

Report of the Chief Executive

Board Meeting 25 July 2019

1 Establishment of *Building a Healthier Wales* Co-ordination Group

The ambitions outlined in *A Healthier Wales: our Plan for Health and Social Care*, create a health and care system that works actively with multi-agency partners and the public in order to transform health in Wales. It embeds a primary focus on improving population health by working with others to focus on prevention and early intervention across the breadth of societal factors including the wider determinants, health related behaviours, key life course stages and the optimum model of services in order to achieve the best population outcomes for our nation.

In order for us to collectively transform the health of our population, and meet the demographic, economic and fiscal challenges and opportunities facing us in Wales, a proposal to galvanise action and assets across public, private and voluntary sectors, based on evidence-based priorities to create a managed shift to prevention and transform health outcomes, has been developed. The proposal, referred to as ***Building a Healthier Wales***, will be the prevention element of *A Healthier Wales* and will provide a means of collectively implementing the population health aspects within it. The approach will also help drive the implementation of the ambitious transformation outlined in *Prosperity for All*, the *Well-being of Future Generations Act* and the *Social Services and Well-being Act*.

Building a Healthier Wales contains five key priority areas that span the breadth of greatest impact to transform health and well-being in Wales through a focus on prevention and early intervention. These are:

1. ***Tackling the Wider Determinants*** (With a multi-agency focus on health and housing, and employability)
2. ***Ensuring the Best Start in Life: Optimising our Early Years***
3. ***Enabling Healthy Behaviours*** (With a multi-agency focus on reducing smoking prevalence, promoting a health weight and increasing physical activity).

4. *Minimising the impact of Clinical Risk Factors and the Burden of Disease* (With a specific focus in the community, particularly primary care, with the Emphasis on normalising blood pressure, blood glucose, body mass index (BMI) and cholesterol).
5. *Enabling Transformational Change* (With a multi-agency focus on supporting the cultural, leadership and behaviour change required to deliver this shift in ways of working, delivery models and partnership working).

These priorities were considered at a Health and Social Care Leadership event with cross sector partners in March 2019 and were agreed in principle by all partners. It was recognised that, in order to implement these collective priorities, we would need to transform the way we work and share assets together in order to drive a cross-sector shift to prevention and early intervention. It was also agreed that the current cross-sector governing structures that we have, in the form of the Regional Partnership Boards (RPBs) and the Public Services Boards (PSBs), will be the delivery mechanism in order to engage, involve and align collective action against these priority areas.

Similarly, the relevant all-Wales mechanisms will need to be aligned and mobilised to provide support and resource at a local, regional and national level in order to achieve the transformation that is required.

In order to progress the implementation of *Building a Healthier Wales*, the decision was made to establish a *Building a Healthier Wales Coordination Group* which comprises multi-agency partners. The Group will develop the model to support the implementation of these collective priorities at a local and regional level (the emphasis being through RPBs and PSBs) and align the all-Wales mechanisms to drive and support their implementation and the collective transformation of health and well-being in Wales that will result in measurable improvements in health outcomes.

Huw David, Leader of Bridgend County Borough Council and Health and Social Care Spokesperson for the Welsh Local Government Association, has been appointed Chair of the Group. The Group met for the first time on the 11 July and updates on the progress of the Group will be provided to the Board. The terms of reference are attached as appendix 1 for information.

2 Joint Executive Meeting with Welsh Government

On Friday 14 June, Public Health Wales had its Joint Executive Meeting with Welsh Government. The meeting was part of the formal accountability relationship between Welsh Government and Public Health Wales and formed the end of year accountability review for the organisation. The primary purpose was to consider performance against our approved Strategic Plan (Integrated Medium Term Plan), address any concerns about

quality or performance, our approach to quality and safety across the organisation and the progress in implementing our Long Term Strategy.

This was a very constructive meeting and, whilst acknowledging there are still challenges across a number of our service related functions particularly around recruitment and a number of performance issues that we are addressing, it was a very positive meeting. Welsh Government colleagues recognised us as a continually maturing organisation and complimented a number of significant developments during the year.

3 Meetings with Ministers

On the 6 June, the Chairperson and I met with Jeremy Miles, Counsel General and Brexit Minister. Similarly, on the 25 June, we met with Jane Hutt, Deputy Minister and Chief Whip and on the 16 July, together with Stuart Ropke, Chief Executive of Community Housing Cymru, we met with Julie James, Minister for Housing and Local Government.

These were all very productive meetings during which we had the opportunity to brief them on our strategic priorities and discuss the relevant areas of our work and that related to their respective portfolio areas. A number of actions were discussed and are being progressed.

4 World Health Organization (WHO) Europe Ministerial Health Equity Conference, 11th-13th June 2019

On 11-13 June, together with Mark Bellis, Director of Policy and International Health/Director of the WHO Collaborating Centre, and Mariana Dyakova, Head of International Health, I attended the WHO Europe Ministerial Health Equity Conference in Slovenia.

Both Mark and Mariana were presenting at the conference and I had chaired an External Advisory Group in the run up to the conference with the purpose of drafting a Health Equity Outcome Statement for the conference to approve which was successfully approved at the end of the meeting. This is now going forward as a WHO Europe Resolution on Health Equity for consideration in September 2019.

Also attending the conference was Vaughan Gething, Minister for Health and Social Services, who spoke at the event as part of the ongoing relationship between the WHO and Wales following the visit by the WHO earlier in the year.

This was a very positive event for Wales with the opportunity to showcase the rich policy, legislative and partnership context within the country. A number of elements of the Outcome Statement will involve Wales as one of five influencer countries in the WHO Europe Region and will be further developed as part of a Memorandum of Understanding between the WHO Europe and Welsh Government.

5 Staff Conference

More than 350 colleagues attended our annual Staff Conference that took place on 19 June 2019. Once again, the conference took place simultaneously across three sites in Cardiff, Swansea and Llandudno. Like last year, we used livestream technology to bring people together across the country, linking Cardiff, Llandudno and Swansea together in a sustainable, inclusive way.

Using space travel as a concept, we took delegates on a virtual journey beyond our known limits, helping our staff to think about how far we have come, and the mindset we need to achieve our aspirations and our Long Term Strategy.

We focussed on bringing our strategy to life, helping each member of staff understand the role they play in *Working to Achieve a Healthier Future for Wales*.

We celebrated our immense achievements over the last twelve months and awarded our annual Diolch! Staff Awards, recognising the dedication of our teams and individuals. We spent our breakout time doing improvement science by building and launching rockets – expertly facilitated by John Boulton, Director of NHS Quality Improvement and Patient Safety/Director of 1000 lives Improvement Service and our excellent 1000 lives team across the three sites.

Our fabulous Diolch! Award winners are as follows:

Making a Difference to Wales

Early years Immunisation Team, Anuerin Bevan Local Public Health Team

Driving Innovation

Cancer Registration Team, WCISU, Knowledge Directorate

Working together

Alwen Mair Salisbury, Senior Public Health Practitioner, Betsi Cadwaladr Public Health Team

Making a Difference to Public Health Wales

David Heyburn, Microbiology Division, Public Health Services Directorate

Star Colleague

Hannah Avoth, Quality Nursing and Allied Professionals Directorate

Chair and Chief Executive's award- Living the Values

David Heyburn, Microbiology Division, Public Health Services Directorate

Chair and Chief Executive's additional awards - Overall Team

Outreach Population Screening for Tuberculosis, A Multidisciplinary team from Newport made up of Anuerin Bevan Local Health Team and The Health Protection Division.

Chair and Chief Executives additional awards – Individual award

Sarah Morgan, Diversity and Inclusivity manager, People and Organisational Development Directorate

Chair and Chief Executive's additional awards – Individual award

Anup Khaki, Consultant in Dental Public Health and Team Lead, Primary Care Health and Wellbeing Directorate

6 Achievement of the Gold Corporate Health Standard Award

Public Health Wales has been awarded a Gold Corporate Health Standard award following a two-day assessment in July 2019. Assessors visited Capital Quarter 2, Magden Park, Microbiology Swansea, Newborn Screening Wales, Wrexham, and Preswylfa across two days.

The Corporate Health Standard award is a mark of quality for health and wellbeing in the workplace, and looks at the work the organisation does to create a positive, inclusive working environment.

Public Health Wales had been previously been awarded both Bronze and Silver awards, and will begin planning for a Platinum assessment in 2021.

This is an excellent achievement for us and I would like to express a big thank you to our wonderful Health and Wellbeing Group who expertly supported the organisation in achieving the Gold Standard with a particular thanks to Jane Rees, our Employee Well-being Manager, for her passion and leadership.

7 Meetings with NHS Chairs and Chief Executives

The Chairperson and I have continued the programme of meetings with NHS Chairs and Chief Executives with the most recent meetings being with the Chairs and Chief Executives of Betsi Cadwaladr University Health Board and Cardiff and Vale University Health Board on the 9 and 11 July respectively.

These were extremely helpful and constructive meetings during which we shared opportunities for working together to improve health and well-being and aspects that the Health Board wishes to lead on for Wales. Both meetings have culminated in arrangements to undertake a Board to Board strategic development session on population health in the coming months.

8 Visit to the Dutch National Institute for Public Health and the Environment (RIVM)

On the 26 June, Huw George (Deputy Chief Executive and Director of Operations and Finance), Quentin Sandifer (Director of Public Health Services/Medical Director), Mark Bellis (Director of Policy and International Health/Director of the WHO Collaborating Centre), Frank Atherton (Chief Medical Officer) and I visited our counterpart in the Netherlands – the Dutch National Institute for Public Health and the Environment (RIVM).

This followed a visit to Wales by our Dutch colleagues in 2017. This was an excellent and very productive meeting during which both organisations shared their opportunities and challenges and identified a number of themes that we will now work on together which included the following:

- ❖ Approaches and methodologies for achieving impact through policy and evidence into practice
- ❖ Environmental health and climate change
- ❖ Data Science
- ❖ Learning and sharing approaches and content for disease monitoring, surveillance
- ❖ Embedding a prevention focus across the system.

We will have a follow up virtual meeting with colleagues to develop these themes into priority areas to collaborate on.

Recommendation

The Board is asked to **receive** this information.

Building a Healthier Wales Coordination Group Draft Terms of Reference

1 Background

In meeting the challenges and opportunities facing our population in Wales, a proposal to galvanise action across public, private and voluntary sectors, based on evidence-based priorities to create a managed shift to prevention and transform health outcomes in Wales, has been developed. The proposal, referred to as ***Building a Healthier Wales***, will be the prevention element of *A Healthier Wales - our plan for Health and Social Care* and will provide a means of implementing the population health aspects within it. The approach will embody the vision within *A Healthier Wales* and help drive the implementation of the ambitious transformation outlined in *Prosperity for All*, the *Well-being of Future Generations Act* and the *Social Services and Well-being Act*.

Building a Healthier Wales contains five key priority areas that span the breadth of greatest impact to transform health and well-being in Wales through a focus on prevention and early intervention. These are:

1. Tackling the Wider Determinants

(With a multi-agency focus on health and housing, and employability)

2. Ensuring the Best Start in Life: Optimising our Early Years

3. Enabling Healthy Behaviours

(With a multi-agency focus on reducing smoking prevalence, promoting a health weight and increasing physical activity).

4. Minimising the impact of Clinical Risk Factors and the Burden of Disease

(With a specific focus in the community, particularly primary care, with the Emphasis on normalising blood pressure, blood glucose, body mass index (BMI) and cholesterol).

5. Enabling Transformational Change

(With a multi-agency focus on supporting the cultural, leadership and behaviour change required to deliver this shift in ways of working, delivery models and partnership working).

These priorities were considered at a Health and Social Care Leadership event with cross sector partners in March 2019 and were agreed in principle by all partners. It was recognised that in order to implement these collective priorities, we would need to transform the way we work and plan together, how we make decisions together and how we track success to

collectively improve health outcomes for our population together. It was also agreed that the current cross-sector governing structures that we have, in the form of the Regional Partnership Boards (RPBs) and the Public Services Boards (PSBs), will be the delivery mechanism in order to engage, involve and align collective action against these priority areas. Similarly, the relevant all-Wales mechanisms will need to be aligned and mobilised to provide support and resource – locally, regionally and nationally, in order to achieve the transformational shift to prevention that is required. Finally, it was recognised that this is just as much about hearts and minds as it is about purposeful and targeted action. Consequently, a social movement will be created to wrap around the momentum and drive to galvanise our staff and our public in order to create the healthiest generation(s) in Wales.

2 Purpose

The *Building a Healthier Wales Coordination Group* represents multi-agency partners. It has been established to develop the model to support the implementation of these collective priorities at a local and regional level (the emphasis being through RPBs and PSBs) and to align the all-Wales mechanisms to drive and support their implementation and the collective transformation of health and well-being in Wales that will result in measurable improvements in health outcomes.

3 Terms of Reference

The terms of reference for the Group are to:

3.1 Consider the outputs from the 12 March event and amend the priority areas accordingly.

3.2 Undertake an engagement process with partners through RPBs, PSBs and national organisations where applicable, in order to a) understand what support is required, b) map the skills and support that are available and c) how these will need to align.

3.3 Following 3.2 above, develop an outline plan to support the implementation of the shared priorities (including support, guidance, resource, capacity and capability building, behaviour change developments, knowledge sharing and an evaluation and outcomes framework) that reflects the implementation within the context of RPBs, PSBs and other governing mechanisms and co-design this with partners.

3.4 Develop an innovative communications and engagement approach as a social movement across sector and society to support the momentum and implementation of *Building a Healthier Wales*.

3.5 Consider any future all-Wales model required to build and maintain the required expertise to implement the *Building a Healthier Wales* priorities in coordination with the local and regional mechanisms. Such a model would include the provision of support, evaluation (and scale up), measurement, tracking of the shift to prevention and improvement in health equity and the building of momentum to transform health in Wales. The Group will outline how such a model will provide a complementary interface with the existing governing structures including RPBs and PSBs.

3.6 Provide advice, oversight and leadership for the managed and incremental shift to prevention within a) the existing budget allocations as applicable (with a particular focus on the £7bn NHS allocation), b) the £10m allocation fund for prevention and early years and c) identify and oversee any other relevant additional funding going into RPBs/PSBs focused on prevention, early intervention and transformation as appropriate.

4 Membership

The *Building a Healthier Wales Coordination Group* will comprise multi-agency partners who represent the cross sector involvement in the movement and the collective responsibility for the implementation of the shared priorities. The members will include:

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

Alison Ward, Health and Social Care Spokesperson for SOLACE and Chief Executive of Torfaen County Borough Council

Future Generations Commissioner or nominated representative

Mark Polin, Chairperson of Betsi Cadwaladr University Health Board

Len Richards, Chief Executive of Cardiff and Vale University Health Board

Kelechi Nnoaham, Chair of the Public Health Directors Group, Director of Public Health Cwm Taf University Health Board

Stuart Ropke, Chief Executive of Community Housing Cymru

Matt Jukes, Chief Constable South Wales Police and Health Partnership lead for the Welsh Chief Officers Group

Chris Davies, Chief Fire Officer South, Mid and West Wales Fire and Rescue

President of the Association of Directors of Social Services (ADSS) Cymru or nominated representative

Sue Evans, Chief Executive, Social Care Wales

Judith Stone, Wales Council for Voluntary Action (WCVA)

Martin Mansfield, General Secretary, Wales TUC

Cari-Anne Quinn, Chief Executive Life Sciences Hub Wales

Frank Atherton, Chief Medical Officer, Welsh Government

Tracey Cooper, Chief Executive, Public Health Wales

Jyoti Atri, Interim Director of Health and Well-being, Public Health Wales

Bronia Bendall, Lead Specialist Advisor: Health and Wellbeing, Natural Resources Wales

Graham Williams, Director of Community Engagement, Sport Wales

Wales Lead, CBI (to be confirmed)

Joanne Moore, Education Manager, Denbighshire County Council

5 Meetings and Support

The Group will support the implementation of *Building a Healthier Wales* at pace. It will review its progress after six months with the view to proposing any longer term all-Wales model and the transition of the Coordination Group into that model at that time. The meeting frequency will be agreed at the first meeting.

The Group will consider the establishment of a small executive group from amongst the members to support the Chair in progressing the business, as appropriate, in between the meetings of the Group.

The Group will be supported by a small secretariat and project team from Public Health Wales and other partners as applicable.