/22

### Plan on a Page

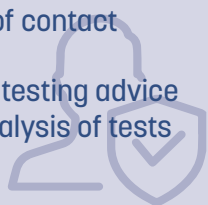


#### Organisational Learning, Knowledge and our COVID-19 Narrative

- Development of systemic approaches to collecting and collating learning
- Development of our organisational COVID-19 narrative

#### Health Protection Response to COVID-19

- Leadership and specialist public health advice on approaches
- Coordination of contact tracing
- Sampling and testing advice
- Laboratory analysis of tests



#### Population Health Outcomes

- Developing approaches around preventing broader harms from COVID-19
- Exploration of vulnerable people, mental wellbeing and employment



#### Reactivating our Public Health Functions, Programmes and Services

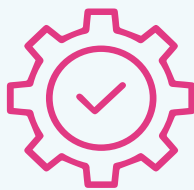
- Development of approaches and criteria to manage and inform reactivation
- Planned reactivation of essential and priority services, programme and functions



#### Enabling Recovery

- Strategic review of our long-term strategy and engagement over future ways of working
- Using information to make effective decisions and improve performance
- Create and deliver digital solutions and effective communication





**Our focus for 2021/22 outlined in the Operation Plan was:**

- ✓ Continue to deliver and evolve an effective and sustainable health protection response to COVID-19
- ✓ Understand and advise on the mitigation of the broader population health impacts
- ✓ Effectively reactivate our prioritised public health functions, programmes and services
- ✓ Capture, share and develop organisational learning, knowledge and our COVID-19 narrative
- ✓ Enable our effective organisational recovery

# PROGRESS AGAINST OUR OPERATIONAL PLAN 2021/22



The end of March 2021 marked the conclusion of our Operational Plan for 2021/22, which was a really successful year with the delivery of a number of significant milestones across our priority areas.

Of what we set out to deliver, we ended the year with 87% of our milestones completed and the remainder now due in 2022/23 as part of the new Integrated Medium Term Plan, following subsequent changes to delivery.



## Our priority area

Reactivation of key functions, programmes and services – was formally stood down in October 2021 following approval by our Executive Team, following the return of normal Directorate accountability.

A breakdown of delivery by priority area is shown below with further information detailing examples what we achieved in 2021/22 set out in the following section.



**100%**  
Response



**76%**  
Population Health



**100%**  
Organisation  
Learning



**73%**  
Enabling Recovery





# HEALTH PROTECTION RESPONSE TO COVID-19



**Over the last two years, Public Health Wales has mounted an unprecedented response to the Coronavirus pandemic. This has been part of a system-wide effort to respond effectively to the challenges we have faced as the pandemic has evolved. Throughout this, we have prioritised the need to deliver an effective health protection and microbiology response.**

The Health Protection Team have provided a specialist, once for Wales function for the public health system in Wales. This has included leading the development of the national contact tracing framework, providing key national resources including Test, Trace, Protect (TTP) guidance, Standard Operating Procedures (SOPs), contact tracing scripts, protocols and other supporting materials for contact tracing teams and the professionals supporting them. Our specialist team have continued to provide an acute response to the most complex COVID-19 cases, outbreaks and incidents, a national contact centre for those needing to access urgent COVID-19 advice, whilst also supporting Welsh Government with advice to support the strategic management of the pandemic.

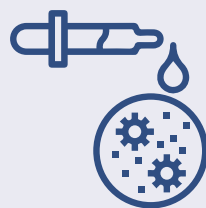
This service has been led by a small group of specialists, working in the most part extended hours outside their contractual norms supported by a significant number of staff mobilised from across the organisation in order to meet the unprecedented needs of the system.

This has been alongside the continued and uninterrupted acute specialist response to all other priority infectious disease notifications, outbreaks and environmental public health incidents.

Despite the pressures of the COVID-19 response, in order to improve critical stability, resilience and capacity in the Health Protection team, a business case was submitted to and approved by Welsh Government with circa 126 staff being recruited, on boarded and inducted into the service.

Next year the team will continue to focus on embedding and developing the new staff, transforming teams and functions to achieve a more resilient and stable service. We will also work to bring COVID-19 response into normal business and identify areas of learning that can bring opportunities for improvement in wider HP areas such as digital developments, Quality and Key Performance Indicators (KPIs) reporting and working to support vulnerable groups. Partnership working with key stakeholders (notably Local Authority Public Protection services) to further strengthen the health protection system and multi-disciplinary workforce will continue.

During 2021/22 Public Health Wales has chaired and supported the 4 Nation Health Protection Oversight Group, which co-ordinates joint working on cross border threats to health across the devolved nations of the UK.



## Population surveillance

The need for timely surveillance and epidemiology data support to the COVID-19 pandemic has far exceeded anything previously experienced. Our Communicable Disease Surveillance Centre (CDSC) has also kept other essential surveillance schemes running, re-prioritising, reducing or enhancing as appropriate, and targeting analytical resource.

CDSC staff have led the development and roll-out of new surveillance systems and also played a key role in the development of procedures and systems to support a range of COVID-19 responses. These include rapid surveillance of mortality in hospitals; contact tracing data systems; development of Tarian (the in-house communicable disease case management system); convalescent plasma and serosurveillance studies; surveillance of Variants and Mutations of Concern; and supporting a COVID-19 vaccine trial.

## Public Health Wales staff present at European epidemiology symposium

Colleagues from Public Health Wales' Health Protection Division were represented at this year's online European Scientific Conference on Applied Infectious Disease Epidemiology (ESCAIDE) conference.

Gemma Hobson presented a poster looking at how Public Health Wales worked with partners to investigate a salmonella outbreak that occurred earlier this year in South Wales following a celebration barbeque.

Clare Sawyer presented two posters. The first examined the use of PCR reflex assays to monitor Coronavirus variants of concern in closed settings in Wales. The second looked at trends in e-coli monitored throughout Wales following the introduction of multiplex PCR testing.

Gethin Jones presented a poster demonstrating a tailored surveillance system to monitor Coronavirus infections in prisons throughout Wales.

James Adamson presented a poster examining how we used integrated mapping, genome sequencing and interviews to identify sources of infection and inform control measures at a prison during an outbreak of Coronavirus.

## COVID-19 Vaccine Trials

Public Health Wales led by the Research and Development Office has been instrumental in supporting the delivery of COVID-19 Vaccine Clinical Trials across Wales and is providing a 'One Wales' response and strategic oversight for all COVID-19 trials delivered, in partnership with Health Care Research Wales.

In December 2021, Public Health Wales took an oversight role of a clinical trial to test novel antiviral COVID-19 treatments in the community setting for adults with recently confirmed COVID-19 and those who are at higher risk of complications (the PANORAMIC Trial). PANORAMIC is designed as a 'platform clinical trial', meaning it can rapidly evaluate several antiviral treatments over time. The first treatment to be investigated through the trial is Molnupiravir, a COVID-19 antiviral pill already licensed by the MHRA.

Public Health Wales has featured in several communications released for the successful delivery of the PANORAMIC trial, including a recent BBC Wales Article (13th January 2022); [Covid: Hundreds in Wales take antiviral tablets - BBC News](#).

The Public Health Wales 'One Wales' approach to COVID-19 vaccine trials was extended to include the anti-viral PANORAMIC trial, which commenced in December 2021. The model for the PANORAMIC study, is different to the one used for COVID-19 vaccine trials.



Public Health Wales is working with HCRW and the Centre for Trials Research at Cardiff University to provide a 'Hub' for the trial. Public Health Wales is an investigator site and directly contracting with the sponsor, Oxford University. To deliver the trial, Public Health Wales has issued six General Practitioners across Wales with honorary contracts and Service Level Agreements (SLAs) have set up with GP Practice in North Wales. Public Health Wales Informatics team provide PCR and LFT results to the HCRW centralised booking team. This model has been successful, with Public Health Wales being the highest recruiting site for the Trial with over 1,025 participants recruited (accounting for 13% of the overall recruitment to the Trial)



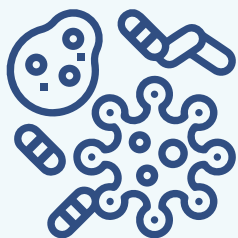


## COVID-19 testing

The exceptional response to the COVID-19 pandemic has highlighted the strengths and development needs of our services. During our response, our virology/microbiology services have demonstrated their ability to develop new tests and assays to support response to new pathogens and variants, responded to a massive increase in testing volume, and introduced and rolled out new technology to Public Health Wales laboratories.

Total PCR tests authorised by Public Health Wales laboratories increased from around 20,000 tests per week in April 2021 to over 30,000 in September 2021. During this time interval the median in-lab turnaround time for Public Health Wales laboratories was 5 hours.

## Public Health Wales Pathogen Genomics Unit



The Public Health Wales Pathogen Genomics Unit (PenGU) has played an exceptional and critical role in supporting the COVID-19 response. It is world-leading in its generation and sharing of sequence data to support the COVID-19 pandemic response, including the surveillance of variants to inform timely public health actions, and response to outbreaks in the community and closed settings, such as care homes and hospitals.

Pathogen genomics has grown significantly within Public Health Wales in the last 12-18 months, exemplified by the contribution of genomics to the COVID-19 pandemic response. Data being generated by the Public Health Wales Pathogen Genomics Unit has found uses as part of the pandemic response at every level; from managing individual patients and informing contact tracing up to providing Wales-wide views of the pandemic to advise and inform policy makers.

Over the course of the pandemic, Wales has cemented itself as a world leader in the area of clinical pathogen genomics, and this excellence translates to benefits for the patients and public of Wales. The Public Health Wales Pathogen Genomics Unit provides a set of world-leading clinical pathogen genomics services, and, in March 2020, began sequencing of SARS-CoV-2 cases. Since then, Public Health Wales's Pathogen Genomics has played a key role in the Welsh and wider UK COVID-19 pandemic response, having now sequenced over 100,000 genomes for SARS-CoV-2.

Since starting sequencing SARS-CoV-2 in March 2020, PenGU has processed over 150,000 SARS-CoV-2 samples, including for non-Welsh residents to support a UK-wide response. Globally, Wales ranks in the top ten of submitted genomes to GISAID, and only Denmark has sequenced more samples and captured a higher percentage of cases. PenGU provides an outbreak analysis service, which has supported over 100 outbreak investigations to date. Genomics data are shared with our network of Welsh healthcare epidemiologists, to support pandemic response within our health boards. Data are also shared with the Welsh Government and analysed in an agile manner to inform policy making. Sequence data generated are published in the public domain to enable and support research in Wales and globally. Alongside its support to the COVID-19 response, PenGU has continued to deliver existing services, as well as establishing a world-leading *Clostridium difficile* genomics service which is the only United Kingdom Accreditation Service (UKAS) accredited *Clostridium difficile* genomics service in the UK to date.

The system-wide use of SARS-CoV-2 genomic data demonstrates the value of genomics, not just for enabling precision medicine, but also for precision healthcare. The COVID-19 response – alongside existing UKAS accredited services for other pathogens, such as HIV, *Clostridium difficile*, Influenza and *Mycobacteria* – is further evidence of a world class capability in Wales.

The realisation of the benefits of genomics data requires involvement from staff across the organisation: Health Protection, Microbiology, Information Technology, Research and Innovation, Information Governance and Communications, amongst others. This, combined with the potential growth in genomics services provided, necessitates the evolution of Pathogen Genomics within Public Health Wales into a programme for Public Health Genomics.



## Building on an already strong foundation of an extremely talented and dedicated genomics team

The establishment of a Public Health Genomics Programme will open up new opportunities for the development of services and collaboration with partners, building on existing links through the Genomics Partnership Wales. It will strengthen the delivery of the pathogen genomics service across a range of infections, explore the opportunities of closer alliance with the All Wales Clinical Genomics Service through co-location in Cardiff, and establish a roadmap to enable the further development and management of this capability.

Future opportunities include the development of new services based on current areas of excellence within Public Health Wales such as Cryptosporidium and Mycology, support for broader population health activities including considering the host and environment alongside pathogens as part of a ONE Health approach and the identification of the utility of human genomic sequence data to develop next-generation population screening services

The performance of the Public Health Wales Pathogen Genomics Unit is remarkable given its small size (less than 15 members of permanent staff) and sequencing volume. The measure of the performance of the Public Health Wales Pathogen Genomics Unit is found in the fact that over the course of the COVID-19 pandemic, Wales has consistently been amongst the top nations in the world for absolute number of SARS-CoV-2 genomes sequenced and also for proportion of cases sequenced.

Genomics has enormous potential. Building on an already strong foundation of an extremely talented and dedicated genomics team, the evolution of genomics activity into a formal Public Health Genomics Programme will further support and enable the development of genomics within the organisation, and will help to translate the potential of genomics into real benefits for the people of Wales.

# POPULATION HEALTH OUTCOMES



The COVID-19 pandemic has had a huge effect on people across the world, as well as in Wales. Both the virus and measures to control it caused wide-ranging harm, such as ill health and reduced well-being, and significant social and economic negative effects. It also worsened existing health inequalities and affected some groups, such as those on low income and black, Asian and minority ethnic (BAME) communities, more than others.



In 2021-22, we undertook a programme of work to understand the wider effects of COVID-19, including the consequences of our actions to control how it was transmitted. The aim of this knowledge was to support policy decisions and efforts across the organisation and wider health services, and underpin joint multi-disciplinary cross-sector efforts to prevent future harms to health, aid recovery, capture and support opportunities and contribute to a continued improvement in health and reduction in inequalities.



Through monitoring to understand broader health trends in health and well-being and learning through various channels, we focused on the following four areas of information.



### ✓ Priority 1

National Public Engagement Survey to understand public acceptance, the wider effects of COVID-19 measures across Wales and in certain groups of people and to see how people are keeping to advice.

### ✓ Priority 2

International Horizon Scanning where we research, evaluate and analyse international evidence to help guide policy and support Wales' ongoing response to the COVID-19 pandemic. This has helped build strong links with international agencies and partners, in order to develop insight and learning from other countries.

### ✓ Priority 3

COVID-19 Health Impact Assessments (HIAs) to encourage a 'whole of government' and 'whole of society' approach to planning the recovery from the pandemic and interventions to support that recovery. Specific outputs were three HIAs:

- A Health Impact Assessment of the 'Staying at Home and Social Distancing Policy' in Wales in response to the COVID-19 pandemic
- A COVID-19 [pandemic world and beyond: The public health impact of Home and Agile Working in Wales
- No place like home? Exploring the health and wellbeing impact of COVID-19 on housing and housing insecurity.

### ✓ Priority 4

Developing a report of broader health trends in health and well-being.



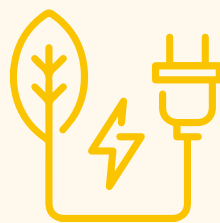
This formed the basis of our work programme in 2021-22 to improve population health outcomes through a focus on four main areas: mental well-being; children and young people; employment; and drivers of non-communicable diseases (NCDs).

## International Horizon Scanning

The WHOCC has utilised our strong international links and partnerships to establish an International Horizon Scanning ([International Horizon Scanning](#)) system for COVID-related issues – providing up to date policy summaries, intelligence and insights into other developments worldwide. We work closely with the WHO Regional Office for Europe, gaining first-hand access to the latest global and European learning related to the wider impacts of COVID-19 on people's health and wellbeing, equity, community and system resilience, society and the economy.

The WHOCC has been focusing on informing and enabling action and solutions on placing health equity at the heart of the COVID-19 sustainable response and recovery ([Welsh Health Equity Status Report](#)) and establishing a world leading health equity initiative ([the Welsh Health Equity Status Report initiative \(WHESRI\)](#)) in close collaboration with Welsh Government. To inform and facilitate a more sustainable and inclusive recovery, the WHOCC is also exploring the economic consequences of the pandemic; and the financial cost of health inequality to the NHS in Wales ([Cost Associated with Inequality in Hospital Service Utilisation](#)).

Our International Health Team, through the International Health Coordination Centre (IHCC), has been helping to disseminate and utilise international learning and experience across the NHS and wider Wales, from a range of European and global networks and organisations, and in collaboration with the five nations. These international systems and networks have already ensured that our thinking and responses are routinely informed by international learning and will continue to be as we manage the wider public health impacts of COVID-19 through transition and recovery stages. Together with third sector, academic and education partners, the IHCC has launched the first Welsh Global Citizenship training resource (Learning@Wales) for NHS staff to help build a culture of global responsibility, partnership and sustainable behaviour in the context of globalisation, climate change, pandemics, peace and conflict.



We also maintained our focus on sustainability, for example publishing infographics on early findings from a Health Impact Assessment of Climate Change in Wales and building awareness of environmental sustainability amongst our staff through e-briefs, a staff network and carbon literacy training.

## National Public Engagement Survey



Over the course of the COVID-19 pandemic, the World Health Organization Collaborating Centre (WHO CC) on Investment for Health and Well-being has operated a national public engagement telephone survey on health and wellbeing. Established in April 2020, shortly after Wales went into its first 'lockdown', the survey has engaged with over 26,000 adults in Wales in its two years of implementation.

Survey results have informed understanding of public acceptance and compliance with COVID-19 prevention measures and the broader impacts of the pandemic on physical and mental health, including how impacts have differed between population groups. The survey has included a set of routine questions with other questions changing depending on emerging issues; allowing public engagement to be highly responsive to the prevailing policy environment, such as including questions on policy priorities, COVID-19 testing and vaccination.

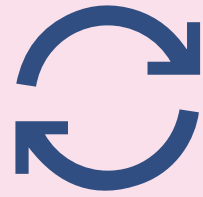
Survey results have been widely disseminated, informing strategic decisions in Public Health Wales, Welsh Government and among other key stakeholders, and the move from pandemic response into recovery. Findings are made publicly accessible on the Public Health website and the [WHO CC database repository](#).



The March 2022 survey report presented findings from the last round of the public engagement survey in its current format. This will be followed by a summary report in 2022/23 presenting data and trends across the two-year survey. Building on the successes of the survey, Public Health Wales will establish a national well-being panel to continue monitoring key public health issues in Wales.



# CONTINUATION AND REACTIVATION OF OUR PUBLIC HEALTH FUNCTIONS, PROGRAMMES AND SERVICES



## Vaccination and Immunisation

As part of the annual influenza programme, previously Public Health Wales have been responsible for the delivery of an annual influenza campaign. This has been delivered over the last several years under the 'Beat Flu' brand. This media campaign runs from October to March including a six week intensive focus on promoting vaccination delivered through television, radio and online materials, with a later phase focussed on preventative measures (e.g. catch it, kill it, bin it).

As we anticipated COVID-19 and flu both circulating this winter, to enable more efficient working and joined up public information, planning has been to incorporate both these respiratory virus vaccine programmes into one campaign as much as possible. The overall aim of this campaign was to protect the health of the public in Wales by reducing the impact of flu and COVID-19. It aimed to do this by targeting multiple elements, including by highlighting the dangers of both flu and COVID-19, and encouraging eligible individuals to be vaccinated.

For 2021/22 the traditional seasonal flu campaign has been brought under the umbrella of the Vaccination Saves Lives (VSL) campaign, to ensure

consistency with other vaccine programmes, and to capitalise on the public awareness of this brand generated from COVID-19. This was run as a joint respiratory campaign covering flu and COVID-19 vaccinations across the autumn and winter. The broad theme of this year's campaign was 'keeping your life open' and highlighted how vaccines can help you do the things you love doing by keeping you healthy in winter.

Now that all vaccines are being promoted under the same brand identity in Wales, it is important that there is an overarching strategy for co-ordinating different elements under the brand, and for prioritising investment.



The proposed co-ordinated strategy for 21/22 was successfully launched on 28 September 2021 and had three stated aims:

- ✓ To maximise COVID-19 and flu vaccine availability, awareness and acceptability in the population of Wales in order to promote maximise vaccine uptake.
- ✓ To reduce inequalities in COVID-19 and flu vaccine uptake through public and professional engagement to understand barriers to vaccine uptake and targeted interventions to address these.
- ✓ To ensure, wherever possible, that targeted communications address all appropriate vaccines within the VSL brand.

A dedicated 'Communication plan' for the Winter Respiratory Campaign was also been put in place.

## Surveillance and information sharing

Public Health Wales currently produces and will continue to publish a wide range of outputs covering the following areas:

- ✓ Community surveillance indicators of influenza-like illness (ILI) and acute respiratory infections (ARI)
- ✓ Surveillance of community acquired severe acute respiratory infection (SARI) and hospital in-patients
- ✓ Community and hospital surveillance of COVID-19 and suspected COVID-19 hospital and care home deaths
- ✓ Surveillance of severe outcomes of acute respiratory infections
- ✓ Intelligence on typing, sequencing and genomic analysis for surveillance of ARI and COVID-19
- ✓ Surveillance of COVID-19 and influenza vaccinations
- ✓ Surveillance of population susceptibility.





The COVID-19 pandemic has highlighted the importance of systematic and robust surveillance of respiratory infections. SARS-CoV-2 is now one of a number of endemic causes of respiratory infections in Wales. As respiratory infections often present in similar ways, and circulate concurrently, we proposed that the existing surveillance strategy for influenza-like illnesses (ILI), acute respiratory infections (ARI) and severe acute respiratory infections (SARI), should be updated to include SARS-CoV-2 and COVID-19. This will be of greater utility and efficiency than separate surveillance streams, whilst still allowing pathogen-specific analyses.

Surveillance of influenza remains a priority, even with the advent of SARS-CoV-2, as the overall burden of morbidity and mortality is comparable, with epidemics occurring on an annual basis. Without robust influenza surveillance, decisions around triggering use of antivirals for treatment and prophylaxis of flu in the community may be delayed.

Timely detection to type and clade level is important in alerting to specific influenza viruses and associated impact on different settings (e.g. the impact of drifted influenza A (H3N2) clades on residential care homes) and informing future vaccine composition.

Timely detection to type and clade level is important in alerting to specific influenza viruses and associated impact on different settings (e.g. the impact of drifted influenza A (H3N2) clades on residential care homes) and informing future vaccine composition.

Public Health Wales has therefore identified and advised that community surveillance for influenza and other respiratory viruses needs to be strengthened. This has been reflected in the WG Respiratory Response Plan.



## Microbiology services



The microbiology services in Public Health Wales have continued to provide non-COVID testing at unprecedented levels on top of the pandemic response. Prior to the pandemic, collectively over 1.3m samples have been processed and tested and that rose to 1.7m in 2021/22. On top of this, the service has undertaken a similar volume of COVID-19 testing during this time.

During 2021/22, our testing services for COVID-19 have been fully embedded, providing a range of testing capabilities including rapid molecular tests at all acute hospital sites as well as larger throughput at our COVID laboratory at Imperial Park 5 Lab 2. The average in-lab turnaround time for rapid testing and high-volume testing was 2 hours and 6 hours respectively.

The service also introduced variant testing in a matter of days following the spread of the Omicron variant. This was against a background of our own workforce challenges due to COVID-19 infection. Despite approaching 20% sickness at times, services continued albeit with some slippage against our in-lab turnaround times.

As well as responding to the pandemic and the increased non-COVID-19 activity, service improvement and development has continued:

- ✓ the network maintained its range of UKAS accredited services and added its Hot Lab functions and COVID-19 testing as part of an extension to scope;
- ✓ Undertaken a commercial procurement exercise to replace our Culture and Media contracts (award in May 2022);
- ✓ Completed a commercial procurement exercise for the enteric molecular service
- ✓ Completed a capital procurement exercise for the replacement of our MALDI-TOF platforms which are a core component of our bacteriology service;
- ✓ Extended our Physician Associates and Clinical Liaison Biomedical Scientists workforce as part of the redesign of clinical services.

The coming year brings with it several work streams that will continue with our longstanding ambition of workforce redesign, implementation of new technologies and bringing a greater focus and attention to the services outside of the laboratory.

## Supporting the reduction in Healthcare Associated Infections (HCAI)

The HCAI and AMR Programme (HARP) continues to provide COVID-19 and non COVID-19 related advice and support to Welsh Government and NHS Wales organisations. The changes in service delivery across healthcare in Wales during the pandemic has continued to impact Health Boards/Trusts achieving agreed national reduction expectation targets for 2021/22.

### Latest provisional surveillance figures reported by Health Boards/Trusts in Wales showed that:

**1,095 C. difficile** have been reported since April 2021, **approximately 24%** more than the equivalent period in **2020/21**.

**2,133 E. Coli bacteraemia** have been reported since April 2021, **approximately 13%** more than the previous year.

**837 Staph Aureus bacteraemia** have been reported since April 2021, **approximately 7%** more than the previous year.

**617 Klebsiella sp bacteraemia** (includes E. aerogenes bacteraemia from April 2019 onwards) have been reported since April 2021, equivalent to the **2020/21** period.

**188 P. aeruginosa bacteraemia** have been reported since April 2021, **approximately 27%** more than the previous year.

## The focus of our work since April 2021 has centred on the following:

- ✓ COVID-19 related HCAI and AMR surveillance and Infection, Prevention and Control support
- ✓ HCAI Infection Prevention and Control and Antimicrobial Prescribing (AMR) Surveillance
- ✓ Antimicrobial Prescribing advice and support
- ✓ Restarting the AMR Delivery Board and the All Wales Antimicrobial Guideline Group
- ✓ Developing the Worldwide and European awareness campaigns, focusing on key priorities for Wales
- ✓ Continued contribution to the UK-wide COVID-19 Prevention and Control cell
- ✓ Establish a Community and Primary Care group for Prevention and Control to link with community leads to support care homes.

## Recovery and Development of Screening Services

We deliver, monitor and evaluate seven population based screening programmes, and coordinate the all-Wales managed clinical network for antenatal screening. The screening programmes are informed by evidence-based recommendations from the UK National Screening Committee, which are considered by the Wales Screening Committee and delivered in line with agreed Welsh Government policy.

The aims of the programmes are either to reduce incidence of disease (e.g. cervical screening) or improve early diagnosis to reduce the impact of the disease (e.g. breast screening). The division has a comprehensive programme of evaluation and improvements in line with policy decisions. There is an equitable offer of screening to the eligible population but there is variation in uptake and enabling informed consent to improve uptake and reduce inequity of uptake is key priority.

As clinical services, the pandemic impacted the screening programmes. At the start of the pandemic in March 2020, five of the programmes were paused in line with Welsh Government guidance and this affected: Breast Test Wales, Cervical Screening Wales, Bowel Screening Wales, Diabetic Eye Screening Wales and

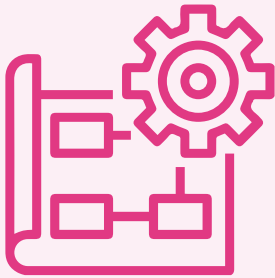
Wales Abdominal Aortic Aneurysm Screening. The New-born Hearing Screening, New-born Bloodspot Screening and the Antenatal Screening programmes continued throughout the pandemic and were not paused at any point.

Programmes were reinstated in phased and risk based approach over the summer 2020 and they have continued to be offered since their reinstatement but there have been constraints to recover the programmes. These have included the reduced numbers of participants being able to be offered screening in each clinic due to COVID-19 safe pathways; limitations in availability of clinic locations; and reduction in staff availability.

A recovery plan was developed, costed and agreed. The plan identified any forecast underspend within Screening revenue budgets for costs not expected to be incurred in 2021/22. Additional funding was required to be able to support the plan for 21/22 finance year (£1.1 million) and this was confirmed to be supported by Welsh Government in September 2021. This funding has been used as planned during the financial year 21/22. Further funding is required for to continue recovery plan for 22/23 but this has not yet been secured.



The recovery plan actioned in 2021 has achieved recovery of the bowel screening programme by October 2021 and the cervical screening programme in December 2021



The recovery plan focused on increased screening activity and actions included:

- ✓ Additional staffing.
- ✓ Additional hours undertaken by existing staff.
- ✓ Increasing number of clinic venues and efficiency with existing venues.
- ✓ Increased invitation numbers with associated in-year increase in consumables.
- ✓ Improving practices to increase efficiency e.g. outsourced mailing, telephone triage and open invitations.

The recovery plan actioned in 2021 has achieved recovery of the bowel screening programme by October 2021 and the cervical screening programme in December 2021. The plan has enabled improved activity in the three remaining programmes with activity returning to pre-COVID-19 levels for the breast screening and abdominal aortic aneurysm screening.

To support increased activity of the Diabetic Eye Screening programme a novel optometry pathway was delivered from November 2021 to March 2022. This offered participants identified

at low risk of diabetic retinopathy a retinal review with optometry. Over 166 optometrists across Wales supported this novel pathway and each local authority was represented. Over 28,000 invitations and over 10,000 appointments were taken up during this period. The programme needs a more transformational approach to identify a sustainable service model that can be utilised in Wales and that is work that we are taking forward over the next year.



The division has continued to develop and improve service provision which includes:

- ✓ October 2021 the bowel screening programme achieved the next stage of optimisation with roll out to people aged 58 and 59 years. The programme now invites people aged 58 to 74 years of age every two years.
- ✓ The screening laboratory has implemented UKAS accredited service provision to Health Boards of FIT for symptomatic in line with NICE guidance to improve symptomatic pathway and appropriate offer of colonoscopy.
- ✓ Welsh Government confirmed 7.8 million funding over two years to enable equipment replacement for the breast screening programme. Work stream established to procure and implement this significant programme of work which is progressing to plan.
- ✓ The division implemented extended screening intervals for the cervical screening programme in Jan 2022 in line with UK NSC recommendations. Women and people with a cervix aged 25 to 49 years who do not have high risk human papillomavirus identified in their next screen will be invited in 5 years instead of 3 years. There was a strong negative reaction to the social media from the public and a petition to reverse the decision was set up and a debate held in Senedd. A communication campaign is currently being scoped to ensure correct messaging and to rebuild trust.
- ✓ The division has lead the implementation of Non Invasive Prenatal Test (NIPT) as contingency test in twin pregnancies in Wales and evaluated NIPT as contingency test which will inform other UK countries. Wales was the first country to implement this test and the evaluation has recently been published in peer reviewed journal
- ✓ The division has been leads in system working to reach CEO agreement to establish equitable service for surveillance for women identified at very high risk of breast cancer in line with NICE. Implementation of this governed provision is in progress.



## Health Improvement

Our Health Improvement Division was almost totally redeployed to support the pandemic response with staff returning from the end of May 2021, the impact on programme delivery and the scale of the recovery required has been significant.

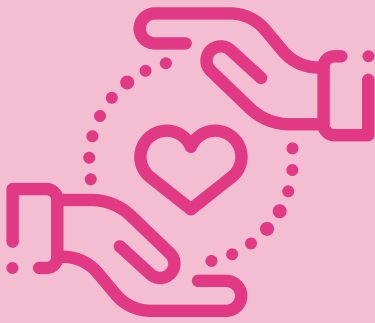
Those Health Improvement programmes and services identified as essential (Help Me Quit; National Exercise Referral Scheme) continued to deliver adapted services throughout the pandemic through digital or telephone delivery. As the recovery phase progressed, a return towards more normal working was adopted with successful innovation being incorporated into the routine delivery options.

The Health Promoting Schools programmes have continued to be delivered in an adapted way focusing on supporting the direct and indirect impact of the pandemic, including supporting the implementation of the Whole School Approach to Emotional and Mental Well-being. Working with the Directors of Public Health in Health Boards, we established dedicated support to implement the strategic framework for Mental and Emotional Wellbeing and produced an assessment tool and associated guidance to support schools to take a deep dive into their work in this area and identify opportunities for improvement. Work is continuing through 2022 to support this work, recognising the challenging environment that COVID-19 has continued to present for our schools. We have also worked with experts from across Wales to develop

an approach to a What Works Toolkit for Mental and Emotional Wellbeing. The recommendations will be implemented during 2022 to support schools to select evidence based interventions that meet their emotional and mental health and wellbeing needs.

The Healthy Working Wales programme reoriented delivery during the pandemic to support employers in preventing Covid-19 transmission and provide a one-stop repository of information and guidance. Research undertaken by Healthy Working Wales with employers identified particular concerns about staff mental health and wellbeing which has informed the development of products including two podcasts on supporting staff mental health. A Commendations Event was held in December 2021 to recognise employer achievements in prioritising staff health and wellbeing and contributing to wider community needs through the pandemic with commendations awarded to small, medium and large organisations across a range of sectors. A report of the key themes arising from the entries has been compiled and a number of case studies developed with Healthy Working Wales award holders to enable sharing of learning and good practice.





## A Commendations Event was held in December 2021 to recognise employer achievements in prioritising staff health and wellbeing and contributing to wider community needs through the pandemic

The Strategic Review and Transformation work for the National Exercise Referral Scheme, Welsh Network of Healthy School Schemes and Healthy Working Wales was halted during the pandemic but has recommenced towards the end of the year and will continue to be taken forward in 2022.

Those priority areas identified for limited restart towards the end of 2020 included support for the implementation of the Healthy Weight Healthy Wales Strategy. We completed work on a revised All Wales Weight Management Pathway for Adults and for Children and Families working with an expert reference group from across the system. These were published by Welsh Government in April 2021 along with a series of Standards for the Provision of Services to People with Overweight and Obesity in Wales which is designed to support both the delivery of services that meet population needs to also to embed a people centres, psychologically informed approach with reduces weight stigma. We also worked with the

Directors of Public Health to establish a Whole System Approach to Healthy Weight Support Team in each Health Board region and to establish three Children and Families Pilots based on new investment. Work has begun to review our approach to surveillance of healthy weight and physical activity to enable effective monitoring and evaluation of public health action on healthy weight across Wales.

In relation to physical activity a limited programme of work was maintained which has led to the development of a behaviourally informed strategic plan to deliver increased levels of active travel to school which has been supported by the Active Travel Board. We have also worked with Welsh Government Natural Resources Wales and Sport Wales to develop the Daily Active Offer to support schools in taking a whole school approach to physical activity.

## Improvement Cymru

Our aim is to support the creation of the best quality health and care system for Wales so that everyone has access to safe, effective and efficient care in the right place and at the right time across the whole care system. To do this we work alongside organisations across Wales to create the conditions, build the capability and make the connections for improvement to flourish.

We are also working with leading experts across the UK and international partners to ensure improvements and innovations in quality and health are driven by best practice and champion a common approach. The Director of Improvement Cymru was appointed to the board of Q Health Foundation and as members of Q, we participate in a system-leader for improvement community.

This connects peer improvement organisations across the UK and Ireland to understand what is needed at a national level to create the conditions for collaborative improvement and learning to flourish. Further strengthening our international presence, our Head of Programmes presented at the internationally renowned IHI Forum on Quality Improvement in Healthcare.

World Patient Safety Day 2021 saw the launch of Improvement Cymru's strategy **'Achieving Quality and Safety Improvement'**, which outlined how the team will work with the health and care system in Wales to ensure everyone has access to safe, effective and efficient care - in the right place and at the right time. The strategy is being delivered through one comprehensive programme called 'Safe Care Together' which has three elements:

1. **Developing an organisational approach to quality outcomes**
2. **Spreading and Scaling Safe Care**
3. **A behaviour change campaign**



We are working closely with health boards and trusts to identify where we can support their priorities and developing agreements to take this forward. The strategy and our approach has been socialised through regular attendance at the national Peer Groups and through continued engagement with key partners, including Welsh Government.



## 1. Developing an organisational approach to quality outcomes

Our new organisational approach to quality outcomes takes learning from high performing organisations and focuses on strengthening a system-wide approach to quality. We have started a pilot of a system-wide approach to quality within Improvement Cymru and the learning from this pilot will develop the approach before rollout to NHS Wales organisations.

To support implementation of our strategy we have commissioned a Patient Safety Leaders Programme which is supporting Assistant Director/Director level individuals within NHS Wales to develop and implement systems of safe care.

Alongside this we have also begun a 90 day Learning Cycle to identify the health and care system challenges currently being experienced in Wales and this learning cycle will recommend key evidence-based enablers which can help to overcome these challenges. It is anticipated that this work will complement policy directives and the findings from visits with health boards and trusts over the coming months and shape our support going forward.

On behalf of Welsh Government we have co-produced with NHS Wales the Duty of Quality Statutory Guidance and begun to develop education materials for NHS bodies and Ministers to support implementation of the Health and Social Care (Quality and Engagement) (Wales) Act in 2023.



## 2. Spreading and Scaling Safe Care

We provide intensive support to organisations for their local safety priorities. One element of this support is the Real Time Demand Capacity (RTDC) Flow Methodology which has been piloted in three sites. The pilot implementation and training has taken place and work is now underway to translate the training to support flow within hospitals and evaluate impact. This will support health boards, trusts and care services with their work to improve safety within their systems.

We have also been working with multiple agencies including Swansea Bay UHB to support a care home to further develop and enhance the co-ordination of care. This will maximise the opportunities to continue to care for people in their homes and minimise the need for conveyance to A&E. This has been a sustained piece of work supporting care home staff and working with agencies to test improvement.

Towards the end of the year we have established a 2 year strategic partnership with the Institute for Healthcare Improvement (IHI) to accelerate our support to NHS Wales through Safe Care Together. This will support the partnership agreements we are establishing with health boards and trusts to determine quality and safety support needs. The partnership will also support the launch of a Patient Safety Collaborative in 2022.

We have also launched new Improvement Cymru Academy training courses including Basics, Fundamentals and Improvement in Practice; and cohort 2 of the Scottish Improvement Leader programme (SciL). These support health and care staff to gain the improvement skills they need to continue to improve the care and support they provide.



### Case study applying the principles of the strategy to our work:

Improvement Cymru has worked with staff at Prince Charles Hospital to sustain improvements in patient flow - in particular to support the site management team in response to recommendations made by Healthcare Inspectorate Wales.

We commissioned learning opportunities with Toyota and brought Toyota on site to support work in the Emergency Department.

The output has been the establishment of a 'Safe to Start' meeting. This meeting brings staff together from across the site to understand patient flow demands, site issues and staffing challenges.

Building upon this work, Prince Charles Hospital became one of three hospital sites chosen to pilot Real Time Demand Capacity.

### 3. A behaviour change campaign

We are developing a behaviour change campaign that engages all levels of health and care staff using a “hearts and minds” approach to create a movement for quality, safety and improvement. To inform this work we have undertaken an insight-gathering piece.

Our partnership with the Health Foundation, Q Lab Cymru, continues to develop and evolve its work. It delivered a range of virtual learning workshops, focusing on [Skills for Collaborative Change](#) and our scoping work on barriers to involving staff and teams in improvement efforts locally was completed. The insights from this research have informed the next stage of our behaviour change support for organisations to engage their workforce in improvements. A working group with cross-representation from all organisations will be creating resources based on insights for local adaption over the summer.

We have also delivered SLAs for mental health and for learning disabilities. For mental health, we delivered training to embed outcome measures into practice; an audit of Early Episode Psychosis services to inform future improvement priorities; development of national Psychiatric Liaison Standards and continued support to Regional Partnership Boards for Dementia Care Standards.

For learning disabilities, we provided continued development support for work streams on children and young people, specialist services and physical health. In partnership with HEIW, we have launched the Learning Disability Educational Framework for healthcare staff in Wales and the Paul Ridd Learning Disability Awareness mandatory training.



#### Case study

##### **Transforming a national laboratory network to meet COVID-19 testing demand** (spanned 20/21 and 21/22)

Microbiology services have been pivotal to the pandemic response. Rapid turnaround of test result helps is essential in ensuring effective contact tracing of positive individuals. The challenge is ensuring equity across a national network of laboratories.

As diagnostic capacity for COVID-19 expanded across Wales large variations in turnaround times were observed. A baseline analysis of the laboratory network noted multiple issues requiring system wide improvement.

A national improvement program was developed, supported by data analysis and modelling to redesign processes, flow of samples and coordination of the network.

Within 8 weeks, in-laboratory turnaround time reduced from 24 hr to 6 hrs and sustained. The network now uses a data led approach to planning and looking to improve times further using improvement methodology.



## Case study

### **Improving the efficiency of COVID-19 sample flow at Betsi Cadwaladr University Health Board (BCU).**

During the COVID-19 pandemic, Improvement Cymru and Microbiology worked together to improve the turnaround times for COVID-19 tests in laboratories across Wales.

Colleagues in BCU were aware of the work undertaken in our Ysbyty Glan Clywd laboratory and approached Improvement Cymru for help in improving the pre-laboratory flow of COVID-19 samples in two areas of their Health Board:

- ✓ Within their Emergency Department – seeking to minimise the time between a patient arriving in ED and the result of their COVID-19 test being reported.
- ✓ Through their four Community Testing Units – with the aim of reducing waste throughout the process of appointment booking, preparation and attendance.

Working in partnership with colleagues from the Health Board and the Toyota Lean Management Centre, Improvement Cymru engaged with detailed on-site review and analysis of current processes. This work resulted in BCU colleagues having an enhanced understanding of their system constraints and opportunities, and being able to take ownership of, and action on, a range of practical improvements in both ED and their regional CTU's.





## Case study

### Breast Cancer Pathway Redesign: impact of change on patients and staff at Cardiff and Vale University Health Board

In 2021, Cardiff and Vale implemented a temporary change to their breast diagnostic pathway from a one-stop clinic to a two-stop process. This change is now being monitored to determine if it is sustainable.

The change saw services users attending two appointments rather than one appointment:

- ✓ a pre-mammographic clinic followed by
- ✓ a clinic attended at a later date

The aims of this change were to:

- ✓ Identify breast cancers quicker via pre-mammogram and fast track to a clinic appointment
- ✓ Increase capacity and throughput so that overall wait times were reduced

This change was implemented due to:

- ✓ Increase in number of referrals post COVID-19 pandemic
- ✓ Reduced clinic capacity due to COVID-19 social distancing and infection prevention & control
- ✓ Increased waiting time to 6-7 weeks for unscheduled care and 6-7 months for routine waits
- ✓ Reduced radiology resource

Improvement Cymru observed multiple clinics, collated timings to create Gantt charts for specific clinics, interviewed staff and worked with Cardiff and Vale Patient Experience to obtain feedback. Finally, the team have worked with the Welsh Cancer Network to collate and analyse data from Cardiff and Vale to observe if there had been significant changes in waiting times.

Overall staff feedback was positive regarding the change of process, with staff opinion being that:

- ✓ clinics run more smoothly
- ✓ there's greater access to Radiologist time
- ✓ there's better use of clinical time and less waste

However staff did raise concerns relating to the impact on patient experience and well-being, citing:

- ✓ concerns regarding levels of anxiety due to time between scan and clinical discussion
- ✓ potential negative impact of two appointments i.e. travel time, parking, childcare and work hours

The data initially shows an improvement for unscheduled care referrals. Further analysis is required to determine if the change sustainable.

## Primary Care

Following the return of staff from redeployment to the COVID-19 pandemic response from July 2021 onwards the Primary Care Division began work on an expanded and ambitious programme of work to develop a coordinated approach to prevention in primary and community care; the transformation of health and care services and supporting and leading improvements in oral health and dental services in Wales.

The prevention portfolio developed in response to emerging priority areas highlighted by the pandemic, in particular the need to address obesity prevention and to support wellbeing through primary and community care. Our key areas of work have focused on:

- ✓ Establishing, designing and leading the All Wales Diabetes Prevention Programme.
- ✓ Leading developments to support Obesity Prevention in primary and community care.
- ✓ Coordinating the Social Prescribing deliverables in the Connected Communities Strategy and supporting the development of Welsh Government's national framework for social prescribing.

Our transformation work has varied over the last twelve months focusing on providing the building blocks for cluster working and maturity, population health, prevention and service development as primary care starts to recover from the pandemic. Our work has focused on core public health deliverables in addition to supporting and providing public health input into the work of the Strategic Programme for Primary Care and contract reform. These include:

- ✓ Strengthening the Greener Primary Care Framework and award scheme with a formal launch planned for June 2022
- ✓ Contractual levers for prevention activities in primary care informed by evidence reviews
- ✓ Supporting the eye health improvement agenda through public health specialist advice
- ✓ Progressing the veteran health guidance for general practices in Wales alongside key partners with a launch planned in June 2022 to support Armed Forces Day.

We delivered a Primary Care Model for Wales and Accelerated Cluster Development implementation monitoring and evaluation plan setting out how these transformation ambitions will provide assurance of progress, shared learning, and support joining up of local and regional plans across Wales.

Dental Public Health consultants and other team members made significant contribution to the delivery of our COVID-19 response during 2021/22. In addition to our contribution to the organisation's pandemic response, we provided policy and implementation advice and support to the dental policy branch within the Welsh Government, different teams within the Health Boards and dental services in reducing risk of COVID-19 transmission through dental setting while delivering essential dental care. All dental public health programmes (Designed to Smile, General Dental Services Reform Programme, Dental Epidemiology Programme) were suspended at the start of the pandemic. Engagement with stakeholders especially Community Dental Services to restart the Designed to Smile and Dental Epidemiology Programme in Wales began in early 2022.

## Safeguarding



Public Health Wales recognises safeguarding is fundamental to the quality and safety of services and functions we deliver. We have in place Safeguarding arrangements to access advice and support, mainly provided by the Named Professional for Safeguarding.

The all Wales Safeguarding Maturity Matrix (SMM) annual assessment is the main assurance tool to provide assurance on our current position and to identify where improvements need to be made. A cross organisational peer review process is well embedded in the approach of the NHS Safeguarding Network and Public Health Wales participates in this process and has identified this year's assessment scores and improvement actions as seen below.

Further information is provided in our [Safeguarding Annual Report 2021/22](#). Whilst improvement has not been evident in the maturity scores during the past two years, this has been due to the impact of COVID-19 mobilisation on key staff. The proposed improvement plan will be included in this year's SMM submission and will focus on further improvements in the areas identified.

### The key achievements for 2021/22 included:

Bi monthly Safeguarding Ambassador Meetings were established with the newly appointed Named Lead for Safeguarding, a TEAMS channel was created to share a wealth of Safeguarding information, including Safeguarding Network Bulletins, training opportunities and legislative updates. Feedback has been gained through the development Microsoft Forms so that meetings can be improved and shaped by the Safeguarding Ambassadors professional needs

Work has commenced on completing The Right Way: A Children's Rights for submission to The Children's Commissioner for Wales. Directorates within Public Health Wales will be supported to complete the matrix and consideration will be a made to engage the Young Ambassadors in this piece of work

The Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV) Group 2 Training compliance has improved following the development of a virtual delivery platform

Working in collaboration with screening a bespoke training package has been developed and delivered to ensure members of the public accessing screening services who lack capacity have best interest decisions made. The consent form 4s (consent form for those lacking capacity) has been implemented in AAA screening, with the aim of implementing in all screening services using a quality improvement methodology.



The Social Services and Wellbeing (Wales) Act 2014 places a duty on Public Health Wales to engage with Regional Safeguarding Children and Adult Boards. Public Health Wales is committed to partnership working and will participate in safeguarding processes for investigating and learning where an issue has arisen in the context of services or functions provided by the organisation.

Due to the national context of our organisation, we have written to the Regional Safeguarding Boards and proposed being a corresponding member for the operational matters relating to Safeguarding Board business and attendance for specific agenda items and to provide the annual report for assurance. Designated Safeguarding Professionals from Public Health Wales also attend regional safeguarding Boards to provide independent health advice in relation to safeguarding.

Other examples of partnership working also includes:

- ✓ The NHS Wales Safeguarding Network and its subgroups
- ✓ Public Health Wales continues to maintain links with all Local Authorities across Wales
- ✓ Children's and Older Persons Commissioners Office
- ✓ Live Fear Free Helpline



## Data, Knowledge and Research

The team were largely deployed in support of the response to the pandemic until the summer of 2021. The return of staff to their core duties coincided with new leadership for the Directorate when Iain Bell joined to lead the function.

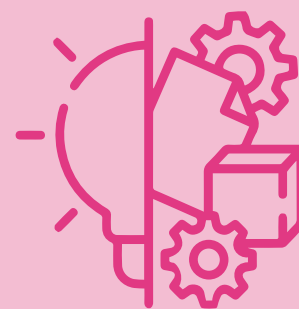


Data, Knowledge and Research Directorate supported the response to the pandemic for example with rapid research on contact tracing and publication of the COVID-19 Recovery Profile. Public Health Wales, through its Research and Development office, has led on and provided strategic oversight and coordination for the delivery of COVID-19 vaccine research across Wales. This has supported the Welsh Government's commitment to ensure that the people of Wales are able to access vaccine research opportunities.

Work carried out by the directorates Research and Evaluation team has been used by Welsh Government to inform policy and action, as well as contributing to international knowledge sharing on COVID-19. The following reports have been produced;

- ✓ ***Self-isolation confidence, adherence and challenges: behavioural insights from contacts of cases of COVID-19 starting and completing self-isolation in Wales;*** this report was presented to Welsh Government and at the Public Health Science Conference (November 2021) and was subsequently used to inform policy in Wales as well as informing some of the work at the Response Centre at Public Health England.
- ✓ ***Emerging Drivers of Vulnerability to Health Inequity in the Context of COVID-19: Perspectives and response from the Voluntary and Community Sector in Wales;*** featured in the December 2021 issue of EuroHealthNet Magazine as well as being discussed at the Vaccine Equity Committee and 'unanimously welcomed' by the members of the committee.
- ✓ ***Understanding and addressing the barriers and facilitators for influenza and COVID-19 vaccine uptake among NHS employees in Wales: Qualitative insights and co-produced interventions;*** The report was used by Health Boards across Wales to inform best practices around vaccine roll outs among NHS employees.
- ✓ ***Unpaid carers in Wales: The creation of an e-cohort to understand long-term health conditions amongst unpaid carers in Wales.*** Welsh Government launched the Strategy for Unpaid Carer: delivery plan, which identified this programme of work as sources of evidence to measure success and progress across all four of the key priorities identified in the plan in the Strategy for Unpaid Carers.
- ✓ ***COVID-19 Recovery Profile.*** The Observatory & Cancer Analysis Team (OCAT), continued to develop and refresh this interactive profile which provided an overview of the wider harms of Covid in relation to mortality, NHS service provision, screening and immunisation, health behaviours and mental wellbeing and the wider determinants of health. The team also provided weekly ONS mortality updates for the PHW Rapid Covid-19 Surveillance dashboard.

Analysts within OCAT are leading the development of a Wales Public Health Overview dashboard. The dashboard project is using Agile methods to ensure a user-centred approach to its development. We are taking a data science approach focusing on automation of outputs which will be deployed to PHW's Microsoft Azure Cloud instance.



The Public Health Wales Evidence Service has been a core member of the COVID-19 Evidence Centre Collaboration. The centre is funded through Welsh Government, with the aim to ensure the most up to date and relevant evidence on Covid-19 and its impacts, is made available to a wide variety of stakeholders to aid in planning and decision making. The centre provided rapid reviews to aid emergency planning and continues to support efforts to rebuild and live with covid.

The Public Health Wales team have led work on:

- ✓ The effectiveness of innovations to support patients on elective surgical waiting lists (2022)
- ✓ Barriers and facilitators to the uptake of personal protective behaviours in public settings (2022)
- ✓ The effectiveness of infection prevention and control measures applied in education and childcare settings for children (2021)
- ✓ Vaccination uptake (barriers/facilitators and interventions) in adults from underserved or hard-to-reach communities (2021)

Although many individuals were deployed to the direct Covid-19 response, the **Welsh Cancer Intelligence and Surveillance Unit (WCISU)** managed to continue work on whole-population cancer registration and complete 2019 data.

Official statistics on cancer survival, incidence and mortality were still produced, and WCISU continued to provide considerable support to health boards in managing and investigating concerns about numerous possible community cancer clusters.

Resources were diverted to leading a new population cancer research collaboration DATA-CAN Cancer Collaboration Cymru with Swansea University's SAIL Databank, Health Data Research UK, and others. In the first instance, the priority has been rapid research of the effects of the pandemic on cancer diagnosis and outcomes.





## Achievements so far include

### **Impact of the SARS-CoV-2 pandemic on female breast, colorectal and non-small-cell lung cancer incidence, stage and healthcare pathway to diagnosis during 2020 in Wales, UK, using a national cancer clinical record system**

Presenting early findings to Covid-19 Evidence Centre; Welsh Government Covid-19 Technical Advisory Group; Wales Cancer Board; Welsh Cancer Network Clinical Groups; Public Health Wales Research and Evaluation conference. The research has now been accepted for publication by the *British Journal of Cancer*.

### **Developing a near real-time cancer diagnosis dataset based on pathology data received for cancer registration**

This will be included in the Wales Public Health Overview dashboard for near real-time cancer diagnosis surveillance to monitor the effect of the pandemic. Led by WCISU, the data has also been analysed alongside similar from Northern Ireland and Scotland to compare pandemic effects across countries. This will imminently be submitted for publication.

### **Developing a near real-time cancer diagnosis dataset (The RCDD) based on updated linkage of multiple clinical and healthcare datasets within the SAIL Databank**

This is currently being analysed to understand cancer diagnosis, stage and health care pathways for 20 cancer types from 2019 and into 2022.

### **Agreement of a proposed programme of Covid-19 and cancer research to inform policy in Wales with Covid-19 Evidence Centre and National Cancer Clinical Director for Wales, subject to funding**

This programme includes the previously listed outputs.

WCISU has continued to participate in international research that informs Welsh policy and health services, especially the International Cancer Benchmarking Partnership. WCISU will also contribute to leading the patient and population health theme of the Wales Cancer Research Strategy with the Wales Cancer Research Centre.

#### Publication highlights in high-impact journals over the year include:

- ✓ Risk factors and prognostic implications of diagnosis of cancer within 30 days after an emergency hospital admission (emergency presentation): an International Cancer Benchmarking Partnership (ICBP) population-based study. April 2022. *The Lancet Oncology*
- ✓ International variation in oesophageal and gastric cancer survival 2012–2014: differences by histological subtype and stage at diagnosis (an ICBP SURVMARK-2 population-based study) November 2021. *Gut*
- ✓ A summary of the updated report on the incidence and epidemiological trends of keratinocyte cancers in the United Kingdom 2013-2018. September 2021. *British Journal of Dermatology*
- ✓ Life expectancy inequalities in Wales before COVID-19: an exploration of current contributions by age and cause of death and changes between 2002 and 2018. April 2021. *Public Health*

The pandemic has had major impacts across many aspects of public health. However, the directorate has continued to deliver, develop and where possible, expand its scope of working including;

- ✓ Establishing a Real Time Suicide Surveillance System (RTSSS)- Working with Welsh Government, the Police and NHS Wales Health Collaborative. This will provide timely information to contribute to monitoring of the impact of the pandemic.
- ✓ The Child Death Review Programme monitored deaths by possible suicide during the pandemic and undertook a rapid review of possible suicide deaths in children (under 18 years) in 2021, a summary of which is published as an appendix of the Patterns and Trends of child deaths in Wales (2011-20) report, available here; <https://phw.nhs.wales/publications/publications1/patterns-and-trends-of-child-deaths-in-wales-2011-2020/>
- ✓ Congenital Anomalies Registration and Information System (CARIS) collected pandemic response specific data and produced an official statistics report in Autumn 2021.
- ✓ The collection of data for the Child Measurement Programme (CMP) was severely impacted due to the pandemic. A review of 2019-2021 data and engagement with external stakeholders started in Autumn 2021.



The Public Health Wales Research and Development Office is providing a '**One Wales**' response and strategic oversight for all COVID-19 trials to support the delivery of COVID-19 Vaccine Clinical Trials across Wales, in partnership with HCRW. The team has supported nine COVID-19 vaccine trials, including one looking at novel antiviral COVID-19 treatments, with over 2,123 participants from across Wales recruited to these studies.

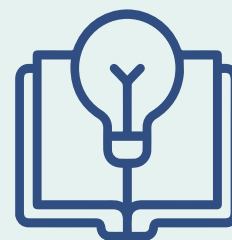
Aware of the major impact the pandemic has, and will continue to have, on the wider determinants of health, we have provided evidence support to the developing Universal Basic Income pilot. We have also reported on whether any job is better than no job.

The Directorate has also begun to develop user-centred approaches to design and development.



- ✓ We have contacted users of our products to seek feedback and help improve these for the year ahead.
- ✓ Begun a mapping of our research activity to develop a new research and evaluation strategy that will be published in 2022/23.
- ✓ Begun developing AGILE development skills to improve our services by working with Screening Services to undertake a discovery phase on Diabetic Eye Screening and also on development an overview dashboard of public health in Wales.
- ✓ Begun the development of a 'Public Health Overview dashboard' taking an 'Agile' user-centred approach using cutting edge technology;
- ✓ And are recruiting and investing to development our capability and capacity on data and data science.

# ORGANISATIONAL LEARNING, KNOWLEDGE AND OUR COVID-19 NARRATIVE



## Collecting and collating learning

As an organisation we must continue to learn from our fast response to COVID-19. The pandemic has changed what we do and how we do it, which means that we have a significant opportunity to use what we have learned to shape future services and processes. It is also important that we can show we have a clear record of our role and actions during the pandemic, supported by our decisions, performance and management. This is particularly important for supporting any public inquiries and future research.



During the pandemic, we introduced new services and roles and have changed how we work. Some of our programmes and services were paused and were subsequently reactivated using new ways of working. Many different opportunities for learning arose and it is important that we capture this knowledge and why and how we made decisions, so that we can use it as the demands and requirements on us change.

Our organisation is preparing at pace for the COVID-19 Public Inquiry. We have a dedicated pool of resource identifying, capturing, recording and securely storing data, information and evidence. We are building an Organisational Narrative of events and occurrences, telling the story of how our organisation was ready for the pandemic, how our organisation reacted and subsequently responded to the pandemic, and how our organisation has recovered from the impact of the pandemic. Our story will support the evidence collected and presented at the COVID-19 Public Inquiry.





# ENABLING THE ORGANISATION



**Our enabling functions are pivotal to the successful delivery of our public health priorities and in supporting wider organisational recovery. Enablers have a critical role to play in the leadership and delivery of a number of major areas of work, alongside our role in the continued response to COVID-19 and as the organisation continues to move towards recovery and in the delivery of our full range of statutory functions and activities.**

## Long Term Strategy Review

As a result of the significant challenges that Wales has faced over the last two years, we agreed to undertake a review of our long term strategy, 'Working to Achieve a Healthier Wales' to ensure that our Strategy is fit for purpose and will meet future public health challenges and opportunities that Wales will face as we recover from the pandemic.

The ongoing response and potential impact of the Omicron variant meant that there was significant pressure on the health and social care system and our focus remained on response, reactivation and staff well-being. We realised that the willingness to engage was high but opportunities were low and as a result it was agreed that we needed to allow additional time and opportunities for engagement over the coming year.

## This will allow us to:



Create more time for effective engagement and good conversation both internally and externally



Ensure we facilitate and create space for cross-organisational discussions



Enable professions and groups to come together to shape and inform proposals



Undertake public engagement utilising existing channels and mechanisms



## Informed decision making

We have adapted our decision-making as we continue to progress through the pandemic, and ensured that our decisions were consistent, proportionate, clear, timely, driven by the quality and availability of information and taken at the appropriate level. We have built on the progress made so far to secure value, achieve benefits, quality and improvement and plan how we manage risk.

Throughout the last 12 months, the Board has continued to review its governance arrangements and has made a number of changes to how it works. We have continued to maintain our governance standards and the variations to our standing orders (written rules which regulate our proceedings) throughout the pandemic.

You can find more information on our governance arrangements and decision-making in the Corporate Governance Statement.

## Risk Management

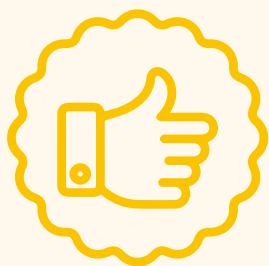
Managing risk is essential to running a successful organisation. It should be at the heart of decision-making and allocating resources at both an operational and planning level. It should aim to identify opportunities to innovate and invest, alongside the need to reduce risks.

During the year we have reviewed our strategic risks and corporate risks to reflect the change in context of our response to the COVID-19 pandemic and the reactivation of services.

In addition to the risk registers, a significant piece of work was completed to introduce a Risk Management Development Plan. The plan consolidates the good work that has been done over the past five years to learn lessons from the way risk has been managed throughout the pandemic and to take Public Health Wales further along the journey to becoming a high performing organisation in terms of its risk management arrangements. The plan includes work on risk appetite, training and development at all levels, and the introduction of the Risk module from the Once for Wales Concerns Management System.

You can find more detail about how we manage risk in our Corporate Governance Statement.





## Quality and Improvement

We aspire to be an exemplar in quality, improvement and innovation and is pursuing an organisation wide approach to managing for quality. We are committed to operating as a system designed for managing quality, focused on continuous improvement and innovation and driven by the needs of the population we serve.

This in turn will create a culture and environment that supports our staff and provides a great place for staff to work and thrive. This approach supports recovery to a new future following the COVID-19 pandemic and achievement of our strategic aims.

### The Health and Social Care (Quality and Engagement) (Wales) Act 2020 ('the Quality Act')

The Health and Social Care (Quality and Engagement) (Wales) Act 2020 ('the Quality Act') will be in shadow form by October 2022 and enacted in April 2023. The Act is underpinned by two Frameworks: Quality and Safety Framework, and the Learning and Improving, and National Clinical Framework: A Learning Health and Care System.

In preparation for the implications of the Quality Act we published our Quality and Improvement Strategy, which was approved by the Board in May 2021.

We have further approved the 'Quality as a Business Strategy' approach for the organisation.

### Integrated Governance Model

The adoption of an Integrated Governance Model was identified as a key enabler for Public Health Wales becoming a high performing organisation and in reaching our next level of maturity. Integrated governance provides a holistic and joined-up approach to our processes, procedures and reporting as well as culture, competency to support effective governance structures.



## Putting Things Right

We welcome concerns (incidents, complaints and claims) as a way of improving the services and programmes we provide. We accept that we do not always get things right and sometimes fail to meet your expectations. When this happens we are committed to doing what we can to put things right and learn from complaints so the same thing does not happen again. As such, we have systems in place for recognising when things go wrong, investigating why problems happen and making changes if appropriate.

Feedback and learning is important to us as it gives us the opportunity to improve and add to our services and programmes. Also, it is important that people feel that they have been heard and treated with respect, and that they receive an open, honest and prompt response to their concerns. We continue to manage concerns under the NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulation 2011.

### **In 2021-2022, we received 94 formal complaints**

There were three main themes to the complaints, as explained below. We have added examples of the type of complaints received and the lessons that have been learned from them.

#### **1. Guidance / Procedures / Policies**

The two main types of complaints received were dissatisfaction with Public Health Wales guidance for care homes during the COVID-19 pandemic and the dissatisfaction with the extension to the CSW routine screening interval period.

#### **2. Attitude / Behaviour**

Another common complaint type during this period is attitude and behaviour, particularly attitude of staff members towards service users.

#### **3. Equality / Language**

The majority of these complaints sit within the Screening Division and many are relating to dissatisfaction with a Public Health Wales BSL YouTube Video relating to Screening.

### Learning Example 1

A number of complaints were made regarding the extension to the Cervical Screening routine interval period from 3 years to 5 years.

The learning taken from these complaints is that when producing public messaging on changes to services, access / links to information and evidence around these changes should be provided as it is clear from the complaints that the public want this information.

Another learning point is that social media may not be the most appropriate platform for communicating such changes due to the limited number of characters provided.

Following receipt of the complaints, action was taken to amend the public communications plan and further review to be undertaken regarding the use of social media for such changes. A number of mainstream media interviews were also given by members of the Screening Division to correct some of the misunderstanding and information gaps.

### Learning Example 2

A complaint was received from a service user of one of our screening programmes who felt that there was a lack of warmth displayed by our staff member during their appointment. The complainant stated that there were no introductions given by the staff member and that they were made to feel like an inconvenience.

Learning points taken from this complaint are that, as a result of wearing PPE, there is a requirement for clear communication along with additional effort to communicate with warmth and friendliness, due to the loss of visual cues such as facial expressions. It is also essential to ensure that staff are regularly attending customer care training.

Action was taken following receipt of this complaint to communicate with staff within relevant areas to remind them of the need to communicate clearly and with warmth at all times, especially when wearing PPE.

### Learning Example 3

A number of complaints were received regarding a BSL Video around Screening Services that was published on the Public Health Wales YouTube channel. The video had been produced as a community co-production project and the BSL signing was undertaken by a service user and volunteer, who was not a qualified or registered BSL translator. Complaints were received stating that the BSL translation was below the standard expected.

The learning points identified are:

- ✓ The need to ensure that when working on community projects on the production of accessible information there are QA measures in place for reviewing and approving such resources.
- ✓ There needs to be a clear structure in the organisation to identify suppliers for accessible information, similar to the Welsh Language Framework.

Following receipt of the complaints, discussions took place between Screening and the British Deaf Association to review the current BSL information and to review how to re-make the BSL video. An action as recorded in the investigation to undertake further work to consider an organisational suppliers list, improve procurement and implement a more robust quality assurance procedure for this type of material.

### Our Estate

Our estate covers the breadth of Wales. Whilst Welsh Government guidance remained that staff were encouraged to work from home during the pandemic, we have recognised there are both business needs and wellbeing needs that require staff to utilise our buildings. Having safe and suitable places to work is a really important enabler to getting our work done. All of our buildings have had specific measures in place to ensure they are safe for staff who have needed to utilise them. Work spaces remained socially distanced and masks required when walking around the buildings.

It's really important that we ensure the working environment is welcoming and coming into work is attractive option for staff which will assist with the rollout of 'Work how it works best' pilot. Over the next few months, we hope to see staff using our premises more, maximising the benefits of reconnecting and collaborating. At the same time, staff are encouraged to balance 'on-site' working with the flexibility of working remotely, as your role allows in line with the 'Work how it works best' pilot. The Executive Team will also be discussing the organisation's position on social distancing and mask wearing in line with the guidance from Welsh Government and other organisations.

# OUR PEOPLE



We have mounted an unprecedented and sustained response to the Coronavirus pandemic. The nature of our response has evolved significantly over this period and involved the mobilisation of staff from across the organisation. Alongside this, we also commenced work around the longer-term direct and indirect public health implications on the people of Wales.

Our progress to date is a result of the efforts and commitment of our staff. We need to truly recognise the impact that this situation has had on our people, both personally and professionally, and keep a meaningful focus on ensuring we prioritise and support our staff's well-being, welfare and resilience.

During this period, our plans have necessarily addressed shorter-term needs but our thinking has been guided throughout by our longer-term vision of an inclusive, engaged, sustainable, flexible and responsive public health workforce. Actions to grow our workforce capacity to better respond to the needs of the population and to safeguard the well-being of our workforce have been core to sustained service delivery and some progress has been made against the key strategic aims of our People Strategy (2020-2030).

## Our Workforce to achieve a healthier future for Wales



### Our ambition

To develop a flexible, sustainable and thriving Public Health Wales workforce with the capacity, capability and desire to successfully deliver our Long Term Strategy.

### Our Values

*Working together  
with trust and respect  
to make a difference.*





Our long-term people ambition is to develop a flexible, sustainable, diverse and thriving workforce with the capability and capacity to deliver our strategic priorities. To guide this work, we have developed nine themes, underpinned by a set of actions, which are outlined in our People Strategy.

Our people are critical to the achievement of our significant long-term ambitions. We have a diverse, multi-generational and multi-disciplinary workforce and we need to ensure that we provide all of our people with the environment, skills and knowledge they need to meet the challenges ahead. We want to attract and retain people in public health, to deliver our Long Term Strategy and ultimately to create a positive impact in the communities we serve.

We continue to face challenges which impact on the work we do and our workforce such as the availability of staff, new ways of working and expectations and perspectives of staff. Factors such as an ageing population, larger numbers of people working to a later age, socio-economic challenges, the impact of the pandemic, climate change and the European Union transition all affect our own staff as well as the wider population of Wales.

Our response to the pandemic necessitated new relationships to be established quickly across the system with existing partners and new

organisations. This has created opportunities for staff to forge new links and networks, which will be of value longer term. Relationships, partnerships and systems leadership are crucial to recovery, response and the Long Term Strategy of the organisation.

Wales has committed, as part of the Four Nations Health Protection Oversight Group, to lead on workforce development for health protection, which will need to establish a specific focus on developing and modernising the Health Protection workforce as a key aspect of the vision of strengthening the health protection system across the four UK Nations. This has been determined to be a high priority in light of immediate issues, for example, recruitment and retention (including the insufficient capacity of core health protection specialists) which require rectifying.

The organisation received investment to strengthen and expand our health protection resource, which has been pivotal in ensuring the strategic resilience of the organisation and protecting the health of the Welsh population. We continue to recruit additional staff in order to ensure we have a resilient and sustainable workforce that is able to meet any future health protection requirements. Recruitment activity has increased dramatically and we have expanded our use of social media for attraction of passive candidates.

## Sickness absence rates

We reported a 12-month rolling sickness absence percentage of 4.26% between April 2021 and March 2022.

## Staff Wellbeing

Our underlying focus remains that of enabling good wellbeing for all staff, ensuring a holistic approach where this focus is at the heart of everything we do.

Our third staff wellbeing survey was launched in November 2021, with the aim of ensuring we have a better understanding of what has worked well and where we need to improve. Analysis has allowed us to identify three key themes to consider further, namely, communications and engaging, the working day, and leadership and line management. We will continue to work on the themes in partnership with staff side colleagues, staff networks and directorate/divisional leads.

Ensuring support for our line managers has been an ongoing priority and we continue to offer tailored Wellbeing Workshops for Line Managers, as well as a parallel course aimed at staff without line management responsibilities. Access to a range of national mental health resources remains in place, as well as our Employee Assistance Programme, via Care first. Support for teams has been available via Team Wellbeing check ins, aimed at providing a safe space for staff to identify actions needed to enhance their wellbeing. Self-care support is available via our Care Space sessions, which are open to all staff. We have continued to offer our new managers development programme which includes supporting managers to have honest conversations, develop healthy working relationships and managing attendance at work, in line with our compassionate policy and processes

“Work Where it Works Best” should launch in May as a twelve month trial of increased flexibility and choice for all, so staff can better harmonise work and life in ways which positively contribute to their health and wellbeing.



## Staff achievements

### **Advancing Healthcare Awards Wales**

Dr Benjamin Johns, a Trainee Clinical Scientist, was named winner of the 'Outstanding student project which helps Wales move forward together' award, for his work on the introduction of molecular technology for foodborne infectious disease outbreaks.

Colleagues from Public Health Wales also played a role in the Hepatitis C rapid testing project, which took the 'Improving Public Health outcomes' award. This innovation was driven by the team in Betsi Cadwaladr University Health Board, however the scheme developed as a consequence of many years of working on testing and treatment pathways as part of the Blood Borne Virus network. Public Health Wales was heavily involved, including support from Jane Salmon, Nicki Palmer and Louise Davies.

### **Royal College of Nursing in Wales Annual RCN Wales Nurse of the Year Awards**

Caroline Whittaker was presented with the winner of the prestigious Lifetime Achievement Award which highlighted her career spanning many different areas of nursing including her time as a military nurse, as an occupational health nurse, in Nursing Academia and now in her role in Quality and Nursing in Public Health Wales. Sharon Williams from Improvement Cymru was named runner-up in the Learning Disabilities and Mental Health Award category.

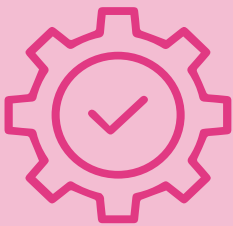
### **National Director conferred as Fellow of the Academy of Social Science**

Iain Bell, our National Director for Public Health Data, Knowledge and Research, was conferred as a Fellow of the Academy of Social Science. Fellows are recognised, after an independent peer review process, for the excellence and impact of their work and their wider contributions to the social sciences for public benefit.

# CONCLUSION AND LOOKING FORWARD



We have set out ambitious plans for the delivery of our work over the next three years. Our focus and actions have been shaped by the population health challenges facing Wales, particularly as a result of the COVID-19 pandemic and long-standing health inequalities. We must also be prepared to meet and respond to future public health challenges, particularly as the crisis in Ukraine evolves.



We recognise in responding to these challenges that we need to maintain our ability to operate dynamically and flexibly, including mobilise resources around key priorities as they emerge. This will require us to continue to review this Plan and make adjustments accordingly.



We will meet these challenges, and successfully deliver our Strategic Plan through the commitment, professionalism and tireless efforts of all staff. Their efforts will allow us to continue to meet these challenges head-on for which we cannot thank them enough.





# WELL-BEING OF FUTURE GENERATIONS



## Health and Sustainability Hub

The Health and Sustainability Hub supports Public Health Wales to meet its duties under the Well-being of Future Generations (Wales) Act 2015, encouraging individuals and teams to 'be the change' and adopt new ways of working. Despite the challenges of COVID-19 the Hub has continued to deliver a range of resources to support the public sector's response, promoting and encouraging a green recovery from the pandemic.

**A summary of key achievements is provided below:**

## Climate Change and Decarbonisation

**Given the climate crisis we are facing, and the interconnections between planetary and human health, the Hub has been supporting a range of activities to progress Public Health Wales's work on decarbonisation:**

- ✓ **Public Health Wales's Decarbonisation Action Plan for 2022-2024**, developed in collaboration with all directorates and service areas, which identifies actions under five headings – carbon management; buildings, estate management and land use; transport and travel; procurement; approaches to healthcare and future service provision. The plan also highlights the links between biodiversity and the Well-being of Future Generations Act, and raises awareness of the importance of embedding the five ways of working into the delivery of actions. An **infographic** to highlight how people can take actions to reduce carbon emissions in work and at home will be published soon.
- ✓ **Carbon Literacy Training**: around 50 staff from Public Health Wales and Health Boards attended Carbon literacy sessions, delivered by Cynnal Cymru, to help people understand the links between human activity and climate change, empowering individuals, communities and organisations to take action to reduce their carbon emissions. Following completion of an action plan all staff will receive accreditation.
- ✓ **Identifying the impact of the COVID-19 pandemic on our Carbon footprint**: we plan to capture data to assess the impact the pandemic has had on our carbon footprint by gathering organisational data as well as data collected from staff on their personal footprints during working from home.
- ✓ **Supported Facilities and the abdominal aortic aneurysm (AAA) Screening service** to upgrade part of its fleet to electric vehicles and install electric vehicle charging stations at strategic locations across Wales.
- ✓ **Healthy Travel Charter**: the Hub has been supporting progress against the charter commitments including promoting active and sustainable travel as part of the Healthy Travel Charter Day in September 2021.

## Raising awareness

We have continued to develop e-briefings and other resources to capture learning and share best practice to support the implementation of the Well-being of Future Generations Act through a green recovery, identifying sustainable opportunities to support population health:

- ✓ **Green Opportunities e-brief:** Four quarterly editions have been published on a range of topics including biodiversity, the importance of nature for health and well-being, healthy travel and circular economy. They all include a range of information, updates, key facts and tips to follow.
- ✓ **Green Advocates internal Staff network:** established in March 2021, the 86 strong network comes together for informal quarterly lunchtime sessions, enabling discussion, learning and action at an individual and team level. Discussions during 2021-22 have focussed on deforestation, using the Arts to raise awareness and understanding of Climate Change, Sustainable Diets and Sustainability in Action.





## Developing resources and building capacity

**The Hub has developed a range of practical resources and toolkits to support and enable individuals and teams to embed the Well-being of Future Generations Act into their planning and delivery:**

- ✓ **SIFT Healthy Environment Workshop:** launched recently, the 'SIFT' Healthy Environment Planner is a two-hour virtual workshop to enable workplace teams (and individual team members) to identify actions for reducing their environmental impacts. It is based on three themes - decarbonisation, biodiversity, resource efficiency/zero waste.
- ✓ **SIFT Healthy Environment Train the Facilitator Workshops:** to support the Planner, ten sessions were arranged to train facilitators from the public sector to deliver the online SIFT Healthy Environment workshop within their own organisations.
- ✓ **Call to Action Workshops:** Six workshops were held to engage with NHS Wales's staff, working across Health and Social Care in Wales, to identify actions to reduce our impact on climate change. As well as raising awareness of the threat of climate change and impact on staff health and well-being, actions were identified, for both home and work life, to support NHS Wales and Public Health Wales to reduce emissions to achieve net carbon zero.
- ✓ **Be the Change – Sustainable Home and Agile Working:** this is the eighth e-guide in the Hub's 'Be the Change' series of sustainable steps, which teams and individuals in any organisation can action whilst working from home or agilely to contribute to Wales' well-being goals. It covers five areas for sustainability: home workspace, I.T., mental well-being, lunch, and commuting/travel.
- ✓ **Be the Change Well-being Goals Challenge:** this encourages and supports teams and individuals in any organisation to model a choice of six sustainable behaviours, covering the topics slow fashion, plant-based diet, towards zero waste, healthy travel, ethical consumer, and supporting wildlife.
- ✓ **Step Change for a Sustainable Planet – Implementing the UN SD Goals – a toolkit for global organisations:** this has been produced through our participation in the JAHEE (Joint Action on Health Equity Europe) programme to support global organisations to implement the United Nations' Sustainable Development Goals. Sustainable case studies are highlighted across five levels for sustainable change (country, system, organisation, team and individual levels), and a range of practical and graphical resources are included.
- ✓ **'Resources for Sustainable Health':** an e-catalogue of all the Hub's resources will be published soon, bringing together the range of online resources and toolkits produced by the Hub aimed at helping organisations and individuals to consider the natural environment and the health of the planet and people in everything they do.

Link for Health and Sustainability Hub resources:

<https://phwwhocc.co.uk/teams/health-and-sustainability-hub/>

