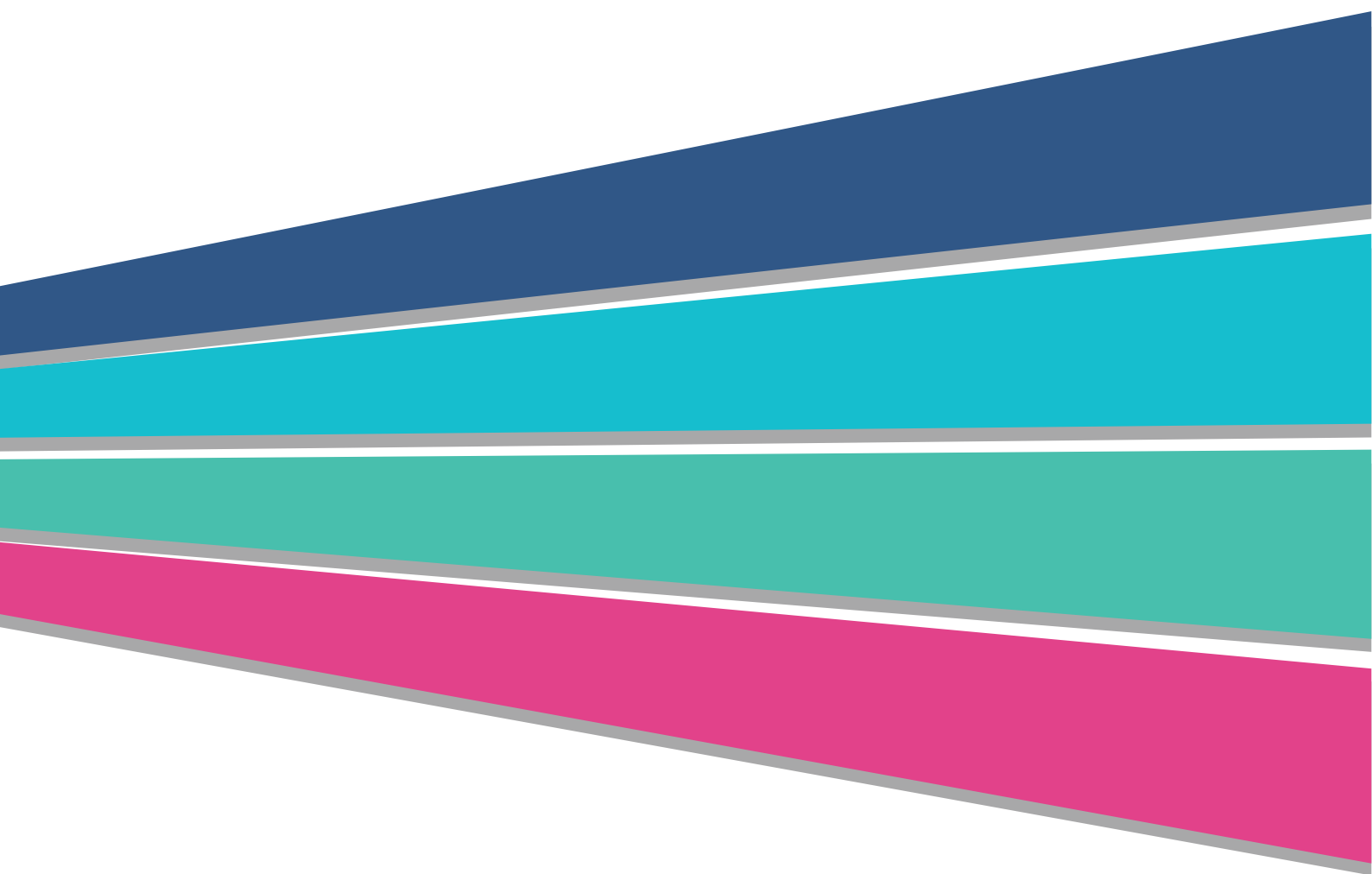


Working Together for a Healthier Wales

Our Long Term Strategy 2023 –
2035 (Detailed Document)

March 2023



Executive Summary

Who we are and what we do

We are Public Health Wales - the National Public Health Agency for Wales. Our purpose is *working together for a healthier Wales*. We exist to help all people in Wales live longer, healthier lives. With our partners, we aim to increase healthy life expectancy, improve health and well-being, and reduce inequalities for everyone in Wales, now and for future generations.

Together, our teams work to prevent disease, protect health, provide system leadership, specialist services and public health expertise. We are the primary source of public health information, research and innovation, to help everyone in Wales's live healthier lives.

Our strategy

Our strategy sets out our vision for achieving a healthier future for Wales by 2035. We are committed to working towards a Wales where people live longer, healthier lives and where all people have fair and equal access to the things that lead to good health and well-being. We will do this through focusing on the delivery of our six strategic priorities, which are described within this strategy. These will also be our organisational Well-being Objectives. We have set out why we have chosen these priorities and the focus of the work that we will deliver under each over the coming years. We cannot deliver these priorities alone. To succeed, we will need to work collaboratively and in partnership with our key stakeholders and the public.

The challenges we face

Our strategy has been shaped by health in Wales and the latest public health intelligence and evidence. It shows us that the Covid-19 pandemic has had profound effects on the people of Wales, which will continue to be felt for years to come. This includes not only the direct health impacts but also the broader and longer-term implications for our health and well-being. The pandemic has also had wider socio-economic consequences that have been felt unequally across our society and disproportionately affected those who already had the greatest health and social needs. This has highlighted, once again, the profound interdependence between population, societal, economic, and environmental well-being.

These inequalities are likely to be further negatively impacted in the coming years as a result of the current cost of living crisis. People's wages and welfare payments are not keeping pace with rising living costs, particularly energy and food prices, meaning that people will not be able to afford the essentials. This will be a long term public health issue, which will affect the whole population and exacerbate existing health inequalities. We also know the impact these challenges, particularly the pandemic, have had on the wider health and social care system.

The current pressure on the NHS and social care is significant and will require the collective efforts of a range of partners to address over the coming years. The direct and indirect impacts of this on the public, including patients and their families, is significant. Alongside this, our focus should be on supporting health equity and ensuring that everyone can attain their full potential for health and well-being.

Climate change is recognised as possibly the most significant global threat that we face. Its consequences will impact all areas of life that are essential to achieve and maintain good health. Urgent action is needed to combat climate change.

A strategy for the future

The challenges that we face are stark. However, we have seen the power and impact that we can have when we mobilise our collective efforts and expertise. Wales has a proud history of community and collaboration. As a country, we have seen the improvements that can be realised at scale through embracing innovation, technological developments and our commitment to collaboration. The Well-being of Future Generations (Wales) Act (2015) provides the enabling legislative driver to enable us to take a long term preventative approach focused on involving the public, collaborating with our partners to deliver integrated solutions as we tackle the challenges that we face today and tomorrow.

This strategy is our response and sets out our role, and how we will work, to meet these challenges and maximise the opportunities presented to us. It sets out the key priorities that we will focus our efforts and resources on addressing. We must seek new and innovative approaches for how we will implement our strategy, building on what works, working closely with our partners and by placing the user at the heart of what we do. Our strategy will be underpinned by a number of enabling strategies and methodologies, such as our Digital and Data Strategy, Research and Evaluation Strategy and Quality as an Organisational Strategy, which will drive and shape the 'how' we deliver, going forward.

Our new strategy will run until 2035 and set out the long term strategic direction for the organisation in line with the Well-being of Future Generations (Wales) Act 2015. We have engaged with our key stakeholders to understand what they consider to be the key public health challenges facing Wales and what role Public Health Wales should play in addressing them. We have embraced the five ways of working set out within the Well-being of Future Generations (Wales) Act 2015 to develop our strategy and will use them as drivers for how we wish to work to implement it over the coming years.

Our role

We will work with our national and international partners, including through networks such as the Internal Association of National Public Health Institutes (IANPHI), to help deliver our strategy. As the National Public Health Institute for Wales, we will work with our partners to protect and improve the public's health. We have focused on ensuring that we articulate within our strategy where we, as Public Health Wales, can add the most value for the people of Wales and our partners, including our role as a system leader, where appropriate.

Our strategic priorities are:

❖ Influencing the wider determinants of health
❖ Promoting Mental and Social Well-being
❖ Promoting Healthy Behaviours
❖ Supporting the development of a sustainable health and care system focused on prevention and early intervention
❖ Delivering excellent public health services to protect the public and maximise population health outcomes
❖ Tackling the public health effects of climate change

For each strategic priority, we have set out system-level outcomes that will help us understand our progress in delivering the strategy. Our focus will be on clearly articulating our specific role in relation to how we:

- ❖ **Inform** partners on the current and emerging threats to health in Wales, the factors which influence health, well-being and inequalities, and the evidence base for action

- ❖ **Advocate** for action to improve and protect health and reduce inequalities
- ❖ **Mobilise** partners across systems to translate evidence into policy and practice at scale to improve population health and well-being and reduce health inequalities
- ❖ **Deliver** evidence-informed services to the public

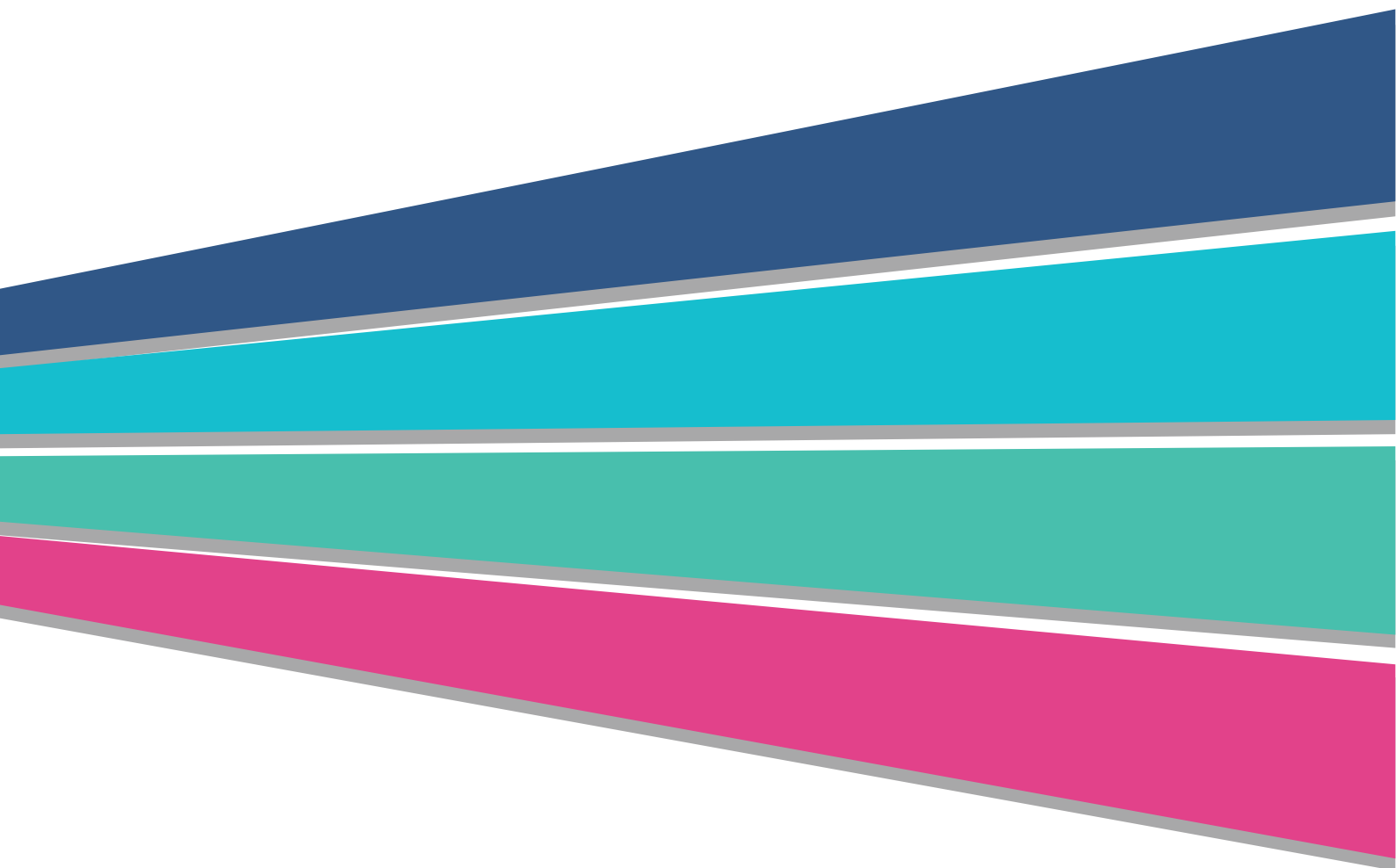
Dynamic and agile delivery

As we begin to implement our strategy, we recognise that we are operating within a volatile and changing environment. This is reflected in our strategic risks, which we have reviewed and updated, to ensure this is a risk informed strategy. As we implement our strategy, we will continuously consider and manage our approach to emerging risks, which have the potential to impact on its delivery.

We therefore need to demonstrate an ability to dynamically respond to new and emerging threats and opportunities. As a learning organisation, we will embed research and evaluation into everything we do to ensure that we are delivering maximum value and impact. This will see us prioritise those areas where we can have greatest impact and flex to respond to emerging issues.

At regular points in the life of this strategy, we will review our strategic priorities and assess our progress to ensure they remain valid in light of changes to both our external and internal environment. This will be underpinned by public health evidence, horizon scanning, user feedback and engagement with our stakeholders.

Strategic Context



1 Our strategic context

A number of **strategic drivers** have shaped and informed the development of our strategy:

❖ Global drivers

The United Nations' 2030 Agenda for Sustainable Development and its underpinning Sustainable Development Goals were a key driver in the development of our strategy and have continued to drive and shape our thinking. Alongside this, our focus is on health equity and ensuring everyone can attain their full potential for health and well-being has been a key focus. This provides an overarching global framing for our thinking on understanding the links between, and need for, urgent action to end poverty and other deprivations, along with action to improve health and education, reduce inequality, and tackling climate change. This closely aligns with the One Health approach, which recognises the need to sustainably balance and optimise the health of people, animals and ecosystems.

❖ Welsh legislative and policy context

A number of key pieces of enabling public health legislation have come into effect in Wales in recent years, which have shaped our strategy and provide an opportunity to support its implementation. These challenge public sector bodies to consider the longer term impacts of decisions, and to support a greater focus on prevention and addressing inequalities. They include:

- ❖ The Well-being of Future Generations (Wales) Act 2015
- ❖ The Health and Social Care (Quality and Engagement) (Wales) Act 2020
- ❖ Socio-economic Duty 2021

A Healthier Wales sets out plans for the long term future vision of a 'whole system approach to health and social care' in Wales, focused on health and well-being, and illness prevention. It is intended to help address the future health and social care challenges facing Wales, including an ageing population, lifestyle changes, public expectation, and new and emerging medical technologies.

Our priorities have also been informed by the Minister for Health and Social Services priorities for NHS Wales, particularly the support and public health expertise that we can provide to the wider system. This will help to ensure that quality, safety, prevention, and good health outcomes are at the heart of the NHS in Wales. In addition, our thinking has been informed by our establishment order and specific statutory functions, including our role as a Category 1 responder.

❖ Health in Wales

The Covid-19 pandemic has had profound effects on the people of Wales and its socio-economic consequences have been felt unequally across our society. They have disproportionately affected those who already had the greatest health and social needs. In Wales, life expectancy and healthy life expectancy have plateaued over the last decade, and we continue to see stark and persistent health inequalities.

People living in the poorest parts of Wales already die more than six years earlier than those in the least deprived areas. The current cost of living crisis will accelerate what were already increasing differences in health between those with more and less money.

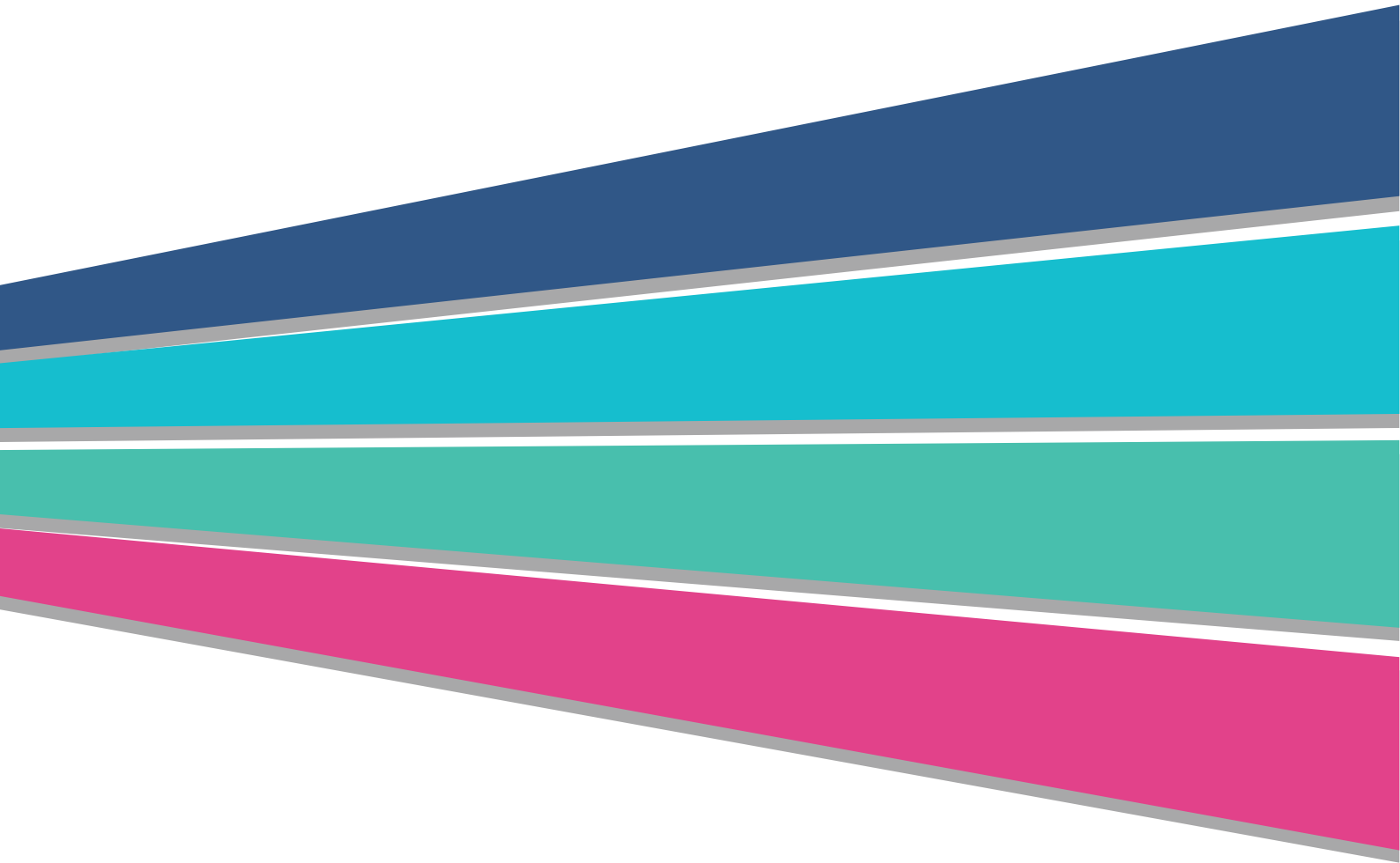
Evidence identified in 'Rising to the Triple Challenge of Brexit, Covid-19 and Climate Change for health, well-being and equity in Wales', has identified that the people of Wales have been majorly impacted by the Triple Challenge. These impacts occur through multiple pathways and determinants of health. For example, the way the Triple Challenge impacts employment, trade and factors which affect health behaviours, such as alcohol consumption, affordability of food and mental well-being.

Our strategy and priorities have been informed by key public health intelligence. It shows that Wales is a country with:

- ❖ an ageing population and low fertility rate with our dependency ratio therefore worsening in the future
- ❖ stark and persistent health inequalities, with female and male healthy life expectancy almost 17 and 12 years lower in the most deprived areas compared to least deprived
- ❖ the gap between the least and most deprived areas in Wales, for premature deaths from non-communicable diseases, has been increasing in recent years, and is now almost two and half times greater in the most derived areas, compared to the least
- ❖ around one third of people following less than three of the five healthy behaviours, including 13.8% of adults in Wales smoking with higher rates reported among people living in the most deprived areas
- ❖ loneliness is twice as likely amongst people living in the most deprived areas
- ❖ a high backlog of untreated need (as of December 2022, there were about 735,000 open patient pathways and around 577,400 individual patients on treatment waiting lists in Wales)

This picture and our understanding of health in Wales has informed the development of our strategy and how we have identified our strategic priorities. Our priorities and the specific action that we will undertake under each is our response to these challenges. We will continue to use the latest public health intelligence and evidence to help us assess the impact that we are having and dynamically adapt, where required.

Our Vision



4 Our purpose statement

4.1 Our purpose

Our purpose is: *working together for a healthier Wales.*

4.2 Our mission

Public Health Wales exists to help all people in Wales live longer, healthier lives. With our partners, we aim to increase healthy life expectancy, improve health and well-being, and reduce inequalities for everyone in Wales, now and for future generations.

Together, our teams work to prevent disease, protect health, provide system leadership, specialist services and public health expertise. We are the primary source of public health information, research and innovation, to help everyone in Wales live healthier lives.

4.3 Vision

By 2035, we will have achieved a healthier future for Wales. We are working towards a Wales where people live longer, healthier lives and where all people in Wales have fair and equal access to the things that lead to good health and well-being.

4.4 Values

Our values are:

- ❖ working together
- ❖ with trust and respect
- ❖ to make a difference

4.5 Overarching outcome

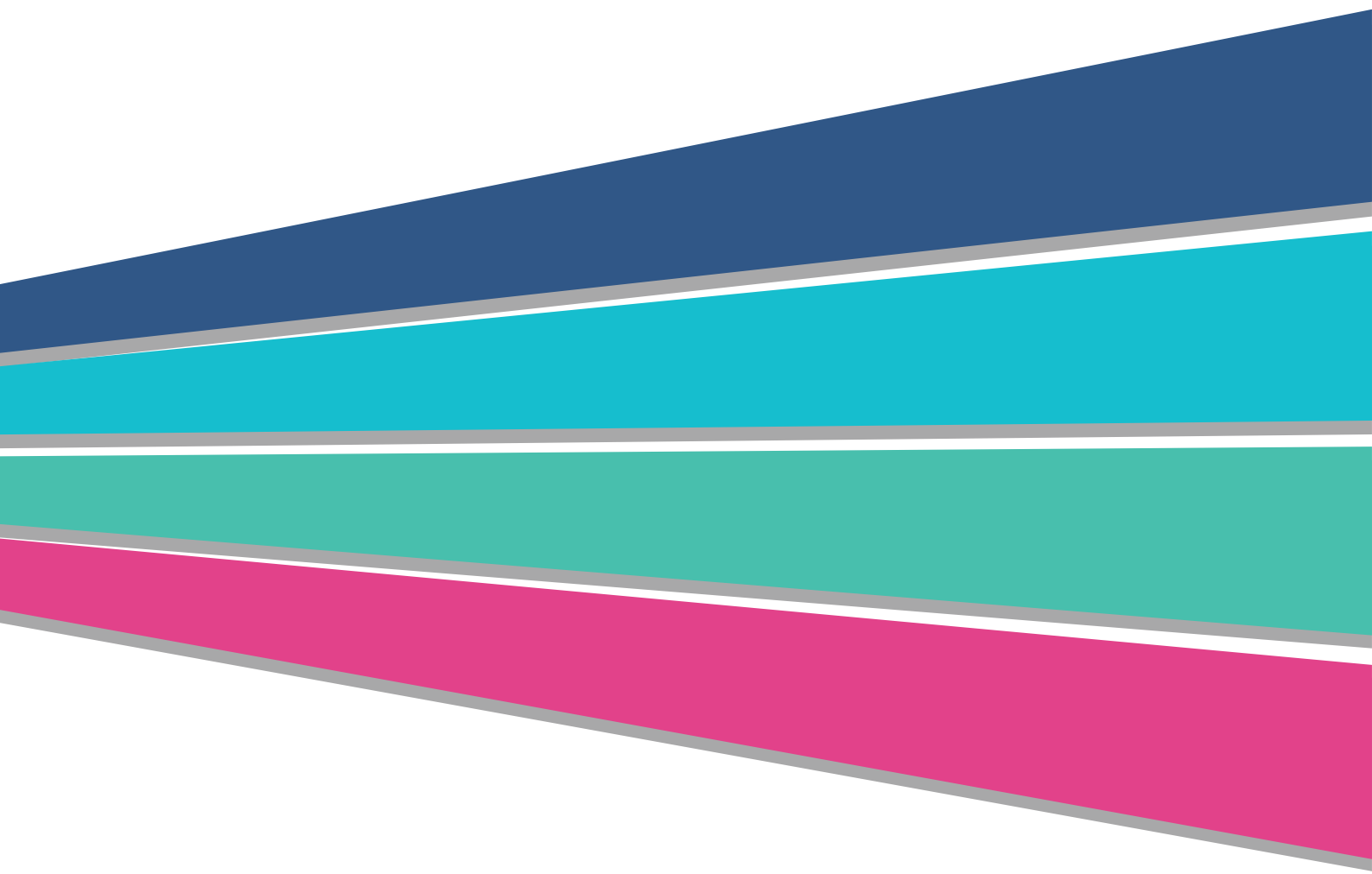
It is essential to understand our progress in Wales towards our vision for a future where people live longer and healthier lives. As a result, we have identified the overarching health outcomes that we seek to influence and support. These are:

- ❖ to increase the healthy life expectancy of adults and narrow the gap in healthy life expectancy between the least and the most deprived

We have chosen this approach as it is one of Wales' National Well-being Indicators and National Milestones. We will measure it through healthy life expectancy at birth, including the gap between the least and most deprived. While we are not solely responsible for this outcome, or every factor determining health and well-being, we will use it to help understand the overall health and well-being of the people of Wales and act as a guide to us as we deliver our strategy.

As we implement our strategy, we will monitor the population outcomes that we have identified within this strategy, as well as develop Public Health Wales specific performance measures. This measurement system will allow us to monitor our specific delivery contributions, and help us evaluate our impact and flexibly adapt where required. We will also monitor our outcomes across all the protected characteristics, wherever possible.

Strategic Priorities



5 Our strategic priorities

The subsequent sections of our strategy set out our strategic priorities for 2023 - 2035. Their development has been shaped by health in Wales, wider global factors and threats, and key legislation and policy. Our strategic risks have also served as a key driver to shape and inform our priorities. Each priority is underpinned by our focus and commitment to reducing health inequalities and health equity. We will embrace the five ways of working set out within the Well-being of Future Generations (Wales) Act 2015 to help us implement each, including working collaboratively with our partners.

6 Strategic priority 1: Influencing the wider determinants of health

6.1 Introduction

Everyone in Wales deserves the opportunity for good health. However, too often people in Wales become ill or die too early because of a lack of the essential building blocks needed for good health. These building blocks include our education and skills, a warm safe home, fair work, money and resources, access to affordable and sustainable transport and healthy physical environments. These conditions affect us from our earliest experiences and throughout our lifetime.

The Well-being of Future Generations (Wales) Act 2015 provides the legislative framework for us to work with others to improve the economic, social, environmental, and cultural well-being of Wales. We will bring public health expertise and evidence, collaborating at multiple levels to influence these determinants, to increase opportunities for a fair chance for health. Influencing these determinants has never been more important. Our experience of the Covid-19 pandemic has shown how all our efforts to improve and protect health are affected by these determinants. Currently, the cost of living crisis is disproportionately affecting the health of our most disadvantaged communities, which is an acute exacerbation of the chronic condition of poverty.

6.2 Overview – why this is a priority

The wider determinants drive health and health inequalities in Wales. Often called ‘the causes of the causes’, the wider determinants drive our health outcomes in Wales. Different experiences of these determinants lead to differences in health outcomes, or health inequalities, which in turn are responsible for a substantial proportion of the total early deaths and ill health of the population of Wales. Those from the most disadvantaged areas of Wales can expect to lose over a decade of life lived in good health compared to those from the least disadvantaged (13 years for men and 17 for women). These systematic, and unfair differences continue across generations.

We can inform, advocate for, and mobilise action on these determinants working at national, local and international levels. As a trusted, evidence informed national public health agency, we can support a health-in-all policies approach, informing and influencing policy development and implementation relating to determinants. We can build the evidence base further, and support and evaluate innovations for solutions appropriate to their context.

We are uniquely placed to bring a public health perspective to devolved areas of national policy in Wales relating to the building blocks for health and well-being such as housing, education, planning, transport, economic development, and devolved fiscal matters. We can make the connection between partners and policies to show how they can contribute to improving health and reducing health inequalities for our population. Our expertise and collaborative approach can also support system wide action at a local level, working with our partners, including health boards and local authorities across Wales. We can work with

agencies to influence beyond Wales where appropriate, including when considering commercial drivers affecting health.

We have legal obligations to work across wider determinants. The Well-being of Future Generations (Wales) Act 2015 requires us to work to improve social, economic, environmental and cultural well-being by maximising our contribution to all seven well-being goals. The goals strongly mirror the wider determinants of health, both being an articulation of the factors needed for good health and well-being now and for future generations. The recent Socio-economic Duty 2021 further requires us to have due regard to reducing the inequalities of outcome which result from socio-economic disadvantage. Action on the wider determinants of health also contributes to the UK's obligations under the United Nations' Sustainable Development Goals.

From the post-industrial heritage of Wales, through austerity, the impact of the Covid-19 pandemic, and the cost of living, the impact of determinants in Wales will continue into the long term, both in ways we can predict and ways we cannot.

6.3 Scope

The wider determinants of health are the social, economic and environmental factors that affect health, well-being and health inequalities. Key determinants include:

- ❖ Good education and skills
- ❖ Fair work
- ❖ Sufficient money and resources
- ❖ Quality, accessible, affordable housing
- ❖ Well-designed sustainable transport
- ❖ A built and natural environment that supports our health and well-being.

Wider determinants relate not only to our living conditions, but also include structural drivers of these conditions, such as economic and commercial forces, political priorities and the unequal distribution of income wealth and power. These structural factors are also referred to as fundamental causes. We also recognise that the relationship between health and these determinants acts in both directions, with health and illness affecting our social, economic and environmental well-being. For example, when we are healthy we are in a better place to learn or participate in fair work.

We will work with partners, bringing evidence and expertise to inform, advocate for and mobilise action on wider determinants in order to reduce health inequalities and improve health and well-being throughout the course of people's lives. We will inform action on determinants, using evidence from multiple sources. This may range from community experiences to surveillance of key determinants, to international research.

We will add to the evidence base through advising on and leading research and evaluation related to the wider determinants and interventions. Opportunities to influence wider determinants lie with the actions and behaviours of policy and decision makers working within complex systems. We will advocate to these decision makers guided by behavioural science approaches and focusing on structural and system level impact.

We will mobilise action on determinants, using systems approaches and insights, developing a common understanding of the pathways and opportunities for impact across different, inter-dependent sectors and policy areas. Our efforts will be shaped by the evidence of the

importance of these determinants for population health and equity, as well as by our unique ability to influence them.

6.4 Objectives

By 2035, we will have:

- ❖ A Wales where people have a more equal chance of living a fulfilling life, free from preventable ill-health
- ❖ Our future generation's health and well-being less impacted by poverty and inequality
- ❖ Secured better and fairer opportunity for children to learn and fulfil their potential
- ❖ Transport, housing and planned environment developments that support people, families and communities to live healthier lives
- ❖ Major decisions on wider determinants which are informed by health impact assessments
- ❖ Supported public and private sector work to maximise inclusive participation in fair work supporting health and well-being
- ❖ Shaped thinking and decision-making on wider determinants policy areas to reduce inequality and improve health through our work with the Senedd and Welsh Government
- ❖ Supported positive system wide change on the wider determinants of health in collaboration with partners locally, nationally and internationally in pursuit of better health and well-being for all

6.5 Outcomes

We will work to support the following system wide outcomes:

- ❖ Socio-economic inequality in life expectancy (Baseline: 7.6 years for male and 6.3 years for female, PHOF)
- ❖ Socio-economic inequality in healthy life expectancy (Baseline: 13.3 years for male and 16.9 years for female, PHOF)
- ❖ Socio-economic inequality in mental well-being (Baseline: 48.92, National Indicator)
- ❖ Children living in income poverty (Baseline: 31%, National Indicator)

7 Strategic priority 2: Promoting Mental and Social Well-being

7.1 Introduction

Alongside the wider determinants of health, mental and social well-being form the foundations of lifelong health and well-being. If the wider determinants provide the conditions for good health, social and mental well-being can be seen as the foundations for healthy people and communities.

Mental well-being comprises a range of different elements; how we think, how we understand our emotions and those of others, how we form healthy relationships and our resilience, how we make sense of our experiences. Mental well-being at an individual level is strongly influenced by the social environment in which we live, work, play and learn. The early years of life are central to the development of the foundations for mental well-being and is influenced by interaction between an infant and their parents or carers and by the parental relationships

within the home. Where these conditions in childhood are not consistent, we see often long term harm to individuals as a result of adverse childhood experiences (ACEs).

Critically wider social networks within families and communities contribute to the social well-being of individuals and communities as a whole – the sense of belonging within communities, community connectedness and the creation of networks which actively seek to engage the whole community are fundamental. Communities which create these conditions are less like to experience loneliness and isolation and are more resilient when faced with adversity and trauma.

7.2 Overview – why this is a priority

There is a growing body of evidence that mental well-being is fundamental to our ability to respond to the challenges of day-to-day life and our capacity for self-care. Mental well-being, when high, can mitigate the impact of the wider determinants and conversely, when low, can exacerbate their impact. People who enjoy a high level of mental well-being will be better able to take steps to promote their own health and well-being and that of their family and wider community; they are more likely to practice self-care and will have a greater capacity to benefit from healthcare intervention. When mental well-being is low this can lead to ‘self-medication’ through the use of alcohol, drugs or food. This in turn increases the risk of health problems and a reduced likelihood of seeking help at an early stage or accessing preventative care.

Information from the School Health Research Network, which gathers information on the health and well-being of secondary school children in Wales, found that there had been a statistically significant decline in mental well-being compared to the period before the Covid-19 pandemic. The experience of the recent pandemic highlighted for many people the importance of their relationships with others; loss of contact with friends and family had a negative impact on mental well-being for many people. What was also observed was that many people adopted behaviours to promote their mental well-being, such as going for walks, spending time with family within the home, gardening, cooking, crafts, and a range of outdoor exercise. There is potential to increase awareness and understanding of the relatively simple steps we can take as individuals to both protect and promote our mental well-being, particularly during times of stress.

Low mental well-being will be experienced by all of us at different times of our lives, when we lose someone we love, experience the breakdown of a relationship, through the loss of employment, or during periods of ill health. However, for some individuals and groups low well-being is long term, which along with chronic stress can have a significant impact on long term health. The experience of ACEs, trauma and adversity, without the positive protective factors and needs based support to mitigate the impact, can affect mental well-being across the life course.

We are social animals and human interaction is essential for good mental well-being, the growing focus on loneliness and isolation within policy recognises this importance. Unhealthy relationships, however, can form the basis of abuse or violence or exploitation. National Survey for Wales data in 2021/22 showed that on average 13% of the Welsh population feel lonely and 58% feel lonely sometimes with slightly higher reported loneliness among young people aged 16-24 and the lowest reported among the oldest groups.

7.3 Scope

This priority is about laying the foundations of good health and well-being taking a life course approach. While the work in this priority will contribute to prevention of mental ill health, this priority theme is not only about mental health or illness. In simple terms mental well-being can

be defined as ‘feeling good and functioning well’. We will focus on the different building blocks of mental and social well-being for individuals and within communities. This will include:

- ❖ Psychological factors such as self-esteem, self-confidence, self-determination, and self-acceptance
- ❖ Emotional literacy, the ability to recognise and respond appropriately to our emotions
- ❖ Healthy relationships, developing the skills to form and maintain good quality healthy relationships with others
- ❖ Resilience, our ability to respond to the day-to-day challenges of life in a way that is not health harming in itself
- ❖ Reducing stigma and discrimination
- ❖ Trauma-informed practice in a whole of society approach, in which individual, organisations, communities, systems and the society in which they exist are aware of the impact of trauma and have the capability to respond

As the foundations of these skills are often in early childhood, we will build on the work of our First 1000 Days programme to strengthen infant mental well-being and support parents and carers to create the conditions for optimal social and emotional development. This will include a continuation of our work on a public health approach to parenting support to highlight the wider social, economic, and environmental conditions that support parents to give their children the best start in life and to support policy makers in assessing the impact of policy on families.

We will also continue our work to support the development and implementation of a Whole School Approach to Mental and Emotional Well-being and develop work to support the implementation of the curriculum so that our schools can create opportunities and model inclusive approaches in which build self-esteem and self-confidence, develop emotional literacy, create a sense of belonging and connectedness, and strengthen healthy relationships. The prevention of peer-on-peer violence amongst children and young people will continue to be a focus of our work in violence prevention and contributes to our public health approach to preventing all forms of violence in Wales; realising what we currently can only imagine - a Wales without violence. We will develop programmes of work to support the creation and dissemination of the evidence for effective action to promote mental well-being and in creating the conditions within communities that support social well-being.

Through our work with employers, we will advocate and support action at work which promotes mental well-being and fosters a sense of belonging and inclusive social networks. We will continue our work with Health Education and Improvement Wales to increase knowledge and skills to promote mental well-being as a core element of all health care interactions. We will continue our work to build capacity and capability within the system to embed trauma-informed approaches to minimise the long term harm arising from the experience of adversity and trauma at any point in our lives. We are committed to the co-delivery of a programme of work that will enable Wales to become a trauma-informed nation promoting a collective, non-judgemental, kind and compassionate all of society approach.

Finally, we will continue our work to embed mental well-being impact assessment to support decision makers in maximising the conditions for mental well-being. Working with others we will also seek to grow the evidence base for effective action and ensure that we are able to monitor change and evaluate action.

7.4 Objectives

By 2035, we will have:

- ❖ Worked with others to reduce inequalities in mental and social well-being
- ❖ Synthesised, interpreted and disseminated evidence for effective action to support policy development, legislation and system wide action to promote mental and social well-being and reduce inequalities
- ❖ Co-created a trauma-informed Wales, to reduce impact of adverse childhood experiences and other forms of adversity and trauma
- ❖ Mobilised and enabled evidence-based action to promote and protect mental well-being across the system, including in key settings such as education, at work and in communities
- ❖ Supported the system to review or evaluate policy or programmes for their impact on mental and social well-being and inequalities taking a life-course approach
- ❖ Developed strong and purposeful partnerships to increase access to opportunities for people to promote their mental well-being through engagement with the things that keep them mentally well
- ❖ Worked with partners and parents to enable children to achieve optimum social and emotional development

7.5 Outcomes

We will work to support the following system wide outcomes:

- ❖ Improve population mental well-being and reduce the gap in mental well-being between the most affluent and most disadvantaged groups (Baseline: 48.92, National Indicator)
- ❖ Increase the proportion of the population who say they have a sense of community (Baseline: 69.3%, PHOF)
- ❖ Increase the proportion of children who achieve their developmental milestones- social and emotional (Indicator to be developed)
- ❖ Reduce the proportion of the population who report experiencing violence or abuse (Indicator to be developed)

8 Strategic priority 3: Promoting Healthy Behaviours

8.1 Introduction

Promoting healthy behaviours encompasses activity to reduce the burden of disease, disability, and early death that results from our behaviours such as use of tobacco, our diet, how active we are and whether and how we use alcohol and other substances.

Our behaviours are closely linked to the social, economic, and environmental factors, which have been outlined in earlier priorities. Our approach to tackling healthy behaviours explicitly acknowledges that the opportunities to make healthier choices are influenced by our social and economic circumstances, by where we live, and importantly by the actions of the industries that produce a range of unhealthy commodities. This is why, for the majority of the behaviours, we see a clear socio-economic gradient; they are more common among groups in the population who experience disadvantage. These factors are one of the primary mechanisms through which the wider determinants lead to ill health.

We also acknowledge that our behaviours can be a result of our mental well-being. Many of us will recognise how easy it is to eat less healthy foods, often as a treat when we are feeling low, or how our consumption of alcohol may increase when we feel stressed or anxious. For some people these coping behaviours become long term and habit forming and people may need support to adopt healthier coping strategies. In these situations, people often need help to make changes, even when they are motivated to do so.

8.2 Overview – why this is a priority

The leading causes of death, particularly early death in Wales such as heart and other circulatory disease, some cancers and respiratory disease, as examples, have strong links to health behaviours as risk factors. A significant proportion of these deaths can be attributed to factors such as smoking, diet, and alcohol use. Behavioural factors also play a part in the conditions which lead to disability such as musculoskeletal diseases and substance use.

Smoking remains the leading risk factor for poor health outcomes, partly because for some diseases the risk remains for several years even after someone has stopped smoking, particularly if they smoked for a long time and because of the wide range of conditions that smoking causes including heart and circulatory disease, dementia, cancers, and lung disease. However, smoking rates have reduced significantly over the recent decades and the most recent figures suggest that only 13.8% of adults in Wales currently smoke. The Welsh Government launched a Smoke Free Wales in 2022 with the goal of reducing smoking rates to below 5% by 2030.

Dietary factors and overweight and obesity combined however, far exceed the impact of tobacco use; and whereas rates of smoking are falling rates of overweight and particularly obesity are increasing. In 2022, most of the adult population of Wales (62%) were either living with overweight or obesity and 25% were living with obesity, this means that their weight is at a level where the risk of poor health is high. Rates of obesity are higher in those from more disadvantaged backgrounds. Welsh Government launched Healthy Weight Healthy Wales as a long term strategy to reduce levels of overweight and obesity in the population. Our diet, including consumption of alcohol and whether we are active are the leading behavioural causes of overweight and obesity. Just over a half of adults (56%) reach the level of physical activity recommended by the UK Chief Medical Officers of 150 minutes of moderate or vigorous activity a week. However, as our understanding increases, we know that the greatest health gains are to be made from helping the 30% of Welsh adults who are currently inactive (active for less than 30 minutes a week) to become more active.

Being active is dependent on a range of factors but can include where we live, whether we have easy access to places to walk and cycle; whether we have access to frequent and reliable public transport as an alternative to using a car, whether we can afford to go to a gym or leisure centre regularly, and the kind of work we do. It is recognised that our lives are increasingly sedentary and the need to create opportunities to be active is a relatively recent phenomenon that would not have been recognised by people 100 years ago.

Food poverty is recognised as a significant problem and is growing, many families struggle to provide food at all and are much less able to focus on whether that food is healthy or not. Reversing changes which have occurred over decades will not be easy but if we do not take action, the burden of disease related to obesity will continue to increase.

During the period from 1990 to 2016, the burden of disease attributable to alcohol and drugs increased. Alcohol use is normalised in our society, yet the World Health Organization issued a statement in January 2023 in which it states that ‘when it comes to alcohol consumption there is no safe amount that does not affect health’. The United Kingdom Chief Medical

Officers Guidelines produced in 2016 reflected this principle in talking about 'Low Risk Drinking Guidelines' rather than safe levels.

8.3 Scope

This priority will focus primarily on those behaviours which have the largest impact on preventable ill health, disability and early death. In doing this we are also acknowledging the contribution of these behaviours to the health of the planet as well as the health of individuals.

We will continue our work as a public health system, with the health board Directors of Public Health and local authorities, to address tobacco and obesity, taking a systems approach, and we will work to develop a similar approach to prevent harm from the use of drugs and alcohol. We have seen measurable benefits to our joint approach to tobacco, particularly through Help Me Quit and we will seek to build on this to achieve our smoke free ambition.

We will work to support the wider system in measuring change. These will include both overall reductions in health harming behaviours and the gap between those in the most and least affluent groups in society. We will also recognise that the foundations for many of these behaviours begin in childhood and we will continue our work to support the adoption of healthy behaviours from birth. This includes working with partners to increase uptake of breastfeeding and optimal introduction of solid food. We will also develop a whole school approach to food which will include work to ensure that nutritional standards are in line with the latest scientific guidelines and that we can evaluate the impact of policy to ensure that it has the desired impact on children and young people's eating habits.

We will take a commercial determinants of health approach, which focuses on the private sector activities that impact on population health. This approach aims to recognise and act on those unhealthy commodity industries which actively promote behaviours, which are health harming. Wales has been proactive in introducing legislation to reduce the harmful impact of tobacco and we will support Welsh Government by providing evidence to inform action to ensure Wales remains among the leading countries globally in tackling these issues. We recognise that in tackling global industry forces we will need to work closely with public health agencies within the United Kingdom and globally to ensure we contribute to and benefit from collective action.

We will also work to ensure that we can identify new and emerging behaviours, which may be stimulated or influenced by corporate activity. We have seen growing concern in relation to issues such as gambling related harm and there is general consensus from most stakeholders that this is at least in part attributable to the role of the industry. There has been increasing concern about the number of young people who are vaping and the role that attractive, flavoured single use products new to the market may play. Confusion over cannabis and the degree to which it is harmful results in part from the actions of industry either in relation to cannabis derived products without active ingredients and their promotion or from those commercial interests advocating decriminalisation.

We will work to develop an approach to investigating and responding to new and emerging behaviours which may have a population health impact, to ensure that we can provide timely evidence and advice to Government, the wider system, and the public. We will also continue our work to ensure that action to address behavioural factors using a behavioural science informed approach, and drawing on the best available data and evidence from a growing range of sources so that we have the best possible understanding of the drivers of unhealthy behaviour. While we recognise that our actions should primarily seek to influence the wider environment, making the healthy choices the easy choices, we do acknowledge that support to individuals will remain a key element of our work. We will support those working with

individuals in the health and care system to provide evidence-based behaviour change approaches through programmes such as Making Every Contact Count.

8.4 Objectives

By 2035, we will have:

- ❖ Worked with others to reduce the burden of disease in Wales from use of health harming products and increased health promoting behaviours
- ❖ Synthesised, interpreted and disseminated evidence for effective action to support policy, legislation and system wide action on tobacco, diet, physical inactivity, alcohol and other substances
- ❖ Enabled system wide action by developing and testing new approaches and coordinating programmes of work
- ❖ Established and implemented mechanisms for rapid assessment of new and emerging behaviours for their public health impact
- ❖ Reviewed or evaluated policy or programmes for their impact

8.5 Outcomes

We will work to support the following system wide outcomes

- ❖ Reducing prevalence of smoking to 5% by 2030 (Baseline: 13.8%, PHOF)
- ❖ Increasing the proportion of the population who are a healthy weight (Baseline: 36.7%, PHOF)
- ❖ Increasing the proportion of the population who are active (Baseline: 55.5%, PHOF)
- ❖ Increasing the proportion of the population whose use of alcohol is low risk (Baseline: 82.1%, PHOF)

9 Strategic priority 4: Supporting the development of a sustainable health and care system focused on prevention and early intervention

9.1 Introduction

Public Health Wales has a national role in providing evidence-based leadership in the development of public health strategies and in working in partnership with NHS Wales and communities to co-ordinate public health activities. The health and care system is working together to ensure healthcare is fit for now and future generations, which requires developing sustainable models of healthcare.

A Healthier Wales has an ambition for everyone in Wales to have long, healthy, happy lives and sets the policy direction for how the health and social care system will work together to deliver sustainable models of care. Sustainable healthcare delivers high quality care without damaging the environment, is affordable now and in the future, and delivers positive social impact. This includes shifting services out of hospital to communities, having more services which stop people getting ill by detecting things earlier, or preventing them altogether. This will include helping people manage their own health and long term illnesses. It also means making things easier for people to remain active and independent in their homes and communities.

9.2 Overview – why this is a priority

More people in Wales are living longer and needing more health and social care than before, but resources are stretched. An ageing population, inequalities in health and health outcomes and a legacy of issues as a result of the Covid-19 pandemic have combined to result in huge pressures on the health and care system. This is having a significant impacts upon patients and their families, including in relation to access and timeliness of treatment, avoidable harm and overall outcomes. These issues are likely to be further impacted by other immediate pressures, such as the cost of living crisis, which will further widen inequalities.

Current pressures within the NHS and social care are having significant impacts on population outcomes and raise questions about the long term sustainability of the whole system. Whilst there are several immediate pressures, it remains paramount that we focus on prevention, early intervention, and equity to develop sustainable models of care that meet current and future population needs, reduce harm and improve outcomes.

We have a key role in supporting the health and care system in developing integrated, person-centred pathways which focus on quality outcomes. We will work with key partners to co-ordinate efforts across the system. The pandemic provided significant learning in relation to future infectious diseases and the ability of relevant agencies to rise, in a concerted way, to healthcare challenges. We will build on the effective systems to ensure public health and health care work together to achieve equitable population health outcomes.

By taking a healthcare public health approach, we will seek to prioritise resource to maximise the population benefits of healthcare, ensuring healthcare meets individual and group need, with a focus on reducing health inequalities. We can improve health at a population level by preventing and detecting disease early or improving health-related outcomes through access and utilisation of effective healthcare interventions or treatments.

9.3 Scope

This priority is central to the role of Public Health Wales in shifting the balance of our health and care system in Wales to focus on prevention, early intervention, and health equity in order to improve outcomes for our population. Our role and scope within this priority includes:

- ❖ A leadership role in working with NHS Wales and care agencies to support public health in Wales
- ❖ A clear and demonstrable role in healthcare public health at a national and local level through developing a Public Health Wales Framework for Health Care Public Health in collaboration with key stakeholders
- ❖ A leadership role to health and care in advocating, co-ordinating and supporting transformation for prevention, early intervention, and equity to be embedded throughout the whole health and care pathway, including contributing factors.
- ❖ Promoting methods to better understand our population and utilise impact assessment to identify 'at risk' cohorts to inform an understanding of how to deliver the highest value interventions
- ❖ Identifying vulnerable populations, marginalised groups and local health inequalities and advising on commissioning to meet their health care needs apply these principles to healthcare services we directly provide e.g. population screening programmes
- ❖ Leading and supporting the healthcare system in Wales to use its role, as anchor institutions, to influence and impact on health and well-being

We will support our partners by informing, assessing and planning health needs of defined populations and subsets of those populations. This will include consideration of the impact of taking a preventative approach to include primary, secondary and tertiary prevention.

We will also enable and mobilise resources to support a data informed and data driven approach to planning, evidence-informed decision making, with the aim of ensuring equitable access to quality, person-centred, integrated healthcare services that meets the current and future need of the population across Wales. This will support the wider system in understanding the health and wellbeing in Wales, centred around the burden of disease. We will also ensure a consistent national approach to collating data and sharing intelligence, including behavioural insight of the population, patients, clinicians and the wider workforce.

We will support the development of a framework for reducing health inequalities, which can be applied consistently across Wales to address variation and equity in care pathways (e.g. health equity audit). This will uphold quality in terms of patient experience, safety and outcomes and ensure efficient and value-based use of resources through prioritisation, option appraisal and impact focussed approach, having regard to economic evaluation and return on investment.

We will also support primary care transformation. By leading and developing once for Wales resources, we can ensure that population health improvement, healthcare public health, and inequalities reduction lenses inform and shape wider primary care reform in Wales. We will also provide leadership in support of continuous improvement in safeguarding across NHS Wales, focusing on increased use of quality improvement methodologies and approaches, learning together with NHS Wales whilst retaining collaborative leadership of the NHS Wales Safeguarding Network.

9.4 Objectives

By 2035, we will have:

- ❖ Supported the system to shift the balance of health and care towards prevention, early intervention and equity.
- ❖ Maximised opportunities to prevent disease through health and care interactions, ensuring resources are allocated fairly
- ❖ Supported care moving closer to home, ensuring it is person-centred
- ❖ Provided data, analysis, research and evaluation evidence to improve the health and well-being of Wales and tackle health inequalities
- ❖ Supported our partners to use the size, scale and reach of the healthcare system to positively influence the health and well-being of communities

9.5 Outcomes

We will work to support the following system wide outcomes:

- ❖ Increase the number of working age adults in good health (Baseline: 79.6%, PHOF)
- ❖ Increase the proportion of working age adults free from limiting long term illness (Baseline: 60.1%, PHOF)
- ❖ Increase the number of older people in good health (Baseline: 66.6%, PHOF)
- ❖ Increase the proportion of older people free from limiting long term illness (Baseline: 33.3%, PHOF)

10 Strategic priority 5: Delivering excellent public health services to protect the public and maximise population health outcomes

10.1 Introduction

Protecting the public from the effects of infections and exposure to environmental problems, such as air pollution, and the delivery of our national screening programmes are core responsibilities for Public Health Wales. Our Category 1 responder status demonstrates our role in protecting the public from ill health and working with our partners to mitigate risks to human health. We work to protect the health of the people of Wales through the delivery of a number of health protection and infection control services, and national screening programmes. We deliver, monitor and evaluate seven population based screening programmes, and coordinate the all-Wales managed clinical network for antenatal screening. 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).

10.2 Overview – why this is a priority

Protecting the health of the population of Wales from infections and environmental threats is key to achieving a healthier Wales. The Covid-19 pandemic, and its ongoing implications, highlighted the grave threat to health from communicable diseases and reinforced why health protection and health security will, within the changing realities of an interconnected world, remain a public health priority.

Globally, the pandemic has shown how we how interconnected we are with others, and how we must be prepared to act on global threats to health, including horizon scanning for future threats. We will embed learning from the Covid-19 pandemic and ensuring that we are as prepared as we can be for future threats. Significant global threats, such as antimicrobial resistance where infections become harder to treat with drugs, is one such global threat and we must focus our services on reducing it. Our ability to connect with our global partners to be aware of threats to health as they emerge and put systems in place to address them will be important as we work to protect the health of future generations.

For our population health screening programmes, we will deliver excellent services that are safe, effective, people centre, timely, efficient and equitable to ensure evidence based interventions improve health of population in Wales. Cancer is a leading cause of death both worldwide and in Wales with many cancers being curable if detected early and treated effectively. We deliver, monitor, and evaluate seven population-based screening programmes, and co-ordinate the all-Wales managed clinical network for antenatal screening.

How we deliver our services to protect the health of the people of Wales is paramount. The Health and Social Care (Quality and Engagement) (Wales) (Act) (2020) highlights the duty of quality we have to provide safe, effective, person-centred, timely, efficient and equitable health care in the context of a learning culture, and we believe the provision of our services under this framework will deliver the best outcomes for the people of Wales.

10.3 Scope

We have defined excellence through the Institute of Medicines dimensions of quality, which are also used in the Health and Social Care (Quality and Engagement) (Wales) (Act) (2020). These are:

- ❖ **Safety** – Services should be able to demonstrate by robust evidence that they are safe, and interventions offer higher benefit than risk
- ❖ **Effectiveness** – Services should have a culture of evidence-based intervention

- ❖ **Patient-centeredness** - Services should be able to demonstrate that they regularly and proactively engage with stakeholders and service recipients to assess their experiences as part of an ongoing process of service improvement.
- ❖ **Timeliness** – Services should be able to respond in a timely way
- ❖ **Efficiency** – Services should be able to demonstrate that impacts on population health are being achieved in the most efficient way
- ❖ **Equity** – Services should conform to a principle that determines what is just and fair in the distribution of health care

However, we recognise the importance of continually innovating and improving our services and have additional measures of excellence:

- ❖ **Innovation/continuous improvement** – excellent public health services would always look to innovate and improve in order to achieve excellence
- ❖ **Education and training** – in order to provide excellent public health services, we must invest in our staff, ensuring they have the right skill set to achieve excellence
- ❖ **Internal and external collaboration** – excellent public health services would be those that collaborate across the organisation and the public health system to achieve desired outcomes

This strategic priority focuses on the delivery of all public and patient facing services delivered by Public Health Wales, with a particular focus on screening, health protection and microbiology. However, as we implement our strategy, we will also seek to apply this approach to our other core public health services that we deliver.

National Population Screening Programmes

We will provide population health screening programmes for the people of Wales to ensure evidence-based interventions to improve the health of the population in Wales. Our screening programmes will be informed by evidence-based recommendations. The aims of the programmes are either to reduce incidence of disease or improve early diagnosis to reduce the impact of the disease. 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 a key priority. Our ability to provide our screening programmes was greatly impacted by the Covid-19 pandemic. We will focus on recovering our two remaining delayed screening programmes through an ambitious programme that will embrace the use of new technology, along with implementing new approaches and innovation focused on improving practices.

Health Protection and Infection Services

Our approach to responding to communicable disease challenges in Wales involves the delivery of a number of programmes and services, the importance of which were highlighted during the Covid-19 pandemic. We will learn from the experiences of our health protection and infection services during the Covid-19 pandemic to ensure systems are prepared for the clinical, diagnostic and health protection challenges of future threats.

We will provide these in an integrated way, to ensure greater resilience, sustainability, and capacity across our broader service offer. We have a system leadership role, working with and advising our partners on strategies to ensure early effective diagnosis of infection, early effective treatment of infection, and early effective intervention to control the spread. Key services within Public Health Wales support the delivery of the response, including the

Communicable Disease Surveillance Centre to understand the impact of communicable diseases and interventions on the population of Wales.

Covid-19 and other respiratory infections continue to highlight the importance of immunisation as the most important intervention for disease prevention/reduced severity of outcome, alongside effective outbreak management and control of infection. The Vaccine and Preventable Disease Programme delivers a national approach to immunisations and vaccinations. We will also play an integral role in the system to protect the health of the people of Wales from environmental threats. Our environmental public health services ensure that we reduce the number of people who become ill or die as a result of environmental harms and increase the number of people who have health benefits from a good environment through advocacy, policy guidance, expert advice, and surveillance.

Our microbiology services will continue to provide world class diagnostic and clinical advisory services and Specialist and Reference Microbiology Services to support diagnostics, surveillance, and outbreak identification and management.

Innovation and future threats

Our public health services will always look to innovate and improve in order to achieve excellence. Public health genomics provides a focus on populations, health services and public health programmes, rather than individual clinical care, through the application of advances in human and pathogen genomics to improve public health and prevent disease. The Public Health Genomics Programme in Public Health Wales will enable us to lead on improving outcomes for people in Wales at a population level. We will continue to lead the development of Antimicrobial Stewardship guidance across the NHS, with the aim of reducing the burden of infection and thereby the demand for antimicrobials.

10.4 Objectives

By 2035, we will have:

- ❖ Delivered excellent, people centred, population health screening programmes that are improving the health of the population of Wales in an equitable way
- ❖ Developed and adapted population health screening programmes in line with current evidence and explored innovation to improve pathways.
- ❖ Fully optimised the bowel screening programme and delivered a sustainable and optimised diabetic eye screening programme
- ❖ Enabled the implementation of new UK National Screening Committee recommendations for population in Wales
- ❖ Experienced fewer health and social care associated infections and only use antimicrobials appropriately
- ❖ Provided clinicians with the evidence they need to increase the speed of diagnosis so patients can be treated in a timely and accurate way. This will be done through the delivery of our microbiology services using world class, modern techniques developed through continuous innovation and improvement
- ❖ Better described communities at increased risk of harm from communicable disease leading to evidence-based interventions to reduce the number of people who become ill or die from a communicable disease and environmental harms

- ❖ Provided system leadership supporting the delivery of excellent immunisation and vaccination programmes, therefore seeing much fewer people with ill health due to vaccine preventable diseases
- ❖ Provided timely information for action to interrupt the transmission and reduce the impact of communicable disease on individuals and healthcare services

10.5 Outcomes

We will work to support the following system wide outcomes:

- ❖ Increase vaccination rates for all vaccine preventable diseases
 - 90% uptake of HPV by age 15 (Baseline: 69.3%, COVER Report 145)
 - 95% uptake of MMR by age 2 based on new schedule (Baseline: 93%, COVER Report 145)
- ❖ Experience fewer healthcare associated infections and only use antibiotics appropriately (Indicator to be developed)
- ❖ Eliminate hepatitis B and C as a public health threat by 2030 (Baseline: approx. 12,000 hepatitis C infected individuals in 2017, WHC/2017/048)
- ❖ Increase in the proportion of bowel and breast cancers diagnosed at early stage (Indicator to be developed)
- ❖ Reduction of the incidence of cervical cancers (Indicator to be developed)
- ❖ Reduction of sight loss from diabetic retinopathy (Indicator to be developed)
- ❖ Reduction of the mortality from ruptured abdominal aortic aneurysms (Indicator to be developed)

11 Strategic priority 6: Tackling the public health effects of climate change

11.1 Introduction

Climate change is recognised as the most significant public health threat of the century, endangering physical health, mental health and well-being. It threatens all areas of life that impact our ability to achieve and maintain good health. In October 2021, the World Health Organization declared climate change to be the single biggest health threat facing humanity due to rising global temperatures.

The earth has already warmed by 1.1°C above pre-industrial levels as a result of human activity. Urgent action is needed to limit global temperature rise to 1.5°C to prevent devastating harm to health. Reducing emissions of greenhouse gases through better transport, food and energy-use choices results in improved health, particularly through reduced air pollution.

The impacts of climate change are multifaceted, impacting the social and environmental determinants of health (clean air, food security, safe homes, and access to services). The impacts of climate change are already being felt within Wales, both in terms of physical threats to life through extreme weather events, as well as climate related anxiety. In short, climate change is already adversely impacting the health of people in Wales and will continue to do so well into the future.

11.2 Overview – why this is a priority

We know that some communities in Wales are likely to be more adversely impacted by the effects of climate change than others, and some less likely to be able to take action to respond

to these effects. For example, lower income households in areas that are prone to flooding, and those living with disabilities and/or chronic conditions and their carers. As such, the effects of climate change are likely to exacerbate existing health inequalities in Wales. Our focus must be on ensuring that efficient and equitable adaptation policies and interventions are in place that help to reduce health inequalities.

Wales has the enabling environment and legislative framework to support the transformational change needed to tackle climate change. The Well-being of Future Generations (Wales) Act 2015 ensures that the climate is considered at an everyday decision-making level. This world leading legislation places Public Health Wales with a duty to support the seven Well-being Goals put in place by the Act.

Public Health Wales has a long history of work, internally and externally, on the climate change and sustainability agenda. We set up our Health and Sustainability Hub in order to embed the requirements of the Well-being of Future Generations (Wales) Act 2015 within the organisation. The Hub has worked across the organisation to develop our approach to sustainability and decarbonisation. We initiated a comprehensive Health Impact Assessment of climate change in Wales, in partnership with key stakeholders, to inform decision making and policy on climate change adaptation.

In 2021, we undertook a review of the Climate Change Risk Assessment for Wales report (CCRA3). The CCRA3 report for Wales assessed 61 risks and opportunities from climate change, across sectors such as health, housing, the natural environment, business and infrastructure, and risks from international impacts of climate change. The report identified a significant number of risks that required urgent public health action.

Since 2021, work has been underway across Public Health Wales to support the internal activity and the wider external system in responding to the climate emergency. This has involved embedding climate change activity into existing programmes e.g. Healthy Working Wales and Improvement Cymru, or the development of new programmes to enable action e.g. the Greener Primary Care Wales Scheme. We also published our NHS Wales Decarbonisation Strategic Delivery Plan setting out the plan for addressing the climate emergency in Wales through reducing the carbon footprint of the health sector, including Public Health Wales.

We have identified a number of key elements of our role that reflect the breadth and volume of work on the climate change and sustainability agenda across the organisation, including developing, understanding and interpreting the evidence to inform action, provide evidence-based interventions, and to provide integrated technical advice to partners. This includes key functions, including policy advice, behavioural change, communication, surveillance, and guidance.

11.3 Scope

The IANPHI roadmap for action on health and climate change sets out how National Public Health Agencies have a critical role as key climate actors. The roadmap aligns with our own views about the breadth and scale of work required to respond to the health impacts of climate change and has been used as a template for action.

In order to protect the people of Wales from the health and well-being effects of climate change, we need to:

Protect, promote, and educate:

- ❖ Protect people and communities from the health impacts of climate change, with a particular focus on equity and reducing health inequalities
- ❖ Educate colleagues from across the health and care system about climate and health risks, ensuring that they feel enabled to act and respond to changing demand
- ❖ Promote healthy environments and lifestyles, harnessing behaviour change and health impact assessment methods to influence policy, decision making and infrastructure
- ❖ Enable people and communities to adapt to, and mitigate, the health impacts of climate change

Respond and facilitate action:

- ❖ Ensure evidence-based policy advice and guidance across the public health system in Wales
- ❖ Co-ordinate action and messaging with other UK nations and agencies, and across the public health system in Wales
- ❖ Ensure effective extreme weather events response and preparedness, in collaboration with other partners, in a way that meets the needs of our most vulnerable communities

Monitor and evaluate:

- ❖ To develop our climate surveillance capacity so that we can monitor the health and well-being effects of climate change and guide further multi-agency action, including incorporation of early warning systems
- ❖ To undertake research into the public health impacts of climate change, and the effectiveness of interventions aimed at mitigating them
- ❖ To evaluate the health impacts of climate mitigation policies in Wales
- ❖ To evaluate the impact of our own ways of working

11.3 Objectives

By 2030, we will have:

- ❖ Supported the Welsh Government ambition of achieving a Net Zero NHS Wales

And by 2035, we will have:

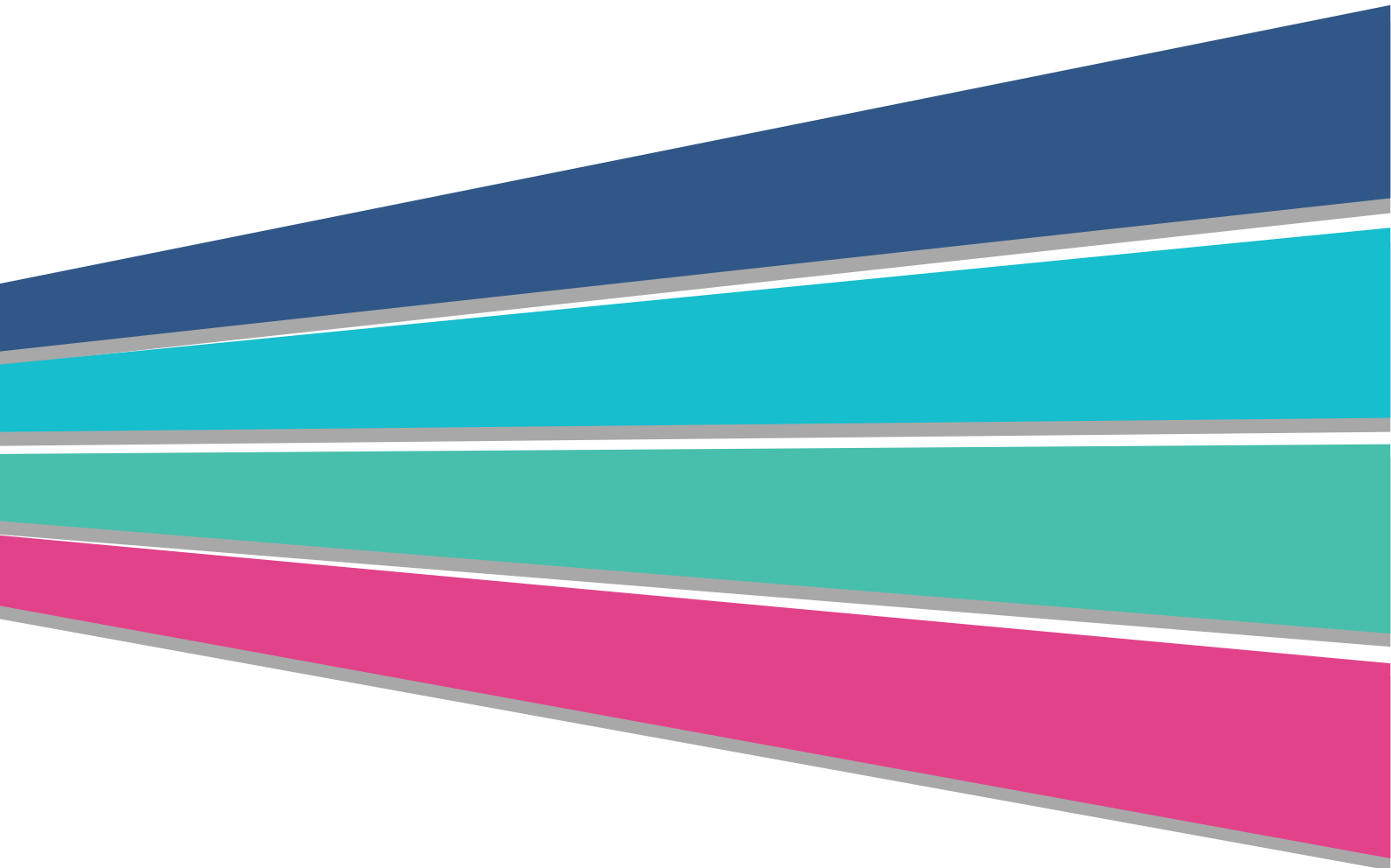
- ❖ Achieved carbon negativity as an organisation
- ❖ Worked with our partners to respond and facilitate action on climate adaptation and mitigation
- ❖ A robust monitoring, research, evaluation and surveillance system that enables us and our partners to prioritise evidence based action.
- ❖ A workforce aligned to delivering climate sensitive public health across all domains of our practice

11.4 Outcomes

Monitoring the public health impacts of climate change is a novel surveillance area. Public Health Wales are developing our climate surveillance capacity so that we can monitor the health and well-being effects of climate change, including the incorporation of early warning systems. This will include surveillance of some of the national indicators set out under section 10(8) of the Well-being of Future Generations (Wales) Act 2015, including:

- ❖ Healthy life expectancy at birth including the gap between the least and most deprived (Baseline: 13.3 years for male and 16.9 years for female, PHOF)
- ❖ Percentage of journeys by walking, cycling or public transport (Baseline: 16%, National Indicator)

Enabling the delivery of our Strategy



12 Enabling delivery

We will enable and drive the delivery of our strategy through embracing more agile digitally and data driven approaches. We will focus on delivering maximum impact by building on innovative approaches that work, placing users at the heart of what we do and through an unwavering focus on quality improvement.

A number of key strategic drivers will shape and inform our enabling activity, including the Health and Social Care Quality and Engagement (Wales) Act, particularly the Duty of Quality and Duty of Candour. Underpinning the delivery of our strategy will be a small number of 'enabling' strategies and approaches.

13 People

13.1 Overview

Our People Strategy sets out our vision for all those who work or aspire to work in Public Health Wales and our role supporting the development of the wider public health system workforce. Our ambition is to develop a flexible, sustainable and thriving workforce with the capacity, capability and desire to successfully deliver our Long Term Strategy.

13.2 Areas of focus

The People Strategy comprises nine themes:

- ❖ **Inspiring Culture and Compassionate Leadership:** We will ensure our culture and values are apparent in everyone's lived experience
- ❖ **Designed to Deliver:** We will increase our ability to deploy resources where needed, reducing silos and building collaboration and cross boundary working
- ❖ **Workforce Shape and Planning:** We will actively plan and manage towards our agreed optimum workforce size and shape
- ❖ **Employee Experience:** We will understand what matters most to our current and future employees and create a people promise that works for all
- ❖ **Harnessing Data:** We will increase our skills and access to expertise in harnessing and disseminating data to inform decision making
- ❖ **Exploiting Technology:** We will increase our people's confidence and capability to exploit technology opportunities in their work
- ❖ **Optimising Relationships:** We will increase the knowledge and interpersonal skills necessary for meaningful and mutually beneficial relationships with our partners
- ❖ **Attracting and Recruiting Talent:** We will widen access and identify, attract and recruit the best available talent which more accurately reflects the communities we serve
- ❖ **Skills for the Future:** We will create clear approaches and investment plans to develop or access the skills required to deliver our strategic priorities

13.3 Making it happen

We launched our People Strategy in March 2020 and have made significant progress delivering against the nine themes. During 2023, we will adjust or reframe aspects to ensure alignment with our new priorities and other key enabling strategies.

14 Digital and data

14.1 Overview

Our Digital and Data Strategy will focus on applying the culture, practices, processes, and technologies of the internet-era to respond to people's raised expectations (digital) and making better use of the data held by Public Health Wales and beyond to maximise the impact on health and well-being outcomes in Wales. We have also developed five core digital principles to guide our work:

- ❖ **User needs first:** people and their needs are at the heart of what we do
- ❖ **Accessible and equal:** everyone who needs our services can find and use them
- ❖ **Open by default:** in sharing openly and transparently, we increase the value of our services and earn the trust of others
- ❖ **Efficient:** we re-use what we can and use agile methods to assure the quality of our assumptions before we implement
- ❖ **People focussed:** we value the people who build and run our services

14.2 Areas of focus

Our Digital and Data Strategy will focus on a number of core areas, including building on solid foundations, ensuring that our developments deliver our organisational strategic priorities, and improving public health through digital solutions to increase our impact. The digital underpinning to the data side of our strategy focuses on ensuring that data makes a difference. There are three core areas for our ambitions: improving and extending what we do, increasing our skills and capacity, and providing standards and good practice.

14.3 Making it happen

There are three core areas that will enable progress against our Digital and Data Strategy:

- ❖ Discovery work focused on development of a digital route-map for screening services, work around a single disease registry and our web estate
- ❖ Efficiency that will focus on the development of an automation agenda
- ❖ Development of skills, industry standards and embedding good practice

15 Research and Evaluation

15.1 Overview

Our ambition is to excel as a learning and developing organisation transforming public health by focusing on actionable research and evaluation that will help make a difference to public health practice. Our strategic research and evaluation principles are:

- ❖ **Open by default:** developing and sharing areas of research interest, publishing outputs targeted to user needs, and being clear about what we are leading/supporting
- ❖ **Inclusive:** co-designing with communities when working with them, capturing equalities information systematically to enable evaluation, and working with communities to reach out and include those whose trust we don't have

- ❖ **Multi-disciplinary:** to celebrate the breadth of our agenda and to pull together the skills we need and the diverse expertise leading to an integrated model of research and evaluation
- ❖ **Influential:** to our funders to address evidence gaps and research and evaluations needs for population health aims
- ❖ **Joined-up:** to ensure we have common standards for products, a coherent and comprehensive package of research, and partnering with other to deliver

15.2 Areas of focus

We aim to ensure that excellent research and evaluation is understood and accessible throughout the organisation. In order to do that, our key areas of focus are that:

- ❖ Everyone understands the importance and need for evaluation and involving evaluation experts early in design of interventions
- ❖ Our evaluation Community of Practice is open to those involved in either delivering or commissioning evaluations
- ❖ For our Central Evaluation Team to set standards, and undertake the core high priority evaluations that require organisational independence

15.3 Making it happen

We will monitor the impact of research and evidence across the organisation, ensuring there is a common follow-up process from all research and evaluation activities, and standard core questionnaires available for tailoring within projects. Our next steps include:

- ❖ Implementing our key research priorities focused around our six strategic priorities
- ❖ Engaging with Welsh Government research and policy leads to ensure alignment
- ❖ Sense checking with key academics evidence gaps in research questions identified.

16 International Health

16.1 Overview

Our International Health Strategy aims to:

- ❖ Bring international/global health activity together to increase visibility and celebrate good practices and successes
- ❖ Strengthen existing and enable new international/global health activities, opportunities, synergies, and partnerships
- ❖ Help provide opportunities for professional development, recruitment, and retention, supporting the organisation as an inspiring workplace
- ❖ Promote and strengthen Wales' leading role and impact on the international stage

Our emerging international health vision is for Public Health Wales to be a globally connected and inspiring national public health agency, working towards a healthier and more equitable Wales to address global challenges and shared goals.

16.2 Areas of focus

Our emerging areas of international health focus include:

- ❖ Planetary health and sustainable development
- ❖ Global health security, including emergency preparedness and response
- ❖ Reducing health inequities (within and between countries)
- ❖ Health systems and health workforce strengthening
- ❖ Chronic disease primary prevention and early intervention
- ❖ Build economies of well-being and strengthen health in all policies and investments

16.3 Making it happen

Following the publication of our refreshed International Health Strategy in 2023, develop and underpinning implementation plan that will set out how we take forward our work. This will include plans for how we will monitor and evaluate our progress.

17 Engagement

17.1 Overview

Our Approach to Engagement sets out an overarching approach to engagement for Public Health Wales and covers a wide range of engagement activities, from individuals sharing their lived experience, to geographical communities sharing experiences, to communities united in a specific topic to empowerment on a population basis.

17.2 Areas of focus

We will focus two of the Well-being of Future Generations (Wales) Act ways of working: involvement and collaboration. Our approach must therefore place people at the centre, with a shared power base whilst considering the legislative context. Six main reasons for engagement activities have been identified within Public Health Wales. These are:

- ❖ Information to empower
- ❖ General consultation
- ❖ User feedback
- ❖ Issue specific participation
- ❖ Co-production
- ❖ Community empowerment

It is fundamental that we work from a position of doing no harm and that engagement activity is based on the philosophy of empowering individuals, communities and the public.

17.3 Making it happen

Implementation of 'Our Approach to Engagement' is built around five key drivers:

- ❖ **Committed Workforce:** Staff who understand and appreciate the benefits of engagement so that they are predisposed and committed to take on these activities
- ❖ **Skills & Capability:** Staff with the right skills and appropriate training opportunities so that engagement activity is delivered in an inclusive and empowering way, with impact and consistency, across the organisation

- ❖ **Relationship Building:** Strong relationships with the public and stakeholders who can work with us to support our reach
- ❖ **Tools & Resources:** A suite of tools that enable our teams to undertake engagement activity effectively, confidently and consistently
- ❖ **Monitoring & Evaluation:** Clear demonstration of impact of engagement activity to drive improvements and strong feedback loops with those who engage with us

18 Behavioural Science

18.1 Overview

Our Behavioural Science Unit will provide specialist expertise and enable the increasingly routine application of behavioural science, to improve and protect population health and well-being. Support, guidance and capability building for stakeholders across the public health system, will help deliver a step change around achieving our strategic priorities.

18.2 Areas of focus

To lead and enable the increased use of behavioural science, action will be focused in the following areas:

- ❖ **Building understanding of its utility among key stakeholders** to integrate behavioural science as a way of optimising policy, services and communications;
- ❖ **Increasing the routine application** of behavioural science through the responsive and proactive development of resources;
- ❖ **Developing sustainable capacity and capability** including through upskilling, timely engagement of expertise, and increasing opportunities for collaboration; and
- ❖ **Implementing a strategic plan** for the application of behavioural science for better health, including evidence-driven insight gathering, intervention design and evaluation.

18.3 Making it happen

The following three core areas will enable progress around our mission of providing specialist expertise and building systematic application of behavioural science:

- ❖ being action and equity-focused, our output will be relevant and applicable to population health priorities in Wales and seek to reduce inequity through segment-specific intervention design;
- ❖ providing reactive advice, support and guidance alongside proactive development of tools, methods and capability building to integrate and sustain the use of behavioural science; and
- ❖ bringing global learning into focus in Wales, through active engagement nationally and internationally, and enabling collaboration through a community of practice.

19 Budget Strategy

19.1 Overview

Our Budget Strategy will support our delivery by enabling and driving financial sustainability, improvement and value. We will ensure that our resources are aligned to our strategic priorities and we continue to maintain, within the challenging external environment, financial stability.

We will challenge ourselves to ensure that we are delivering maximum value for the people of Wales, and our stakeholders, through the efficient and effective use of our resources.

19.2 Areas of focus

Our Budget Strategy focuses on:

- ❖ Enabling the delivery of our strategy through financial sustainability and the effective use of our resources
- ❖ Supporting the delivery of sustainable improvement in our services and enabling transformation
- ❖ Supporting us to deliver maximum value and impact to the public and stakeholder
- ❖ Aligning capital investment, digital solutions and estates developments to support improvements in population health outcomes

19.2 Making it happen

Our focus will be on delivering our financial balanced budget for the next three years to support the delivery of our new strategy. In addition, we will be developing and implementing our cross-organisational approach to value to drive value-based decision making and maximising population outcomes from the effective use of our resources.

20 Quality as an Organisational Strategy

20.1 Overview

Public Health Wales aspires to be an exemplar organisation in relation to quality, improvement, and innovation. We will use these as key drivers to shape and inform the implementation of our new Strategy. This aim is underpinned by the Health and Social Care (Quality and Engagement) (Wales) Act (2020) Quality Act, particularly around the Duty of Quality and Duty of Candour.

To enable Public Health Wales to embed quality and deliver strategic improvements and innovations, we will adopt Quality as an Organisational Strategy (QOS). The aim of QOS is to enable the organisation to provide user focused services and products and to help create an environment where our staff can enjoy and take pride in their work.

20.2 Areas of focus

We will focus on implementing the five core elements of QOS:

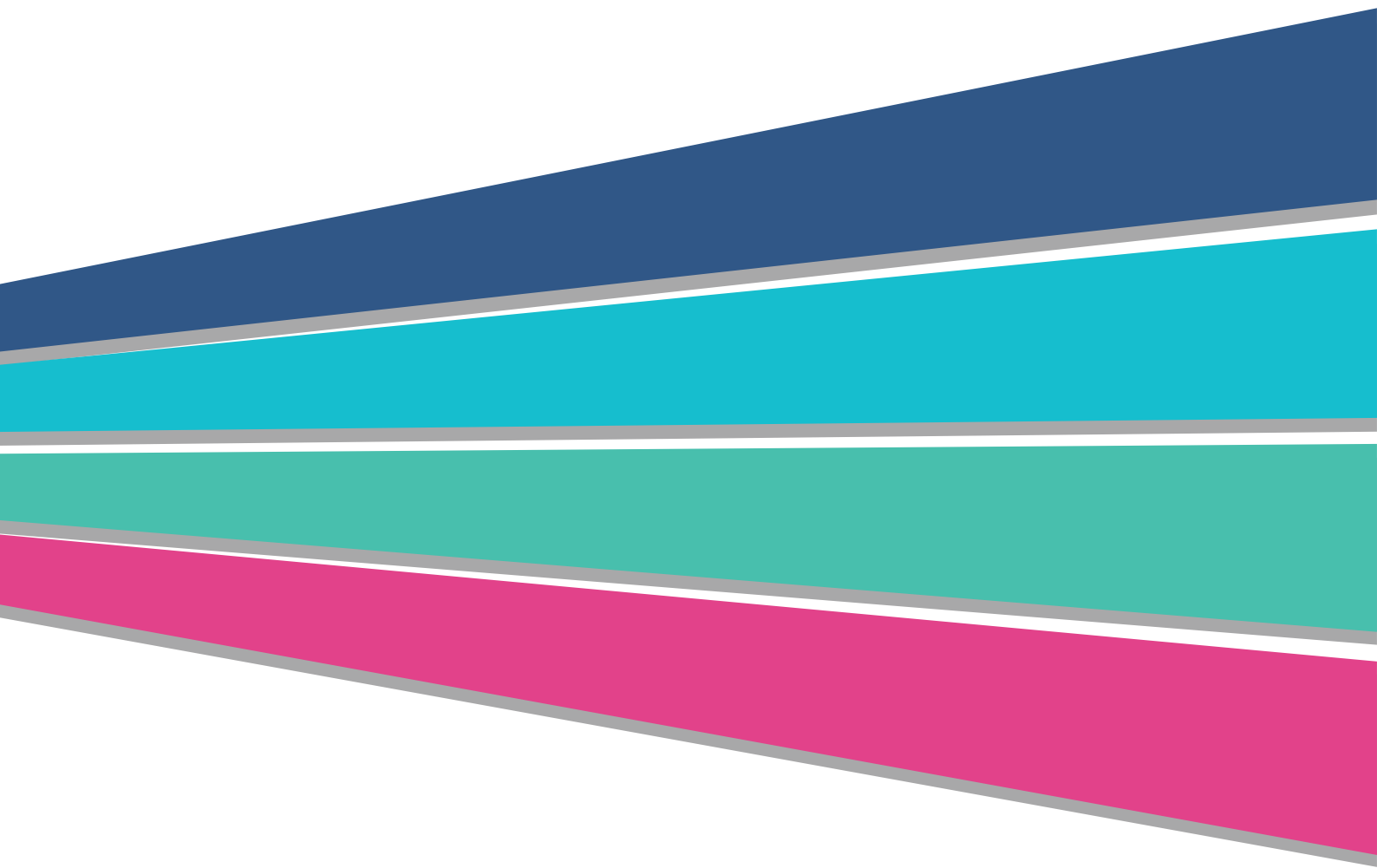
- ❖ **Purpose activity:** as part of our strategy review, we have developed a clear purpose statement that will shape and guide our future work and focus
- ❖ **System activity:** we have commenced work, which will run during 2023, to map our organisation as a system, which will drive focus on clarity on how we can most effectively support the delivery of our new strategy
- ❖ **Obtaining information:** a key element of our work will be focused on establishing systems to obtain information from our users, customers, and partners to help drive quality and performance improvements
- ❖ **Planning activity:** we will undertake a planned programme of improvement work focused on increasing the value and impact of our services and functions

- ❖ **Managing improvement methods:** we will utilise a range of methods to support the delivery of our strategy and to drive improvements

20.3 Areas of focus

We commenced the phased implementation of QOS in 2022/23 and through the review of our Strategy our initial focus has been on developing a clear purpose statement for Public Health Wales. As part of our initial work around the embedding of the QOS methodology, we have established a group that brings together leaders from across the organisation that will act as the catalyst for change and drive forward the delivery of this work. We have identified initial areas for improvement that will allow us to test and iteratively develop our approach to improve, including tools, techniques, and methods.

Conclusion



21 Conclusion

This strategy sets out our long term strategic ambitions for how we will tackle the population health challenges facing Wales in the coming years, and our commitment to working together for a healthier Wales. While the current challenges that we face are stark, and likely to be further exacerbated through the cost of living crisis, we believe that now is the time to set out a bold long term vision for achieving a healthier Wales by 2035.

The current pressures on individuals, families, communities and stakeholders cannot be underestimated. However, by setting out our vision and the contribution that we will make through the delivery of our six strategic priorities, we hope for it to serve as a catalyst for the change and actions that we need to take to help the people of Wales and support our partners across the public sector. Our focus and commitment will be on delivering our six strategic priorities and ensuring that we deliver maximum value for the people of Wales and our partners.

We will do this through embracing the Well-being of Future Generations (Wales) Act 2015 five ways of working, particularly maintaining a long term preventative focus, while prioritising our short term actions. We will work in collaboration across the public sector to effectively deliver our strategic priorities and look to integrated approaches, solutions and activity, wherever possible. We will also ensure that we place people at the heart of what we do, and how we do it, by involving them in the design, development and delivery of our services and functions.

In delivering our strategy, we have the opportunity to build on the partnership working and collaboration that underpinned our response to Covid-19. We have shown in recent years what we can achieve when we work together towards common goals. We must make that the way we work all of the time not some of the time. We have also seen the power and impact of embracing innovative ways of working, such as harnessing the potential of big data and new technologies. This will serve as a corner stone to the delivery of our strategy and how we work in the future.

We have empowered staff from across the organisation to come together, drawing on multidisciplinary knowledge and skills, to help shape our strategy. It will be through their expertise, skills, and knowledge that we will succeed in its delivery. To do this we will ensure that we create an environment that enables people to work across professional boundaries and embraces the commitment, professionalism, and expertise of all our staff.

We do not underestimate the challenges that we face. However, our commitment is to meet these challenges head-on, to collaborate and work with our partners, demonstrate dynamism and agility, to learn, innovate and evolve. And most of all, to create an environment where we succeed through the commitment, professionalism, and efforts of staff.