

Planning Partnerships and Population Health Committee

Thu 11 May 2023, 10:00 - 12:30

Agenda

10:00 - 10:00 **1. PRELIMINARY MATTERS**

0 min

 PPPH_Agenda_11May2023 Final.pdf (2 pages)

1.1. Welcome and Apologies


Oral Chair

1.2. Declarations of Interest

Oral Chair

1.3. Minutes from the previous meeting held on the 19 January 2023 for approval

Attached Chair

 PPPH_Item_1.3_Unconfirmed_Minutes_19Jan23.pdf (12 pages)

1.4. Planning, Partnerships and Population Health Committee Action Log

To Follow Chair

 PPPH_Item_1.4_Action Log.pdf (1 pages)

10:00 - 10:00 **2. ITEMS FOR APPROVAL/ RATIFICATION / DECISION**

0 min

There are no items for inclusion within this section


10:00 - 10:00 **3. ITEMS FOR ASSURANCE**

0 min

3.1. Healthy Weight Health Wales: Briefing on the Whole System Approach to Healthy Weight and Update on development of Weight Management Pathways

Attached Director of Public Health

 PPPH_Item_3.1_Whole System Approach to Healthy Weight..pdf (6 pages)

 PPPH_Item_3.1a_Appendix 1_PSB Proposal Healthy Weight & Action Plan.pdf (13 pages)

 PPPH_Item_3.1b_Weight Management Pathways.pdf (9 pages)

3.2. Strategic Change Report

Attached Interim Deputy Chief Executive and Director of Finance and IT

 PPPH_Item_3.2_Strategic Change_Cover Paper.pdf (5 pages)

 PPPH_Item_3.2a_Strategic Change Report.pdf (41 pages)

3.3. Communication and Engagement

Attached Director of Corporate Governance

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- 📎 PPPH_Item_3.3_Engagement and Communication Q4 Report.pdf (5 pages)
- 📎 PPPH_Item_3.3a_Engagement and Communication Programme Report.pdf (40 pages)

3.4. Healthy Child Wales Programme School Aged Screening Evaluation

Attached *Director of Nursing and Midwifery*

- 📎 PPPH_Item_3.4_Health Child Wales Programme.pdf (6 pages)

10:00 - 10:00 4. ITEMS FOR DISSCUSSION

0 min

There are no items for inclusion within this section

10:00 - 10:00 5. ITEMS FOR INFORMATION

0 min

5.1. Shared Services Performance Report

Attached *Director of Finance and IT*

- 📎 PPPH_Item_5.1_Shared ServicesPerformance Report March23.pdf (15 pages)

10:00 - 10:00 6. OTHER MATTERS

0 min

6.1. Committee Risk Register

Attached *Director of Corporate Governance*

- 📎 PPPH_Item_6.1_PPPH Committee Risk Report_May23 (Feb Data).pdf (2 pages)
- 📎 PPPH_Item_6.1a_Appendix_A_PPPH_RiskRegister_May23 (Feb Data).pdf (8 pages)

6.2. Committee Annual Programme of Business

Attached *Director of Corporate Governance*

- 📎 PPPH_Item_6.2_PPPH Work Programme 23-24.pdf (3 pages)

6.3. Items to be Brought to the Attention of the Board and/or Other Committees

Oral *Chair*

6.4. Any Other Urgent Business

Oral *Chair*

6.5. Date of the Next Meeting: 24 August 2023, via Microsoft Teams

Patterson Liz
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**POWYS TEACHING HEALTH BOARD
PLANNING, PARTNERSHIPS AND
POPULATION HEALTH COMMITTEE**

**11 MAY 2023, 10:00– 12:30
VIA MICROSOFT TEAMS**



**GIG
CYMRU
NHS
WALES**

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

AGENDA

Time	Item	Title	Attached/Oral	Presenter
	1	PRELIMINARY MATTERS		
10:00	1.1	Welcome and Apologies	Oral	Chair
	1.2	Declarations of Interest	Oral	All
	1.3	Minutes from the previous Meeting held, 19 January 2023	Attached	Chair
	1.4	Committee Action Log	Attached	Chair
	2	ITEMS FOR APPROVAL/RATIFICATION/DECISION		
There are no items for inclusion within this section				
	3	ITEMS FOR ASSURANCE		
10:10	3.1	Healthy Weight: Healthy Wales: <ul style="list-style-type: none">Briefing on the Whole System Approach to Healthy WeightUpdate on development of Weight Management Pathways	Attached	Director of Public Health
10:35	3.2	Strategic Change Report	Attached	Director of Therapies and Health Sciences
10:55	3.3	Communications and Engagement	Attached	Director of Corporate Governance
11:15	3.4	Healthy Child Wales Programme School Aged Screening Evaluation	Attached	Director of Nursing and Midwifery
	4	ITEMS FOR DISCUSSION		
There are no items for inclusion within this section				
	5	ITEMS FOR INFORMATION		
11:35	5.1	Shared Services Performance Report	Attached	Director of Finance and IT
	6	OTHER MATTERS		
11:40	6.1	Committee Risk Register	Attached	Director of Corporate Governance

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11:50	6.2	Committee Annual Programme of Business	Attached	Director of Corporate Governance
12:00	6.3	Items to be Brought to the Attention of the Board and/or Other Committees	Oral	Chair
12:05	6.4	Any Other Urgent Business	Oral	Chair
	6.5	Date of the Next Meeting: <ul style="list-style-type: none"> 24 August 2023, via Microsoft Teams 		

Powys Teaching Health Board is committed to openness and transparency and conducts as much of its business as possible in a session that members of the public are normally welcome to attend and observe.

Meetings are currently held virtually, should you wish to observe a virtual meeting of a committee, please contact the Director of Corporate Governance at PowysDirectorate.CorporateGovernance@wales.nhs.uk at least 24 hours in advance of the meeting in order that your request can be considered on an individual basis.

Papers for the meeting are made available on the website in advance and a copy of the minutes are uploaded to the website once agreed at the following meeting.

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**POWYS TEACHING HEALTH BOARD
PLANNING, PARTNERSHIPS AND POPULATION HEALTH COMMITTEE**

UNCONFIRMED

**MINUTES OF THE MEETING HELD ON THURSDAY 19 JANUARY 2023
VIA MICROSOFT TEAMS**

Present:

Rhobert Lewis	Independent Member (Committee Chair)
Ian Phillips	Independent Member (Committee Vice-Chair)
Ronnie Alexander	Independent Member
Jennifer Owen-Adams	Independent Member

In Attendance:

Stephen Powell	Director of Planning and Performance
Mererid Bowley	Director of Public Health (Joined for Item 3.1)
Pete Hopgood	Director of Finance, Information & IT (Joined for Item 3.3)
Claire Madsen	Director of Therapies and Health Sciences
Carol Shillabeer	Chief Executive Officer
Jayne Lawrence	Assistant Director of Primary Care Services (Joined for Item 3.4)
Helen Bushell	Director of Corporate Governance

Apologies for absence:

Kirsty Williams	Independent Member
Hayley Thomas	Director of Primary, Community Care and Mental Health
Bethan Hopkins	Audit Wales

Committee Support:

Shania Jones	Charity Administrative Support Officer
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PPPH/22/65	WELCOME AND APOLOGIES FOR ABSENCE <p>The Committee Chair welcomed Members and attendees to the meeting and CONFIRMED that there was a quorum present. Apologies for absence were NOTED as recorded above.</p>
PPPH/22/66	DECLARATIONS OF INTERESTS <p>There were no Declarations of Interest made.</p>
PPPH/22/67	UNCONFIRMED MINUTES OF THE PLANNING, PARTNERSHIPS AND POPULATION HEALTH COMMITTEE HELD 20 OCTOBER 2022 <p>The Committee APPROVED the minutes of the meeting held on 20 October 2022, as being a true and accurate record.</p>
PPPH/22/68	MATTERS ARISING FROM PREVIOUS MEETINGS <p>The following comments were raised regarding minute PPPH/22/52 – matters arising (Obesity Prevention Workshop).</p> <p>At an Independent Member peer group meeting, it was reported that a project in Ceredigion, focusing on obesity prevention recorded a 20-30% weight reduction due to family support and use of a Fitbit. This outcome would be worth investigating further and could be something to consider for future.</p> <p>The following comments were raised regarding minute PPPH/22/55 – Tobacco Control. Should the following response be recorded as an Action: 'The health board would explore further data through the Healthy School Scheme to understand the position locally. Further work would be carried out to explore and strengthen local level workstreams to support Smoke Free Schools going forwards as part of the Healthy Schools scheme.'</p> <p>The Director of Director of Public Health noted that SHORN data had been shared at a county level with the Public Health Team and that the Health Schools Team were offering support as part of the scheme to schools.</p>

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The Committee Action Log was received, and ongoing actions were discussed.

PPPH/21/23 – North Powys Wellbeing Programme Models of Care - the Director of Planning and Performance explained that it this had been delayed due to organisational pressures. It was agreed that this Action would be moved into the Committee's workplan and closed.

PPPH/21/24 – This action has been completed.

PPPH/22/05 – This action has been completed.

PPPH/22/11 – This action has been completed.

PPPH/22/07 – Regional Partnership Board long term strategy content and reporting mechanisms to PPPH - the Chief Executive advised the partnership is due to review the area plan (based on the Health and Care Strategy which has been refreshed) in Quarter 1 of 2023/2024. It was agreed that this Action is to be closed and moved into the Committee's workplan.

PPPH/22/39 – to seek clarity regarding permanent contracts for vaccination staff - the Director of Public Health advised work is under way to design a model of vaccination in response to the predicated requirements. Central to this is scoping a workforce model that can be flexed to meet the demands within the Welsh Government's financial allocations.

This action can be closed as there is no timescale and Director of Public Health will update when needed.

PPPH/22/35 – This action has been completed.

PPPH/22/39 – This action has been completed.

PPPH/22/52 – This action has been completed.

PPPH/22/55 – This action has been completed.

PPPH/22/56 – to acquire evidence-based data which identifies the analysis of benchmarking outcomes of PTHB performance - the Chief Executive Officer and Director of Planning and Performance advised that the health board are aiming to use new benchmarking tools. An update will be brought to Committee to provide a better understanding on performance benchmarking.

This Action to be closed and moved into the Committee's workplan.

PPPH/22/57a – This action has been completed.

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	<p>PPPH/22/57b – an update on Endoscopy to be provided to a future meeting - Committee agreed that this Action is to be closed and moved into the Committee’s workplan.</p> <p>PPPH/22/59 – This action has been completed.</p> <p>PPPH/22/60a – This action has been completed.</p> <p>PPPH/22/60b – the Digital Strategic Framework to be added to the work programme - the Director of Finance advised the Digital Strategic Framework is in the process of being finalised and will be presented to Committee in March 2023.</p>
ITEMS FOR APPROVAL/RATIFICATION/DECISION	
PPPH/22/70	There were no items for inclusion in this section.
ITEMS FOR ASSURANCE	
PPPH/22/71	<p>HEALTHY SCHOOLS AND HEALTHY PRE-SCHOOLS/BACH A IACH SCHEMES ASSURANCE</p> <p><i>The Director of Public Health joined the meeting.</i></p> <p>The Director of Public Health presented the paper outlining that the Healthy Schools and Preschools Team deliver the following national programmes:</p> <ul style="list-style-type: none"> • Healthy Schools Scheme; • Healthy Preschool Scheme; and • Whole School Approach to Emotional and Mental Wellbeing <p>Delivery of these programmes is on track in line with the conditions of the national grants that fund them. In addition, between 2020/21 and 2022/23, the team delivered a local programme: “Foundation Phase Bach a Iach” under the North Powys Wellbeing Programme. The Foundation Phase Bach a Iach project aimed to promote healthy weight in children up to the age of seven by accelerating the physical activity and healthy eating aspects of the Healthy Schools Scheme using an approach developed locally for the delivery of the Healthy Preschools Scheme. Funding for this work has now ended and planned work has been completed. The new way of working with schools is being embedded into future delivery.</p> <p><i>Will funding for Healthy Schools and Pre-schools continue?</i></p> <p>The Director of Public Health advised that this has been funded by way of annual grant for 15 years. Confirmation of funding is only received in quarter one of each financial year.</p>

	<p><i>When Committee previously met, there was a discussion surrounding an anti-smoking strategy within schools. Do these schemes discourage smoking?</i></p> <p>The Director of Public Health explained that the Health Schools Scheme does encourage development of the smoke free policies and smoking prevention work in secondary schools. Cardiff University conduct a survey of wellbeing every two years and invite secondary schools to participate which provides data for the county to help plan smoking prevention in schools.</p> <p><i>Could clarification be given to what age group this is for?</i></p> <p>The Director of Public Health confirmed that the Healthy Schools scheme is currently for primary and secondary schools..</p> <p><i>It has been noted that 70% of secondary schools have decided to delay the introduction of the new curriculum, does this produce any pressure on health and wellbeing?</i></p> <p>The Director of Public Health explained health and wellbeing is a priority as part of the new requirements of the curriculum and will be considered as part of the Estyn inspection/reviews of schools. It was noted with only a small health schools team in the health board it was important to work with educational leads in the local authority closely to ensure the best outcome for support in Powys schools.</p> <p><i>Have any developments been made with the previous concerns raised regarding tobacco control and the need to link with Estyn?</i></p> <p>The Director of Public Health explained that Public Health Wales were holding national discussions with Estyn as it is a part of Estyn's programme for evaluating secondary schools.</p> <p>The Committee DISCUSSED and NOTED the Healthy Schools and Healthy Pre-schools/Bach a Iach Schemes Assurance Report.</p> <p><i>The Director of Public Health left the meeting.</i></p>
PPPH/22/72	<p>STRATEGIC CHANGE REPORT</p> <p>The Director of Planning and Performance presented the strategic change report providing an updated stocktake of the Strategic Change programmes which may impact the health board and its patients.</p>

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<p>Patterson, Liz 09/05/2023 14:27:59</p>	<p>The organisations which the health board commission services from are now reviewing their structures and making additional changes following the pandemic.</p> <p>Health boards are developing integrated plans for submission in March 2023 in response to the NHS Wales Planning Framework which includes refreshed Ministerial Priorities. This will result in changes to associated long term ambitions and medium-term plans.</p> <p>The following key programmes for engagement/consultation were noted to be under way or under consideration:</p> <p>Engagement under way</p> <ul style="list-style-type: none"> • Gilwern Branch Surgery; • South Wales Specialist Auditory Hearing Implant Services; and • EMRTS/Welsh Air Ambulance <p>Engagement planned or under consideration</p> <ul style="list-style-type: none"> • Next stage of Powys Well-being Plan/Area Plan <p>Consultation planned or under consideration</p> <ul style="list-style-type: none"> • Hywel Dda University Health Board new hospital location and interim configuration of paediatric services <p>It was noted that the following had been completed, and were awaiting next steps:</p> <ul style="list-style-type: none"> • Engagement on 'Big Ideas' for Powys Well-being Plan and Area Plan; • Herefordshire and Worcestershire Stroke Services; and • WHSSC 10-year strategy <p><i>What is the process for collecting this information? Are the providers supplying this information to the health board?</i></p> <p>The Director of Planning and Performance explained that the health board have particularly complex arrangements due to different operating arrangements within England and Wales. The health board are proactive and there is an expectation that the larger organisations will keep the health board informed of planned changes to services. There are the exceptions for example, if emergency changes need to be implemented, and on occasion the health board was not sighted until after the change had been implemented. However, the monthly meetings with the commissioning providers and third sector have enabled regular updates on service and strategic change.</p> <p>The Community Health Council (CHC) are actively collecting data from patients, and it is important that the health board works in conjunction with the CHC to share these insights.</p>
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It should be noted that not all data can be captured due to the large number of services provided. However, the health board are proactive in trying to collect as much data as possible.

What is 'CQPRM'?

The Director of Planning and Performance explained that CQPRM stands for 'Clinical Quality Performance Review Meeting'.

This is a large undertaking; does it require a large workforce to manage?

Director of Planning and Performance explained that there is not a large workforce working on this. Monthly Clinical Quality Performance meetings are key to gaining the insight and team members attend key strategic meetings around England and Wales where changes are shared. It was noted that the maintenance of this document is straightforward as changes are iterative.

In relation to the centralisation of south Wales Cochlear Implant services in Cardiff with a local outreach whilst this does not affect many Powys patients what will local outreach look like?

The Director of Planning and Performance explained that with outreach services the more complex procedures are undertaken centrally with lower-level components of the pathway such as maintenance or routine follow up conducted in the outreach clinics.

It was noted that a proposal would be needed to ascertain what part of the pathway should be provided locally and what equipment, infrastructure and workforce was needed to provide this service.

Can clarity be provided on the statement 'Betsi Cadwaladr University Health Board - plans for rapid diagnostic clinics for 'vague symptoms' with reasonable risk of cancer but does not fit the criteria for a current site specific urgent suspected cancer pathway'?

The Director of Planning and Performance advised that there are several providers developing pathways across England and Wales for rapid diagnostic clinics. The health board have recently commissioned a pathway with another University Health Board, whilst Wye Valley NHS Trust commission and organise their rapid diagnostic service.

The Chief Executive noted the intention was to ensure that there was strategic planning for specialist services. It is

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	<p>important to view the whole system pathway to ensure there are early opportunities for interventions which could be closer to home for patients. The health board will need to consider how the proposed changes will have an impact on the residents of Powys.</p> <p><i>In relation to Gilwern Branch Surgery does the health board have a view as to whether the closure of a satellite branch is desirable or not, or is the health board a consultee?</i></p> <p>The Chief Executive Officer explained that there is a process which includes an application from the practice to close a branch surgery. The health board discuss the application and agreed a recommended position. There is a consultation period which will result in a decision to be taken, scheduled for April 2023. This process will have a criterion to consider as well as the opinions from the public.</p> <p>The Committee DISCUSSED and NOTED the Strategic Change Report.</p> <p><i>The Director of Finance and IT joined the meeting.</i></p>
<p>PPPH/22/73</p>	<p>STRATEGIC PLANNING – DRAFT INTEGRATED MEDIUM-TERM PLAN (IMTP) UPDATE</p> <p>The Director of Finance and IT, and the Director of Planning and Performance provided an oral update on the development of the IMTP.</p> <p>It was noted by Committee that this had previously been discussed during the Board Development on 16 January 2023. However, the Director of Finance and IT wanted to draw Committee’s attention to key highlights from the Financial Allocation Letter:</p> <ul style="list-style-type: none"> • the health board is scheduled to receive 1.5% uplift to cover inflationary pressures; • ongoing Covid-19 costs and economic pressures would now be included in the baseline funding; • reduced allocations for Test, Trace and Protect activity and the mass vaccination service; • an expectation that 2.5% efficiency target will be delivered by all health bodies; and • sustainability and recovery funding allocation had been reduced - the health board will receive £7.5m from £170m which was made available by Welsh Government. £50m of the £170m will be held back to be used to support regional developments.

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	<p>The Director of Planning and Performance advised that the deadline for the IMTP is the 31 March 2023 which must be approved by Board prior to submission.</p> <p><i>Are there any risks that the submission deadline will not be met?</i></p> <p>The Director of Finance and IT reassured Committee that the health board will deliver against the timetable. The financial plan in line with that IMTP will be submitted by the end of March 2023.</p> <p><i>Is there an opportunity as a health board to challenge the allocation based on the unintended consequences of not having funding where it is required? Could there be an opportunity to look at this from the whole system perspective?</i></p> <p>The Chief Executive explained that within the Health and Care Strategy there is a key focus on the greatest need. It was noted that there needed to be a better understanding of sustainable options/funding in specific areas. The health board needed to challenge itself to ensure that areas of inequality are being treated fairly. This is a particular challenge given the financial constraints however, when faced with challenges, creative solutions can be found.</p> <p><i>Is the health board planning for a deficit budget or is it able to deliver a financially balanced plan?</i></p> <p>The Director of Finance and IT confirmed that this would be a Board level decision. The IMTP plan will help to identify the priorities, as well as financial consequences, and realistic levels of savings.</p> <p>This will influence the decision of submitting a balanced or deficit plan.</p> <p>The Committee DISCUSSED and NOTED Strategic Planning – Draft Integrated Medium Term Plan update.</p> <p><i>The Assistant Director of Primary Care Services joined the meeting.</i></p>
<p>PPPH/22/74</p>	<p>PRIMARY CARE CLUSTER PLANNING</p> <p>The Assistant Director of Primary Care Services on behalf of the Director of Primary, Community Care and Mental Health presented the report to Committee. This paper included an update on the accelerated cluster development programme, an initiative introduced by Welsh Government to promote equality of both independent contractors and other stakeholders through Regional Partnership Boards (RPB).</p>

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Across the health board professional collaborative arrangements are in place which are in various stages of maturity. Collaborative group representation includes general practice, general dental practice, optometry, community pharmacy, professional nursing, and allied health professionals. Collaborative representation is feeding into the wider Cluster forums. Clusters are the mechanism where strategic principles are transformed into a local solution, recognised in IMTP planning cycles along with local delivery mechanisms.

During the Accelerated Cluster Development (ACD) transition year (2022/2023), three Cluster Groups have continued and options to reduce the three-cluster footprint to two by merging the mid and south cluster will be explored. From a population planning perspective this makes sense, however, cluster maturity between the two clusters varies.

The RPB Executive Group delivers the function of pan cluster planning and is the mechanism by which representatives of the three clusters come together to collaborate with representatives of health board and local authority, public health experts, third sector, planners, and other stakeholders. The group provides the strategic planning and priorities for the clusters and receive ideas and business cases from the clusters via the cluster Leads.

What is the difference between the maturity arrangements for Mid and South Powys?

The Assistant Director of Primary Care Services explained that South cluster had been proactive and was collaborating between themselves. Mid Powys are only now collaborating well between their GPs. There are various elements that influence the maturity level of cluster development for example, the different size/number of GP practises.

Could a larger picture be given of what this would look like in 5-10 years' time?

The Assistant Director of Primary Care Services responded and explained that Accelerated Cluster Development is in its transition year, with a number of items to be considered and achieved which will allow for a stronger foundation moving forward. Currently this is in its infancy and the health board is in the process of engaging the cluster leads as equal partners through the RPB.

The Chief Executive added that there could be a challenge between having a standard blueprint and a more flexible plan which will meet the needs of the local population. It is important that the health board develop a sustainable

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	<p>integrated primary care model that will meet the needs of the population.</p> <p><i>Will this still be financially supported?</i></p> <p>The Assistant Director of Primary Care Services explained that it is a recurring budget supported by Welsh government.</p> <p>The Committee DISCUSSED and NOTED the primary Care Cluster Planning.</p> <p><i>The Assistant Director of Primary Care Services and Director of Finance and IT left the meeting.</i></p>
ITEMS FOR DISCUSSION	
PPPH/22/75	There were no items for inclusion in this section.
ITEMS FOR INFORMATION	
PPPH/22/76	<p>Q2 NHS WALES SHARED SERVICES PARTNERSHIP PERFORMANCE REPORT</p> <p>The Committee NOTED the Q2 NHS Wales Shared Services Partnership Performance Report.</p> <p>ACTION: To seek clarification from the Director of Workforce and OD on how shared services are planning to improve the recruitment system and could prioritisation be given to clinical posts when appointing.</p>
OTHER MATTERS	
PPPH/22/77	<p>DEVELOPMENT OF COMMITTEE ANNUAL PROGRAMME REPORT</p> <p>The Director of Corporate Governance presented the development of Committee annual programme report and key points were highlighted to committee which included:</p> <ul style="list-style-type: none"> • delivery of 2022/23 Annual Programme of Business; • committee terms of reference; • feedback from committees (discussions and performance review); and • feedback from the Board <p><i>Could the Director of Corporate Governance and Board Secretary explain why the risk register had not been presented at Committee?</i></p> <p>The Director of Corporate Governance and Board Secretary advised that the risk register had not been brought to Committee because of the close proximity to the January</p>

	<p>2023 Board meeting at which the full Board would receive an updated corporate risk register. If the report was provided to this Committee it would have been out of date. Assurance was given to Committee that the risk register had been updated and circulated for the Board meeting on 25 January 2023.</p> <p>The Committee DISCUSSED and NOTED the Development of Committee Annual Programme.</p>
PPPH/22/78	<p>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND/OR OTHER COMMITTEES</p> <p>There were no items to be brought to the attention of the Board or other Committees.</p>
PPPH/22/79	<p>ANY OTHER URGENT BUSINESS</p> <p>There was no urgent business.</p>
PPPH/22/80	<p>DATE OF THE NEXT MEETING</p> <p>11 May 2023 at 10:00, via Microsoft Teams.</p>
PPPH/22/81	<p>IN-COMMITTEE</p> <p>The Chair, with advice from the Director of Corporate Governance and Board Secretary, has determined that the following items include confidential or commercially sensitive information which is not in the public interest to discuss in an open meeting at this time. The Board is asked to take this advice into account when considering the following motion to exclude the public from this part of the meeting: <u>Motion under Section 1(2) Public Bodies (Admission to Meetings) Act 1960</u></p> <p><i>"Representatives of the press and other members of the public shall be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest"</i></p>
PPPH/22/82	<p>DEVELOPMENT OF ACCELERATED SUSTAINABLE MODEL</p> <p>The Committee DISCUSSED and NOTED the development of the Accelerated Sustainable Model.</p>

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RAG Status:

At risk	Red - action date passed or revised date needed
On track	Yellow - action on target to be completed by agreed/revised date
Completed	Green - action complete
No longer needed	Blue - action to be removed and/or replaced by new action
Transferred	Grey - Transferred to another group

Planning, Partnerships and Population Health Committee								
Meeting Date	Item Reference	Lead	Meeting Item Title	Details of Action	Update on Progress	Original target date	Revised Target Date	RAG status
OPEN ACTIONS FOR REVIEW - NONE								
OPEN ACTIONS - IN PROGRESS BUT NOT YET DUE								
31st January 2023	ARAC/22/104c	DSPCP	North Powys Wellbeing Programme	An update on the North Powys Wellbeing Programme to be brought to the Planning, Partnerships and Public Health Committee	Transferred from ARAC Committee. 09.05.23 update - action has been added to the work programme for August Committee.	24.08.23		On track
7th April 2022	PPPH/22/07	DCG	Long Term Strategy Content	The committee to receive feedback in terms of the RPB long term strategy content and frequency to be added to the work programme	09.05.23 update - RPB delivery plan is in final draft and being considered by RPB Board and Executive Group 11.05.23, will then be provided to PPPH Committee along with strategy update at the next meeting. Work plan has been updated.	11.05.23	24.08.23	On track
20th October 2022	PPPH/22/56	DPP	Evidence -based data for PTHB outcomes	Acquire evidence-based data which identifies the analysis of the bench marking outcomes of PTHB performance	09.05.23 update - Action in progress, being developed as part of the implementation of the revised Integrated Performance Framework. Committee asked to note change of date	01.04.23	24.08.23	On track
20th October 2022	PPPH/22/57b	DPP	Endoscopy Services	An update on Endoscopy Services to be provided to a future meeting	09.05.23 update - item added to work programme for Aug 2023 Committee meeting		24.08.23	On track
ACTIONS RECOMMENDED FOR CLOSURE (MEETING 11.05.2023)								
14th July 2022	PPPH/22/39	DPH	Permanent Contract for Vaccination Staff	The Director of Primary and Community Care to seek clarity regarding permanent contracts for vaccination staff.	09.05.23 update: 31/03/23 - WG financial allocation for delivery of covid vaccination has been substantially reduced for 2023/24, service model is being adapted to respond to predicted requirements within the financial allocation available.			Completed
20th October 2022	PPPH/22/60b	DFIT	Digital Strategic Framework	The Digital Strategic Framework to be added to the work programme as an assurance report to a future committee meeting.	09.05.23 update - The Digital Strategic Framework has been further developed, and will form part of a relevant Board development session ahead of formal Board consideration. This is to allow the whole Board to engage in its development. Action transferred to Board Development.	11.05.23		Transferred

Agenda item: 3.2

Planning, Partnerships and Population Health Committee		Date of Meeting: 11 May 2023
Subject:	Healthy Weight: Healthy Wales: <ul style="list-style-type: none"> Briefing on the Whole System Approach to Healthy Weight and update on its delivery in Powys. 	
Approved and Presented by:	Director of Public Health	
Prepared by:	Public Health Consultant/Deputy Director of Public Health	
Other Committees and meetings considered at:	N/A	

PURPOSE:

To provide a briefing on the Whole System Approach to Healthy Weight programme and an update on progress in its delivery in Powys.

RECOMMENDATION(S):

The Planning, Partnerships and Population Health Committee is asked to RECEIVE the contents of this paper and NOTING the progress of delivery of weight management pathways in Powys in 2022/23, acknowledging the current and future constraints.

Approval/Ratification/Decision¹	Discussion	Information
✓	x	✓

Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

Strategic Objectives:	1. Focus on Wellbeing	✓
	2. Provide Early Help and Support	✓
	3. Tackle the Big Four	✓
	4. Enable Joined up Care	X
	5. Develop Workforce Futures	X
	6. Promote Innovative Environments	X
	7. Put Digital First	X
	8. Transforming in Partnership	X
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	X
	3. Effective Care	X
	4. Dignified Care	X
	5. Timely Care	X
	6. Individual Care	X
	7. Staff and Resources	X
	8. Governance, Leadership & Accountability	X

EXECUTIVE SUMMARY:

The Whole System Approach to Healthy Weight is a population level prevention programme that forms part of the local delivery of the national Obesity Strategy *Healthy Weight: Healthy Wales*.

The Whole System Approach to Healthy Weight work is led by the Director of Public Health supported by a small obesity system team (1.5wte) and aims to work with local system leaders and partner organisations to reduce the prevalence of obesity in the local population by understanding and influencing the local obesity system.

Delivery of this programme in Powys during 2022/23 has progressed well and has included:

- establishing a local obesity system team,
- defining and mapping the local obesity system and completing a local system narrative in line with national methodology,
- delivery of two stakeholder events in October 2022 and January 2023,
- identification of two sub-systems 'children and families' and 'access to healthy food' as priorities for focused local work in 2023/24,
- engagement with local senior strategic leads and partnerships including the presentation of a proposal to the Powys Public Service Board for this work to form one of its priorities for 2023/24 to 2027/28.

This paper aims to provide a briefing on this work for the Planning, Partnerships and Population Health Committee and an update on the progress that has been made to date. The paper that was presented to the Public Service Board on 03 April 2023 is attached as Appendix 1 and provides further background to this work.

DETAILED BACKGROUND AND ASSESSMENT:

Background

Overweight and obesity are risk factors for a wide range of health conditions and are associated with significant costs for health and social care services. Healthy weight is a key population health and wellbeing priority both nationally and locally. The national approach is set out in Welsh Government's obesity strategy *Healthy Weight: Healthy Wales* which has four themes: healthy environments, healthy settings, healthy people, and leadership and enabling change. The delivery at the local level of a whole system approach to prevention forms part of the national *Healthy Weight: Healthy Wales* delivery plans.

Healthy weight is identified as a local priority in the PTHB IMTP and has been discussed at local strategic partnership level including at the Powys Public Services Board and at the Start Well and Live Well Boards.

Local delivery of the national *Healthy Weight: Healthy Wales* strategy is currently via two main workstreams:

1. Weight Management Service Pathways – Obesity Pathways (individual patient level intervention),
2. Whole System Approach to Healthy Weight (population level intervention).

Weight management pathways consist of clinical treatment services that support individuals who are overweight or obese to achieve and maintain a healthy weight. An update on progress in delivering weight management pathways in Powys is provided in a separate paper.

This paper focuses on the Whole System Approach to Healthy Weight programme. This is a population level approach to prevention and aims to reduce the prevalence of obesity and improve population health by understanding and influencing the local obesity system and its component sub-systems.

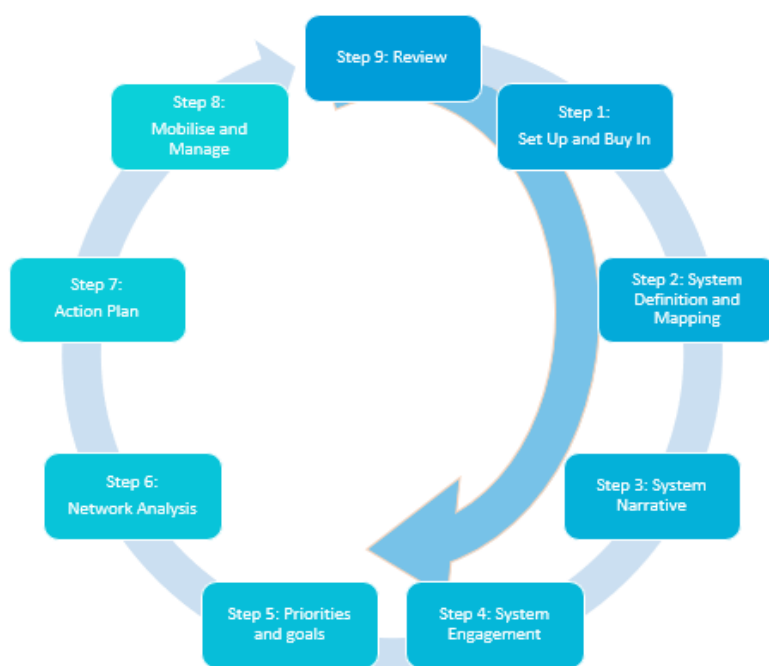
Whole System Approach to Healthy Weight

The factors that influence body weight form a complex system (the obesity system) which is made up of several interrelated sub-systems. The majority of these factors lie outside of the health service and it follows that a partnership approach will be required in order to affect change.

The Whole System Approach to Healthy Weight aims to work with local strategic leaders and partner organisations to understand the local obesity system and to identify specific sub-systems within it for focused work with the aim of improving healthy weight-related outcomes in the local population.

This programme takes a long-term approach and gaining senior, strategic buy-in across the local system is critical to success. A key part of the work in 2022/23 has therefore been to engage with strategic leads within Powys and with the local strategic partnerships including the Powys Public Service Board. A national methodology is in place as shown in figure 1.

Figure 1 PHW methodology for implementing a whole system approach to healthy weight



Summary of progress

Good progress has been made in Powys during 2022/2023. The local system has been defined and mapped, the system narrative has been completed, two strategic stakeholder engagement events have taken place (in October 2022 and January 2023) and the sub-systems of focus have been identified through the stakeholder engagement process as 'children and families' and 'access to healthy food'. These will therefore form the initial area of focus for this work in 2023/24 and the specific priorities and actions within these sub-systems will be identified and refined through further analysis and stakeholder engagement.

Engagement has been undertaken with local senior strategic leads and partnerships including the Powys Public Service Board. A proposal for this work to be adopted as a Public Service Board priority for the period 2023/24 to 2027/28 was presented at a Public Service Board meeting on 03 April 2023 and was well received. It is understood to be under consideration as a priority for the Public Service Board although confirmation of this is awaited.

Next steps

The obesity system team will undertake further mapping and analysis focusing in on the identified priority sub-systems and planning sessions with strategic stakeholders and partners to identify specific areas for action and opportunities to influence these sub-systems with the aim of improving healthy weight-related outcomes in the population. The team's action plan is included for information in Appendix 1.

Summary

This paper provides a briefing for the Planning, Partnerships and Population Health Committee on the national Whole System Approach to Healthy Weight programme and an update on its implementation in Powys. Work is progressing well and there has been good engagement with key strategic partners. Children and families and access to healthy food have been identified with local partners as the priorities for further focused system working in Powys.

A proposal has been made to the Powys Public Service Board for this work to be one of the priorities for its 2023/24 to 2027/28 work programme. This proposal is attached as Appendix 1 for information and provides more background and detail about this area of work.

NEXT STEPS:

Next steps include:

- Further mapping and analysis of the chosen sub-systems of focus i.e. children and families and access to healthy food.

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- Further engagement and planning sessions with key stakeholders to identify specific actions and opportunities to influence these sub-systems.

The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):

IMPACT ASSESSMENT					
Equality Act 2010, Protected Characteristics:					
	No impact	Adverse	Differential	Positive	Statement
Age					
Disability					
Gender reassignment					
Pregnancy and maternity					
Race					
Religion/ Belief					
Sex					
Sexual Orientation					
Marriage and civil partnership					
Welsh Language					
Risk Assessment:					Statement
	Level of risk identified				
	None	Low	Moderate	High	
Clinical					
Financial					
Corporate Operational					
Reputational					

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Powys Public Service Board Proposal

A Whole System Approach to Healthy Weight in Powys

1. Purpose of this paper

This paper makes the case for the inclusion of a Whole System Approach to Healthy Weight in the Powys Public Service Board's priorities for 2023/24 to 2027/28.

2. Background

2.1 Consequences of overweight and obese

Excess body weight is a significant issue for individuals and for wider society and is one of the greatest challenges for health and social care services.

Being overweight or obese increases the risk of developing a wide range of common health problems including heart disease, type 2 diabetes, joint problems such as osteoarthritis, mental health issues such as anxiety and depression and some types of cancer. Overweight and obesity can also influence a range of factors that affect people's life-chances such as self-confidence, educational attainment, employability and sickness-related absence from school and work.

Obesity has been estimated to cost the NHS in Wales over £73 million per annum, which increases to nearly £86 million if obese and overweight people are included.¹ If rates of overweight and obesity continue to rise, it is estimated that by 2050 the cost to the NHS in Wales will be £465 million per year and the costs to society and the economy in Wales will be around £2.4 billion per year.² Across the UK, the costs to the NHS of overweight and obesity are projected to reach £9.7 billion by 2050 and wider costs to society are estimated to reach £49.9 billion per year.³

Data from England has estimated the annual cost of obesity to wider society at around £27 billion.³ This report concluded that society spends more each year on the treatment of obesity and diabetes than on the police, fire service and judicial system combined.³

2.2 Prevalence, trends and inequalities

Data from the 2018/19 Child Measurement Programme for Wales (the most recently available data) shows that by the age of 4-5 years over a quarter of children are

¹ Phillips C, Harper C, Rance J and Farr, A (2011). *Assessing the costs to the NHS associated with alcohol and obesity*. Cardiff. Welsh Assembly Government. Available at:

[alcoholmisuseandobesityreporten.pdf \(gov.wales\)](https://gov.wales/alcoholmisuseandobesityreporten.pdf)

² Public Health Wales (2016) *Making a Difference: Investing in Sustainable Health and Well-being for the People of Wales*. Available at: [Making-a-Difference-Investing-in-Sustainable-Health-and-Well-being-for-the-People-of-Wales.pdf \(phwwwoccc.co.uk\)](https://phwwwoccc.co.uk/Making-a-Difference-Investing-in-Sustainable-Health-and-Well-being-for-the-People-of-Wales.pdf)

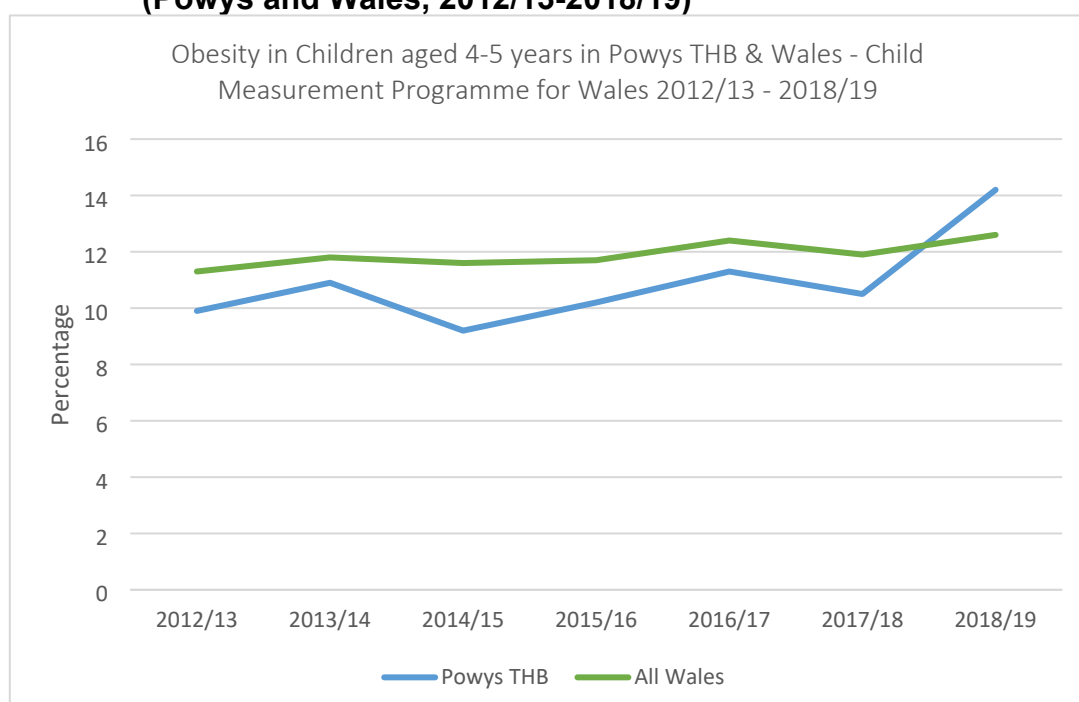
³ Public Health England (2017) *Health matters: obesity and the food environment*. Available at: [Health matters: obesity and the food environment - GOV.UK \(www.gov.uk\)](https://www.gov.uk/Health-matters-obesity-and-the-food-environment)

overweight or obese in Powys (28.1%) and in Wales (26.9%).⁴ In Powys this equates to 13.9% who are overweight and 14.2% who are obese.⁴

Self-reported data indicates that 17% of teenagers are overweight or obese in Powys (18% in Wales) and that 50% of adults (aged 16 or over) are either overweight or obese (62% in Wales).^{5,6} For Powys this equates to around 56,030 adults whose weight is higher than recommended. It is important to note that the data for teenagers and adults is self-reported and is likely to underestimate the true proportion who are overweight or obese.

Trend data shows that the proportion of people who are overweight or obese is increasing over time (see figure 1). It is estimated that an additional 10,000 people will become overweight or obese each year in Wales.

Figure 1: Trends in Obesity in Reception-aged Children over a 6-year Period (Powys and Wales, 2012/13-2018/19)



Source: Public Health Wales

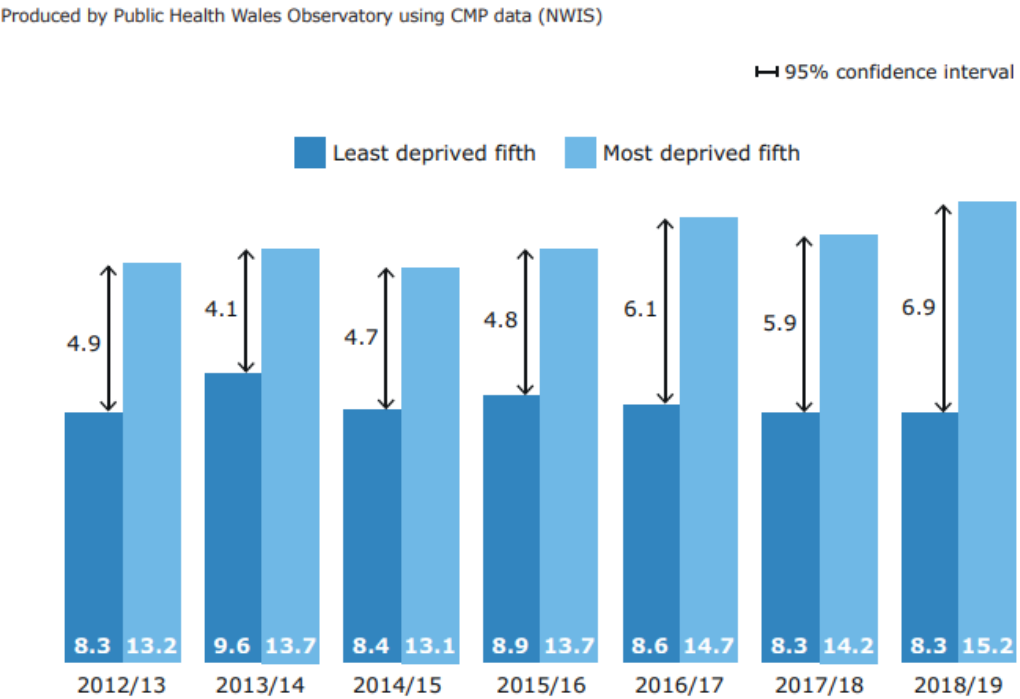
There is a strong link between excess body weight and deprivation. For example, the 2018/19 Child Measurement Programme for Wales survey found that 8.3% of 4-5 year olds in the least deprived fifth of the population in Wales were obese compared to 15.2% in the most deprived fifth (figure 2).⁴ The gap between the least and the most deprived fifths has increased over time (figure 2).

⁴ Public Health Wales. *Child Measurement Programme for Wales (2018/19)*. Available at: <https://phw.nhs.wales/services-and-teams/child-measurement-programme/cmp-2018-19/child-measurement-programme-for-wales-report-2018-19/>

⁵ Hewitt G, Anthony R, Moore G, Melendez-Torres GJ, Murphy S (2019) *Student Health and Wellbeing in Wales: Report of the 2017/18 Health Behaviour in School-aged Children Survey and School Health Research Network Student Health and Wellbeing Survey*. Cardiff University, Cardiff, UK Available at: [SHRN-HBSC-NR_31.05.2019.pdf](https://www.shrn-hbrc-nr-31.05.2019.pdf)

⁶ Welsh Government. *Adult lifestyles by age and gender, 2020-21 onwards*. Available at: [Adult lifestyles by age and gender, 2020-21 onwards \(gov.wales\)](https://gov.wales/adult-lifestyles-by-age-and-gender-2020-21-onwards)

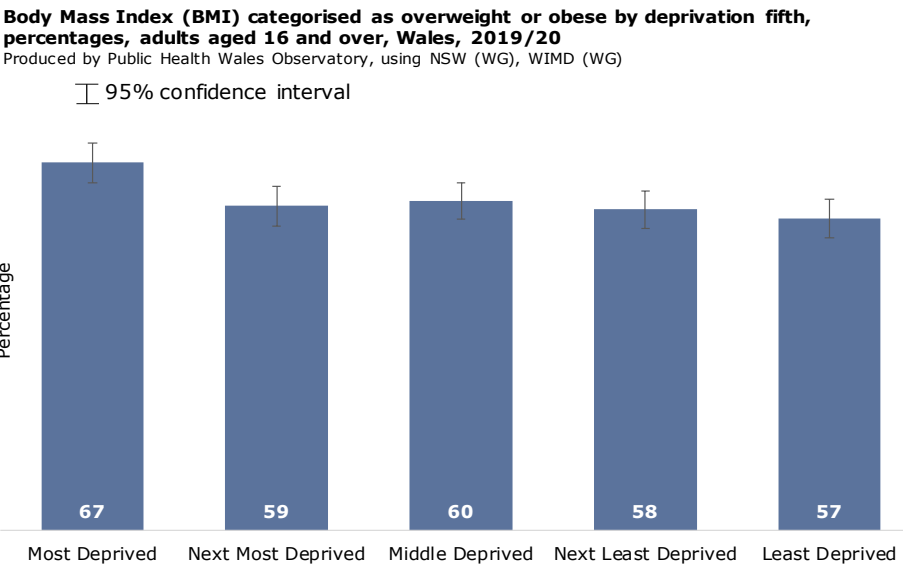
Figure 2: Percentage of children, aged 4 to 5 years living with obesity, Wales, most and least deprived fifth in Wales, Child Measurement Programme for Wales 2012/13 to 2018/19



Source: Public Health Wales

A social gradient is also seen in adults as illustrated by figure 3 which shows the proportion of adults who are overweight or obese in Wales by deprivation fifth.

Figure 3: Overweight and obesity by deprivation fifth in adults (ages 16+ in Wales) 2019/20

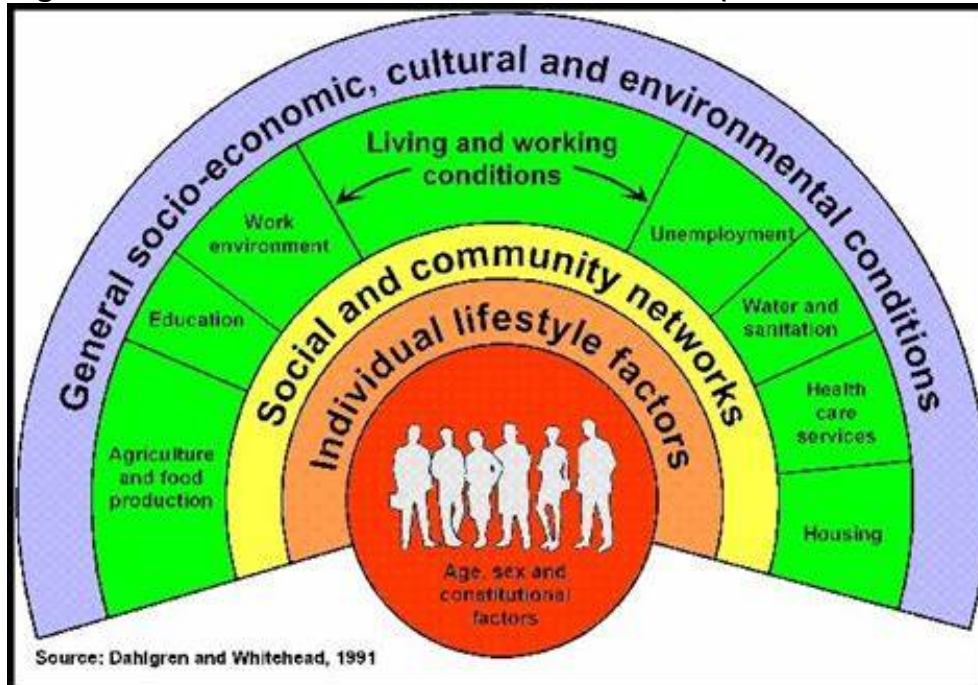


Source: Public Health Wales

2.3 The wider determinants of health

Health (including body weight) is influenced by the interaction of a range of factors including individual factors (such as age, sex, genetics), lifestyle and behavioural factors, social and community factors, and socio-economic, cultural and environmental conditions. These wider determinants of health are shown in figure 4.

Figure 4: The Wider Determinants of Health (Whitehead and Dahlgren Model)



It is important to note that, for the most part, the factors that influence health lie outside of the health service.

Many of the wide range of factors influencing body weight at the local level fall, at least to some degree, within the remit of Public Service Board partner organisations. Examples include education and skills, employability, employment and working conditions, planning, transport and access to healthy food at school and in the workplace.

3. National Obesity Strategy and Whole Systems

3.1 Healthy Weight: Healthy Wales – the national obesity strategy

The national obesity strategy, *Healthy Weight Healthy Wales*, sets out Welsh Government's ten year strategy for tackling the high rates of overweight and obesity

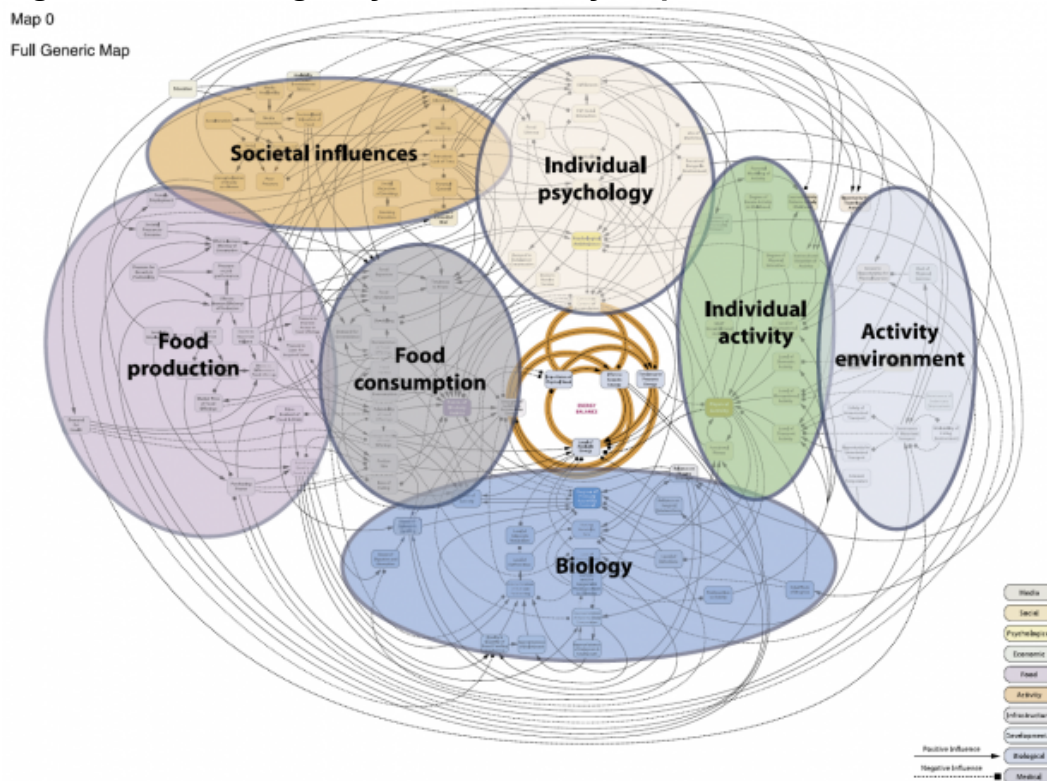
in the population.⁷ The strategy's national delivery plan includes the implementation of whole systems approaches for prevention delivered on a local basis.^{8,9}

3.2 The obesity system

The factors that influence people to become overweight or obese can be seen as a complex system: the “obesity system”. Like other complex systems this is made up of several interconnected sub-systems. The sub-systems within the obesity system include societal and cultural influences, food production, food consumption, biological factors, individual psychology, individual activity and environmental factors. The complexity of the factors operating within each system and between the systems is illustrated by the Foresight Obesity Systems Map (see figure 5).¹⁰

The complexity of the obesity system means there is no simple solution to tackling obesity and that no single agency can tackle it alone. However, adopting an approach which seeks to understand the system as a whole offers a way forward.

Figure 5: Foresight Systems Obesity Map



⁷ Welsh Government (2019) Healthy Weight: Healthy Wales Our Long-Term Strategy to Prevent and Reduce Obesity in Wales. Available at: [Healthy weight strategy \(Healthy Weight Healthy Wales\) | GOV.WALES](https://gov.wales/healthy-weight-healthy-wales)

⁸ Welsh Government (2021) *Healthy Weight: Healthy Wales delivery plan 2021 to 2022*. Available at: [Healthy Weight: Healthy Wales delivery plan 2021 to 2022 | GOV.WALES](https://gov.wales/healthy-weight-healthy-wales-delivery-plan-2021-to-2022)

⁹ See Healthy Weight: Healthy Wales Delivery Plan 2021/22 (delayed due to the pandemic) “National Priority Area 8: Building a system of prevention which enables leadership at every level”. This includes the introduction of seven regional co-ordinator teams to support local health boards, Regional Partnership and Public Service Boards to facilitate systems-based approaches to prevention.

¹⁰ Government Office for Science (2007) *Tackling Obesity: Future Choices (The Foresight Report) – Project Report 2nd Edition*. Available at: [Tackling obesity: future choices - project report \(2nd edition\) \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/281000/tackling-obesity-future-choices-project-report-2nd-edition.pdf)

3.3 Whole systems approaches

Complex systems such as the obesity system and its sub-systems can be thought of as interconnected cogs in a machine. Developing an understanding of the system as a whole, including its component parts and the interdependencies between them, provides the opportunity influence the system to improve outcomes, for example by identifying points at which changes can be made (“applying leverage”) to create change elsewhere in the system.

The following, which the Public Service Board would provide, are critical to the success of whole systems approaches:

- Senior strategic leadership,
- Strong leadership across the system and actively engaged partners,
- Long-term commitment and incremental steps delivered through collaborative working with a range of partners.

4 The Whole System Approach to Healthy Weight

4.1 National and local context

As outlined in section 3.1, the delivery of local (health board geography) systems-based approaches to prevention form part of the national strategy for addressing overweight and obesity. This work is led at the national level by Public Health Wales and facilitated by local obesity systems teams that are grant funded by Public Health Wales on behalf of Welsh Government. The Powys obesity systems team includes 1.5 whole time equivalent public health practitioners who are part of the health board’s public health team and who also work on the wider healthy weight agenda. The whole systems work forms part of the health board’s overall approach to population healthy weight and is led by the Director of Public Health supported by a consultant in public health.

4.2 Methodology and approach

The whole system approach involves a number of key steps which aim to understand the local system as a whole and its constituent sub-systems, identify one or more sub-systems to focus on and then develop plans to influence the sub-system/s to achieve positive change by identifying and testing out local solutions. Engagement and partnership working are key. The public health team’s role is to lead and facilitate the process and to provide technical expertise for example on epidemiology and the evidence-base.

A national methodology is in place (figure 6). The process is cyclical allowing for the areas of focus to develop and change over time as work progresses. Local areas are expected to follow this methodology and to report progress on a quarterly basis to Public Health Wales.

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Figure 6 PHW methodology for implementing a whole system approach



4.3 Summary of progress

Good progress has been made in Powys during 2022/2023. The local system has been defined and mapped, the system narrative has been completed, two strategic stakeholder engagement events have taken place (October 2022 and January 2023) and the sub-system of focus has been identified by stakeholders as '*Children, Families and Access to Healthy Food*'. This will form the initial area of focus for the Whole System Approach to Healthy Weight in Powys. A copy of the work plan for the programme is attached as Appendix 1.

5. The Role of the Public Service Board

5.1 A shared problem and a shared response

As outlined above, the high and increasing rates of overweight and obesity present problems and costs that impact on all public services and are not confined to the health and social care sectors. Similarly, the causes of and potential solutions to excess body weight are largely socio-economic, cultural and environmental and for the most part are not within the control of health services. A coordinated, strategic partnership approach will therefore be required in order to reduce the rates of overweight and obesity in the population.

5.2 Strategic alignment

The adoption of the whole system approach to a healthy weight as a Public Service Board priority would align with the Board's strategic priorities including the Wellbeing Assessment, Wellbeing Goals and the Five Ways of Working. This is outlined in more detail in Appendix 2.

The whole systems approach to healthy weight and the healthy weight agenda more broadly also overlap with other areas of work that have been proposed as Public Service Board priorities. For example, there is considerable potential for synergy and collaborative working in relation to:

- climate change (healthy, affordable food, local food/food miles, reducing food waste, use of green and blue spaces for physical activity, active travel, planning),
- community/road safety (safe active travel methods and routes),
- rights of way (for example: use of green spaces for physical activity).

5.3 Senior strategic leadership

Senior strategic leadership and engagement from local partner organisations is critical to success. Many of the factors that influence weight fall within the remit of the organisations that are members of the Public Service Board. The Board is therefore well placed to provide the leadership required to drive this work forward at the strategic partnership level, with the public health team providing leadership and facilitation to drive the whole systems working processes.

6. Summary

In this proposal we have made the case for why addressing overweight and obesity and promoting healthy weight is a top priority for population health, the importance of healthy weight to public services and why we consider that the Whole System Approach to Healthy Weight should be a priority for the Powys Public Service Board. We have also explained why strategic senior system-wide leadership is critical to success.

The Whole System Approach to Healthy Weight supports the Public Service Board's priorities and whilst the initial area of focus for this work (children, families and access to healthy food) has already been chosen, this programme, along with wider work on the local implementation of Healthy Weight: Healthy Wales, has considerable scope for synergy with other proposed Public Service Board priorities. These include climate change, community safety and access to outdoor spaces. Opportunities for a combined approach across these priority areas could be explored in more depth as part of the work to implement the Whole System Approach to Healthy Weight.

The Public Service Board is asked to adopt the Whole System Approach to Healthy Weight as one of its priorities and to provide the strategic leadership across public services in Powys that this work will require if it is to be successful in reducing rates of overweight and obesity in Powys.

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Appendix 1:

Whole Systems Approach to Obesity Prevention – Summary of Powys Work Plan

	Planned Actions	Progress as at March 2023
Step 1 Set up and buy-in Senior level support and governance structures	<ul style="list-style-type: none"> • Present paper to PTHB Executive Committee. • Engage with RPB, PSB and sub-groups as appropriate. • Engage with senior level stakeholders in PCC and PAVO. • Establish governance structures. • Establish local team action plan. 	<ul style="list-style-type: none"> • Local team action plan has been developed. • The local team (Consultant, Practitioners and Administrator) meet monthly. • WSA to Healthy Weight under consideration as one of the five PSB priorities for the next 5 years • RPB groups including Start Well, Live Well and Junior Start Well are engaged and sighted on the work to date. • PTHB Executive Committee and Planning, Partnerships and Population Health Committee are sighted on the work.
Step 2 System Definition and Mapping Defining and understanding the local system	<ul style="list-style-type: none"> • Conduct mapping exercise to understand local priorities, strategic groups and stakeholders and priority areas. • Gain understanding of local assets. 	<ul style="list-style-type: none"> • Information collated on key local strategic plans. • Strategic groups mapped using KUMU software. • Initial meetings with identified stakeholders have commenced. • Mapping presented for comment at our strategic stakeholder engagement event in October
Step 3 Creating a System Change Narrative Develop narrative of why obesity matters and how obesity is currently being addressed locally	<ul style="list-style-type: none"> • Develop an evidence based narrative of the issues and assets within PTHB. • Based on this narrative develop common tools and consistent messages that can be used across the system. 	<ul style="list-style-type: none"> • An evidence-based narrative has been produced and shared with stakeholders via our engagement events. • This document is also available on our team Padlet.
Step 4 System Engagement Bringing stakeholders together to agree shared priorities for action	<ul style="list-style-type: none"> • Plan and deliver a strategic stakeholder event to; introduce area of work, highlight key findings. • develop shared understanding of task. • work together to agree initial priorities for action. 	<ul style="list-style-type: none"> • Strategic stakeholder engagement events took place in October 2022 and January 2023. • These events allowed us to collaboratively agree our sub-system of focus.

Step 5 Priorities and Goals Agree priority area(s) and conduct detailed mapping in these area(s)	<ul style="list-style-type: none"> • Agree initial priority sub-systems for focus. • Once priority area(s) agreed, detailed system and asset mapping will be conducted to identify partnerships, organisations and plans at a more detailed level. 	<ul style="list-style-type: none"> • Five potential sub-systems were identified from our first engagement event. These were presented at our second engagement event, and delegates at the event were invited to rank the sub-systems in order of priority. • Our sub-system of focus has been identified as 'Children, Families and Access to Healthy Food' • Mapping of the sub-system has commenced.
Step 6 Network Analysis Understand connections within sub-system	<ul style="list-style-type: none"> • Bring together identified stakeholders to better understand how key assets and agents inter-relate and connect. 	<ul style="list-style-type: none"> • Further engagement events are planned for May 2023 and November 2023.
Step 7 Action Planning	<ul style="list-style-type: none"> • Develop joint action plan to address priority area(s). 	<ul style="list-style-type: none"> • N/A
Step 8 Mobilise and Manage	<ul style="list-style-type: none"> • Stakeholders to take forward action plan. • Develop effective communication plan. 	<ul style="list-style-type: none"> • N/A
Step 9 Review	<ul style="list-style-type: none"> • Agree robust evaluation method. • System to come together to review progress regularly. • Work together to identify where change is needed and plan for the next phase of action. 	<ul style="list-style-type: none"> • N/A

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Appendix 2

Alignment of a Whole System Approach to Healthy Weight with the Public Service Board's Priorities

A1 Links to the Wellbeing Assessment and Plan

A1.1 Ageing Population

In Powys an 25.2% increase in the number of people who are 65 is predicted by 2043. Older adults with obesity are more likely to be isolated, more likely to have additional care needs or require long-term care and twice as likely to be admitted to a nursing home.^{11,12}

A1.2 Healthy Life Expectancy

Overweight and obesity contribute towards the number of years people can expect to live in good health and towards overall life expectancy. The link between excess body weight and deprivation means that overweight and obesity and the conditions associated with having excess weight also contribute to inequalities in life expectancy and healthy life expectancy.^{13,14} Increasing the proportion of the population who are a healthy weight has the potential to reduce the number of years people spend in poor health and to increase overall life expectancy.

A1.3 Mental health

Obesity is associated with an increased risk of developing mood and anxiety disorders. We also know adults with depression are more likely to be obese than adults who do not though causality is unknown. The Wellbeing Assessment found that mental health issues increased following the pandemic, with anxiety and depression being the most common mental health disorders for those of working age.¹⁵

¹¹ Marihart, C, Brunt, A, Geraci A *The high price of obesity in nursing homes*. Care Management Journals 16(1). Available at: [The High Price of Obesity in Nursing Homes | Springer Publishing](#)

¹² Nizalova, O, Gousia, K, Forder J (2020) Effect of body mass on future long-term care use. BMC Geriatrics. Available at: [Effect of body mass on future long-term care use - PMC \(nih.gov\)](#)

¹³ Life expectancy is a measure of the average expected years of life for a newborn based on recently-observed mortality rates. Healthy life expectancy represents the number of years a person might expect to live in good or very good health. Both measures are estimates for the general population.

¹⁴ In Powys (2017-2019 data):

- life expectancy at birth is 83.7 years for females and 80.0 years for males
- the life expectancy inequality gap between the most and least deprived fifths of the population is 5.5 years for females and 6.7 years for males
- healthy life expectancy at birth is 66.3 years for females and 63.3 years for males
- the inequality gap in healthy life expectancy between the most and least deprived fifths of the population is 10.1 years for females and 11.2 years for males

¹⁵ Powys Public Service Board (2022) Powys Wellbeing Assessment. Available at: [FULL Well-being Assessment - March 2022 \(1\).pdf](#)

A1.4 Inequalities

Adults, adolescents and children living in more deprived areas are more likely to be overweight or obese compared to those living in the least deprived areas. For children aged 4-5 years, the gap between obesity prevalence in the most and the least deprived areas has risen from 5.9% in 2017/18 to 6.9% in 2018/19.⁴ The pandemic has amplified existing health inequalities. Deprived groups have been more vulnerable to declining income and the inequality gap is widening.

A2 Links to the PSB Wellbeing Goals

A2.1 Objective 1: People in Powys will live happy, healthy, and safe lives

- Tackling unhealthy weight has a clear link to this objective. Obesity is the leading cause of many of the major long-term conditions including type 2 diabetes, hypertension, cardiovascular disease including stroke, some types of cancer, kidney disease, obstructive sleep apnoea, gout, osteoarthritis and liver disease.
- Being overweight or obese can impair well-being, quality of life and contribute to low self-esteem, poor self-image and low confidence levels.
- Obesity lowers healthy life expectancy and high BMI is the largest identified contributor to the number of years lived with disability.
- Children living with obesity are more likely to become adults living with obesity and have a higher risk of morbidity, disability and premature mortality in adulthood.
- Health and social problems normally seen in adults (such as type 2 diabetes, musculoskeletal conditions, low self-esteem and depression) and are becoming more prevalent in children and young people due to the rise in childhood obesity.
- Children who are obese are more likely to be bullied and to have higher levels of school absence with negative consequences for their learning and educational attainment.

A2.2 Objective 2: Powys is a county of sustainable places and communities

- Physical activity is an important factor in healthy weight and the environment has an important role to play in supporting people to be more active. Access to suitable spaces that support people to be active such as outdoor green spaces, safe roads for cycling, safe paths for walking and leisure and community facilities are important in encouraging physical activity. Similarly, improving access to locally, affordable food offers a range of ways to support people to eat more healthily.

A2.3 Objective 3: An increasingly effective Public Service for the people of Powys

- Taking a whole system approach to tackling unhealthy weight will help unite programmes of work and align strategic priorities. There is a lot of positive work going on across Powys that has the potential to impact the population's weight. A shift from looking at individual actions to addressing actions at a system level will increase the effectiveness across agencies and help facilitate positive changes at a population level.

A3 The Five Ways of Working

A3.1 Long term

Tackling unhealthy weight in Powys is a long-term goal. Taking a whole system approach will encourage long-term, sustainable changes. Benefits can be expected mostly in the medium to long-term although some may be seen in a shorter timeframe.

A3.2 Prevention

Acting now is essential to halt the current trends in overweight and obesity. Current predictions show that obesity rates and the associated consequences for individuals and society are likely to worsen if action is not taken. This includes increasing economic costs for health and social care and increasing pressures on society as a whole. If rates continue to rise, it is estimated that overweight and obesity will cost society and the economy in Wales around £2.4 billion per year by 2025.

A3.3 Integration

Tackling healthy weight has benefits for organisations across Powys, both within and outside of health and health and social care. A system approach aims to draw together existing work, looking at strategic plans and priorities and recognising common themes to ensure duplication of work is avoided, and partners can work together more efficiently and effectively. A whole system approach can add value to existing strategies and programmes of work by providing the opportunity to develop a shared vision.

A3.4 Collaboration

Whole system approaches bring organisations together to work on shared goals. The whole system approach to healthy weight is a national programme with many opportunities to draw on learning and expertise from other areas.

A3.5 Involvement

The whole system approach aims to understand the strengths, levers, gaps and deficits that exist in the local system. It is a strengths-based approach that aims to mobilise and build on existing community assets to strengthen the system and make it more conducive to attaining and maintaining a healthy weight. The views of stakeholders and local communities will be essential in identifying these strengths and levers.

Planning, Partnerships and Population Health Committee		Date of Meeting: 11 May 2023
Subject:	Healthy Weight: Healthy Wales Update on the development of Weight Management Pathways in Powys during 2022/23	
Approved and Presented by:	Director of Public Health	
Prepared by:	Public Health Consultant/Deputy Director of Public Health	
Other Committees and meetings considered at:	N/A	

PURPOSE:

To provide an update on progress on the delivery of weight management pathways in Powys in 2022/23.

RECOMMENDATION(S):

The Planning, Partnerships and Population Health Committee is asked to **RECEIVE** the contents of this paper and **NOTING** the progress of delivery of weight management pathways in Powys in 2022/23, acknowledging the current and future constraints.

Approval/Ratification/Decision¹	Discussion	Information
✓	x	✓

Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

Strategic Objectives:	1. Focus on Wellbeing	✓
	2. Provide Early Help and Support	✓
	3. Tackle the Big Four	✓
	4. Enable Joined up Care	✓
	5. Develop Workforce Futures	X
	6. Promote Innovative Environments	X
	7. Put Digital First	X
	8. Transforming in Partnership	X
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	X

EXECUTIVE SUMMARY:

The Welsh Government published the national obesity strategy: *Healthy Weight: Healthy Wales* in October 2019, and this sets out the requirement to develop weight management pathways for adults, and for children, young people and families.

A Powys Strategic Weight Management Pathway Development Plan (2021-2024) was approved by Executive Committee in June 2021. This was updated during 2022 and the revised development plan, along with the action plan for 2022/23, were approved by Executive Committee on 09 March 2022 and the Planning, Partnerships and Population Health Committee on 07 April 2022.

This paper provides an update on progress during 2022/23. It also highlights the financial challenges to the further development of weight management services in Powys.

In brief:

- Considerable progress has been made during 2022/23 in establishing a adult weight management pathway in Powys. Services have been established at levels 1, 2 and 3.

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- A business case has been developed for investment to support the establishment of a pathway for children, young people and families and considered at Executive Committee. Funding hasn't been identified or secured to introduce a service, therefore it has not been possible to progress the introduction of services for this group.
- Demand now exceeds capacity particularly at level 3. A business case has been developed for investment to further develop the adult pathway which has been considered at the Investment and Benefits Group and Executive Committee. Funding has not been secured to expand the service.

DETAILED BACKGROUND AND ASSESSMENT:

Background

Overweight and obesity are risk factors for a wide range of health conditions and are associated with significant costs for health and social care services. Healthy weight is a key population health and wellbeing priority both nationally and locally. The national approach is set out in Welsh Government's obesity strategy *Healthy Weight: Healthy Wales* which has four themes: healthy environments, healthy settings, healthy people, and leadership and enabling change.

Healthy weight is identified as a local priority in the PTHB IMTP and has been discussed at local strategic partnership level including at the Powys Public Services Board and at the Start Well and Live Well Boards.

Local delivery of the national *Healthy Weight: Healthy Wales* strategy is currently via two main workstreams:

1. Weight Management Service Pathways – Obesity Pathways (individual patient level intervention),
2. Whole System Approach to Healthy Weight (population level intervention).

Weight Management Service Pathways – Obesity Pathways (individual patient level intervention)

Welsh Government expects health boards to provide access to an obesity pathway for adults, and children, young people and families who need help to lose weight. Figure 1 outlines the tiered approach to pathways from level 1 to level 4. Health boards report progress against the development of these pathways to Welsh Government twice yearly.

Weight management service pathways are clinical treatment services for individuals who are overweight or obese and aim to 'treat' individuals to achieve and maintain a healthy weight. These are clinical services that treat individuals rather than population level public health preventative interventions.

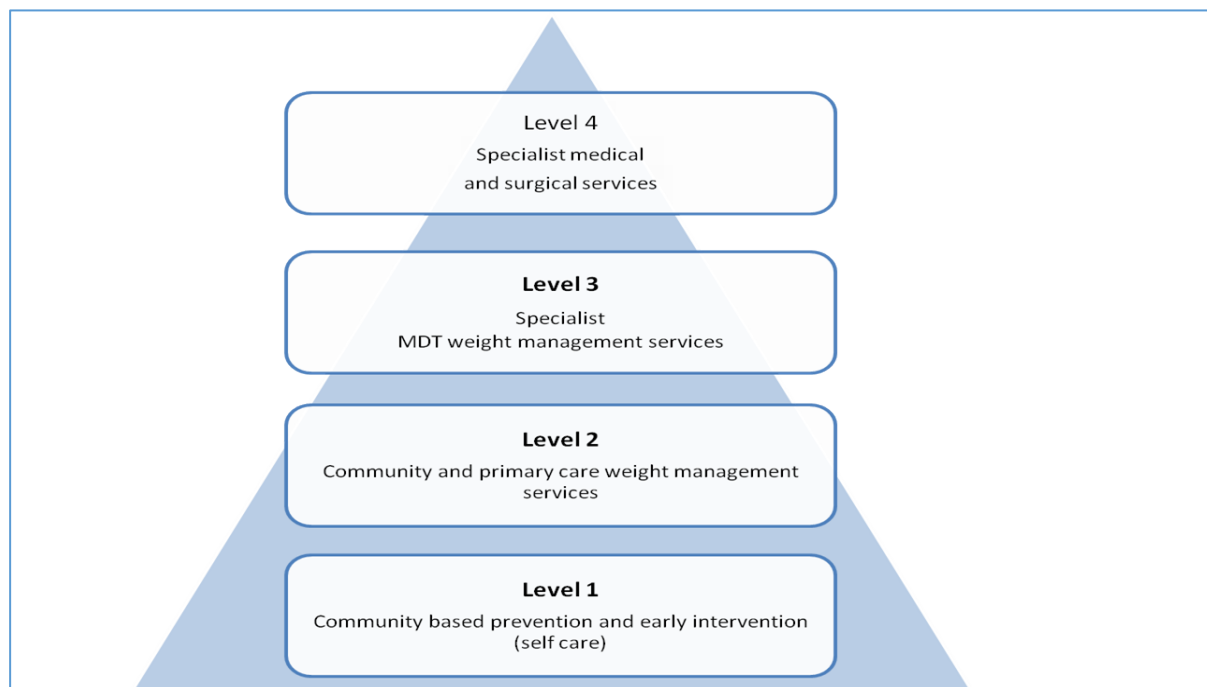
Whole System Approach to Healthy Weight (population level intervention)

This workstream is primarily focused on prevention and recognises that the factors that influence body weight – its wider determinants – lie largely outside the health service and that population level prevention requires a strategic multi-agency partnership response across the whole system.

An update on progress in delivering the Whole System Approach to Healthy Weight is provided in a separate paper.

Figure 1

Summary of the Levels within the Weight Management Pathway



This paper provides an update on the weight management service pathways that treat patients on an individual basis.

Priorities during 2022/23

The previous report to the Planning, Partnerships and Population Health Committee on 07 April 2022 provided an update on progress during 2021/22. In brief the priorities in 2021/22 included:

- establishing a Strategic Weight Management Pathway Development Group,

- developing plans for a pathway of weight management services for adults including a business case for investment,
- developing plans for a pathway of weight management services for children, young people and families including a business case for investment,
- commencing implementation of adult weight management services at levels 1, 2 and 3,
- updating the Powys Strategic Weight Management Development Plan 2021-2024.

Work during 2022/23 has built on these foundations with a focus on:

- the continued delivery and further development of the adult weight management pathway at levels 1 and 2 (delivered by the PTHB Dietetic Team) and level 3 (delivered by the PTHB Living Well Team).
- developing a business case and seeking further funding via the business case route to expand (increase capacity) within the adult pathway.
- seeking funding via the business case route to establish a pathway for children, young people and families.

The Powys Strategic Weight Management Pathway Planning Group has continued to meet during 2022/23 to oversee the development of weight management services in Powys and to ensure that national reporting requirements are met. It meets on a monthly basis and is chaired by a Consultant in Public Health/Deputy Director of Public Health.

Summary of Current Weight Management Service Provision

Adult weight management services

Level 1

Building on the work undertaken in 2021/22, during 2022/23 the PTHB Dietetic Team has provided Foodwise for Life and Get Cooking courses that provide healthy eating-related advice at level 1. Clients have also had the option of attending commercial weight management support (Slimming World). In addition, clients can access a national online level 1 service (Healthy Weight, Healthy You) which was launched recently by Public Health Wales.²

Level 2

[Home - Healthy Weight Healthy You](#)

In January 2023 the Dietetic Team introduced a pilot level 2 service comprising Foodwise for Life, Get Cooking or Slimming World as above, plus offering support for clients to become more physically active provided via referral to the Powys NERS (National Exercise on Referral Scheme) Team.³

Level 3 adult weight management services

The PTHB Living Well Service has established this new level 3 service. The referrals have increased with demand exceeding capacity which is being managed within "normal" NHS demand and capacity processes.

Level 4 adult weight management services

Whilst level 4 services form part of the overall adult pathway they are commissioned by the Welsh Health Specialised Services Committee and are provided out of county.⁴ Referrals to level 4 is via the pathway which should also provide step-down support.

Children, Young People and Families Weight Management Pathway

A business case has been developed for developing a children, young people and families weight management pathway. This has been considered at the Investment and Benefits group and by the Executive Committee. To date no funding has been made available by Welsh Government or identified locally to develop this pathway, therefore there are currently no services in place for this group.

Capacity and demand

The level 2 and 3 services have both been established on a pilot basis. Whilst both are at an early stage of development, it is apparent that current capacity is insufficient to meet local need or demand. Demand, particularly at level 3, has increased as the new services have become established. Whilst there is some scope for the level 2 service to expand to see more clients in 2023/24 within its existing budget, the level 3 service is now at capacity and is managing demand within RTT waiting times against a background of increasing referral numbers.

Funding and investment

Prior to the launch of *Healthy Weight: Healthy Wales*, there was no provision as PTHB did not provide or commissioned weight management services for

³ Healthy eating support such as Foodwise provided on its own would sit at level 1, but when combined with an appropriate physical activity intervention (e.g. NERS) this would count as a level 2 service.

⁴ WHSSC currently commissions Level 4 Bariatric Surgery from: Welsh Institute of Metabolic and Obesity Surgery (WIMOS), SBUHB and Salford Royal NHS Foundation Trust

residents of Powys. An allocation of £121,000 per annum has been provided by Welsh Government to support the establishment of weight management services in Powys. This has been used to establish the pilot level 3 service. The level 1 and 2 services provided by the PTHB Dietetic Team are funded by Prevention and Early Years (PEY) funding (£67,589 in 2022/23).

Business cases for investment to establish a pathway for children, young people and families and to increase capacity in the adult pathway have been discussed at the Investments and Benefits Group and the Executive Committee. Funding to further develop services haven't been identified to date.

Summary

Good progress has been made in establishing weight management services for adults in Powys and an adult obesity pathway (Level 1, 2, 3) is now in place. The Level 3 service is currently at capacity and limited by the funding allocation from Welsh Government. The demand and need exceed available capacity and is managed within RTT waiting times. A business case has been developed for further investment in the adult pathway and considered at Executive Committee. Further investment to expand services hasn't been identified and service provision will be maintained and managed within current funding allocation. The monitoring of the service (demand, capacity, and outcomes) will move to a business-as-usual approach and will be managed as part of the performance and commissioning processes.

A business case has been developed for a children's pathway however, no funding has been provided by Welsh Government or identified locally to develop the service at this stage.

NEXT STEPS:

- The Weight Management Services in place will move to business-as-usual approach with operational service planning and delivery continuing by the Dietetic Team for the adult service at levels 1 and 2; and by the Living Well Service for the adult level 3 service.
- The monitoring of the service (demand, capacity, and outcomes) will move to a business-as-usual approach and will be managed by the operational services and clinical oversight aligned with other aspects of routine PTHB clinical service, with performance reported as part of the performance and commissioning processes.
- The Strategic Weight Management Pathway Development Group will be stood down. If further funding is identified the group will reconvene to oversee further development of pathways.

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The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board’s Equality Impact Assessment Policy (HR075):

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
Age				✓
Disability				✓
Gender reassignment				✓
Pregnancy and maternity				✓
Race				✓
Religion/ Belief				✓
Sex				✓
Sexual Orientation				✓
Marriage and civil partnership	✓			
Welsh Language	✓			
Statement				
Risk Assessment:				
	Level of risk identified			
	None	Low	Moderate	High
Clinical	✓			
Financial			✓	
Corporate	✓			
Operational	✓			
Reputational			✓	
Statement				
<p>There is a financial risk associated with the level of investment required to establish a fully functioning weight management service for adults and children. The reputational risk is associated with not doing this given the expectations of Welsh Govt.</p>				

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Agenda item: 3.2

Planning, Partnerships and
Population Health Committee

Date of Meeting:
11th May 2023

Subject:	Strategic Change Report
Approved and presented by:	Executive Director of Planning and Commissioning, and (Executive Director of Therapies and Health Science)
Prepared by:	Assistant Director of Planning, Assistant Director of Engagement and Communication
Other Committees and meetings considered at:	Executive Committee – 19 April 2023

PURPOSE:

This report provides the Committee with an updated stocktake. This version provides a summary of neighbouring organisation's plans which have recently been published for 2023/24 onwards (where information was available at time of producing this report).

It should be noted that these are not approved plans as correspondence has been received by organisations since publication, from Welsh Government, requesting changes and supplementary information by the end of May 2023. This update is therefore interim.

RECOMMENDATION(S):

The Committee is asked to **DISCUSS** the report content taking **ASSURANCE** the organisation has appropriate mechanisms in place to monitor and review strategic change across partner organisations.

Approval/Ratification/Decision ¹	Discussion	Information
	✓	✓

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

Strategic Objectives:	1. Focus on Wellbeing	✓
	2. Provide Early Help and Support	✓
	3. Tackle the Big Four	✓
	4. Enable Joined up Care	✓
	5. Develop Workforce Futures	✓
	6. Promote Innovative Environments	✓
	7. Put Digital First	✓
	8. Transforming in Partnership	✓
Health and Care Standards:	1. Safe	✓
	2. Timely	✓
	3. Effective	✓
	4. Efficient	✓
	5. Equitable	✓
	6. Person-Centred	✓

EXECUTIVE SUMMARY:

This report provides the Committee with an updated stocktake – this version provides a summary of neighbouring organisation’s plans which have recently been published for 2023/24 onwards (where information was available at time of producing this report).

It should be noted that these are not approved plans as correspondence has been received by organisations since publication, from Welsh Government, requesting changes and supplementary information by the end of May 2023. This update is therefore interim.

DETAILED BACKGROUND AND ASSESSMENT:

¹ Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

There are a number of strategic programmes that relate to health and care provision for residents of Powys, countywide or in particular geographies, depending on the programme and relevant provider's catchment areas.

The Strategic Change Stocktake provides an overview of the key programmes, as far as information is available at the time of producing the report. Updates are gathered through various sources including Planning and Communications peer networks; Commissioning team intelligence particularly updates shared through 'CQPRM' meetings, and quarterly searches of key websites including neighbouring health board transformation programmes / key documents and board papers.

This update has focused particularly on a review across the plans of neighbouring organisations for 2023/24 onwards.

It should be noted that this is a changing picture and unlikely to be fully complete at any one time, as it remains a challenging environment for engagement and delivery on transformation programmes. Many were suspended and are being reframed due to the impact of the Covid-19 pandemic and the status of some of these are subject to further work being undertaken currently.

It should be noted that the information in the report is based on plans submitted at the end of March 2023, however these are not yet fully approved plans as correspondence has been received by organisations since publication, from Welsh Government, requesting changes and supplementary information by the end of May 2023.

Current Engagement and Consultation Exception and Highlights

Since our last Strategic Change report we have seen the transition from Community Health Councils to Llais, the new national Citizen Voice Body for health and care in Wales. National consultation has taken place on updated guidance on engagement and consultation on NHS service change, with final guidance expected soon. The Service Change Report includes a summary of the current position and next steps, and highlights the need to update the health boards standard operating procedures to reflect the transition to Llais and the new guidance when available.

Key programmes for which engagement/consultation is under way or under consideration are listed below. The Strategic Change Report includes exception and highlight reports for each programme:

Engagement under way:

- EMRTS / Welsh Air Ambulance

Consultation under way:

- Powys Well-being Plan

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- Hywel Dda University Health Board new hospital location

Engagement planned or under consideration

- PTHB Accelerated Sustainable Model

Consultation planned or under consideration

- Hywel Dda University Health Board interim configuration of paediatric services

Period of engagement or consultation has ended and next steps awaited:

- Gilwern Branch Surgery
- South Wales Specialist Auditory Hearing Implant Services
- Herefordshire and Worcestershire Stroke Services

NEXT STEPS:

- The report will be presented at the Planning, Performance and Population Health Committee on 15th May
- The report will also be shared with other key stakeholders including Welsh Government and the Llais
- The report is updated on a quarterly cycle and the next update will include further detail in relation to the supplementary information requested by Welsh Government to be submitted at the end of May 2023

The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
Age				
Disability				

Statement
Please provide supporting narrative for any adverse, differential or positive impact that may arise from a decision being taken

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Gender reassignment					
Pregnancy and maternity					
Race					
Religion/ Belief					
Sex					
Sexual Orientation					
Marriage and civil partnership					
Welsh Language					
Risk Assessment:					
	Level of risk identified <div> <div>None</div> <div>Low</div> <div>Moderate</div> <div>High</div> </div>				<div>Statement</div>
Clinical					
Financial					
Corporate					
Operational					
Reputational					

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GIG
CYMRU
NHS
WALES

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

Strategic Change Update

Review of Neighbouring Plans for 2023/24

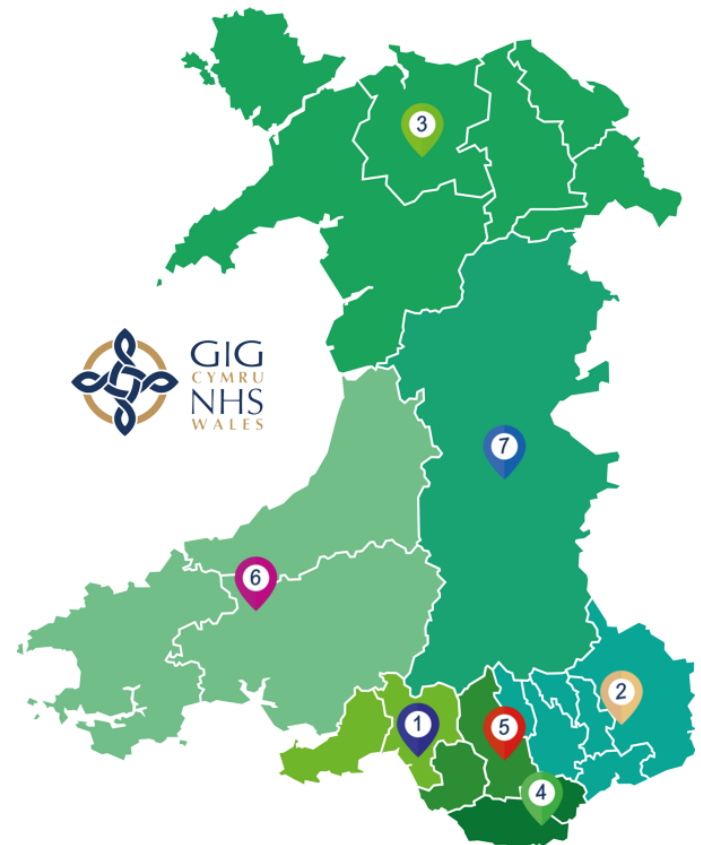
April 2023

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Purpose

- This update presents a review and summary of the recently published Plans of neighbouring organisations for 2023/24 onwards, where available
- This provides a broad, whole system view of each area's strategic change ambitions
- This assists in understanding the context and potential for existing and planned strategic changes across both Wales and England, which may individually or cumulatively impact on the provision of healthcare for Powys residents

It should be noted that NHS Wales Plans are not yet fully approved plans as Welsh Government have requested changes and supplementary information by the end of May 2023.



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Overview – key areas of impact for Powys

The refresh of the Powys RPB Area Plan and PSB Wellbeing Plan are reaching completion; these are aligned with the PTHB Integrated Plan 2023-2025 which was approved and submitted to Welsh Government at the end of March 2023

BCUHB have extended time to submit an Annual Plan (June 2023) which will respond to Special Measures; it will retain a three year focus, continuing to be framed by the long term ambition in 'Living Healthier Staying Well' and the Clinical Services Strategy launched in June 2023

All areas in Wales have developed plans for 2023 - 2024; responding to the NHS Wales Planning Framework which includes refreshed Ministerial Priorities.

The Mid Wales Joint Committee for Health and Care have refreshed priorities for 2023/24

HDUHB have produced an Annual Plan 2023- 24, set in the longer term context of 'A Healthier Mid and West Wales' (this includes a plan for a new build Urgent and Planned Care Hospital and network of community hospital)

ARCH programme includes regional centre of excellence / regional services

SBUHB have produced a Recovery and Sustainability Plan which follows up on Transformation already achieved with centralisation of acute medicine; the plan also builds on the development of a Population Health Strategy

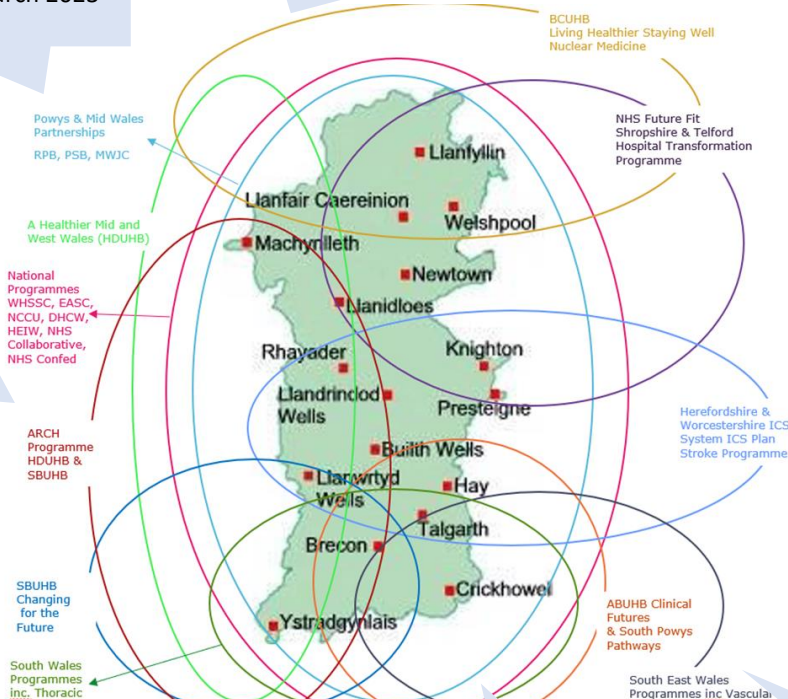
CTMUHB have produced a Three Year Plan set in the context of their Clinical Services Strategy 'CTM 2030' and three major projects which include a Regional Diagnostic Centre and acute site utilisation (with review and roadmap to be developed in Spring 2023)

Velindre 'Transforming Cancer Services' in South East Wales Programme includes Radiotherapy Satellite Centre

ABUHB have developed a three year plan which follows up on major transformation in recent years, with a focus on Neighbourhood Care Networks and population health

Hereford & Worcestershire Stroke Programme resumed; public engagement on options concluded in November 2022; further work in train on detail of options to be progressed

Shropshire & Telford & Wrekin Hospital Transformation Programme being implemented in line with outcomes of 'Future Fit' consultation



North Wales



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Betsi Cadwaladr University Health Board

Betsi Cadwaladr University Health Board covers a large North Wales footprint spanning six Local Authority areas of Anglesey, Gwynedd, Conwy, Denbighshire, Flintshire and Wrexham.



Strategy / Plan	Key Points – from review of recently published Plan(s)
Annual Plan 2023 – 2024 (Pending – final version not available at time of this report)	<p>BCUHB have confirmed it is not possible to submit a balanced and approvable IMTP and therefore are developing an <u>Annual Plan</u>, whilst retaining a three year focus on planning for the organisation.</p> <p>BCUHB requested additional time to finalise their Annual Plan to include actions relating to the Special Measures and to enable the new Chair and Independent Members to set the ambition and appropriate scrutiny. An update was provided to BCUHB Board Meeting on 30 March 2023 which confirmed that they would submit a Draft plan by end of March and continue the final stages with the support of Welsh Government, up to end of <u>June 2023</u>.</p> <p>The Annual Plan continues to be framed by the Health Board's long term strategy 'Living Healthier, Staying Well' and the Clinical Services Strategy launched in June 2023. It also reflects shared priorities within the RPB Area Plan and PSBs Wellbeing Plans.</p> <p>At the time of writing this paper, the assessment of planned care delivery against Ministerial priorities and some aspects of unscheduled care was being finalised, along with the level of in-year (23/24) performance against targets and year-end trajectories given the available resource. Further work is ongoing with Welsh Government and the Finance Delivery Unit to address the challenging position and balance financial delivery with quality and performance.</p>
Note on Special Measures link for further information	<p>On 27th February the Minister for Health and Social Care announced that the Health Board would be escalated into Special Measures, the highest level of intervention in the escalation framework. View the full release from Welsh Government here. This announcement followed the publication of a report from Audit Wales presenting the findings from their Review of Board Effectiveness.</p>

Mid and West Wales



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Powys has a 'co-terminous' health board and local authority, with one Powys Regional Partnership Board (and one Area Plan) and one Public Services Board (with one Wellbeing Plan).

Strategy / Plan	Key Points – from review of recently published Plan(s)
A Healthy Caring Powys – 10 year Health and Care Strategy 2017 – 2027 (Powys Area Plan)	<ul style="list-style-type: none"> Overseen by the Powys Regional Partnership Board (RPB) Shared health and care strategy formally approved by the RPB, PTHB, PCC in March 2018 and reviewed 2021/2022 to inform the refresh of the Area Plan Updates to the Powys Population Needs Assessment and Wellbeing Assessments published Spring 2022 Area Plan refresh nearing completion, with final submission April 2023 and further detailed work on Delivery Plan to be completed in Q1 (by end June 2023)
The Powys Well-being Plan – Towards 2040	<ul style="list-style-type: none"> Overseen by the Powys Public Services Board (PSB); sets out ambitions for very long term 'inter-generational' sustainable development of Wellbeing in Powys Wellbeing Assessment updated Spring 2022 which is informing the refresh of the Wellbeing Plan Engagement carried out to gather insights from residents and stakeholders to inform the refresh of the plan Wellbeing Plan refresh nearing completion with final work to be finalised in Q1
PTHB Integrated Plan 2023 - 2026	<ul style="list-style-type: none"> PTHB approved the Integrated Plan 2023 – 2026 at the Board meeting on 29 March 2023 The plan does not set out a financially balanced plan meeting the duty to break even, however it has been submitted as an Integrated Plan retaining a three year outlook which continues to be framed by the shared long term health and care strategy 'A Healthy Caring Powys', aligned with the RPB Area Plan and PSB Wellbeing Plan The Integrated Plan 2023-26 was submitted to Welsh Government on 31st March 2023 and responds to the NHS Wales Planning Framework including the refreshed Ministerial Priorities.
Powys County Council – Corporate Plan 'Stronger Fairer Greener'	<ul style="list-style-type: none"> The County Council have published 'Stronger Fairer Greener' which brings together their Corporate and Strategic Equality plan This is available at https://en.powys.gov.uk/article/14174/Our-Corporate-and-Strategic-Equality-Plan

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Mid Wales Joint Committee for Health and Social Care (MWJC)



Mid Wales is formally designated as a Regional Planning Area; MWJC membership is made up of PTHB, HDUHB, BCUHB, WAST, Ceredigion, Gwynedd and Powys County Councils; the respective Community Health Councils are co-opted members.

Strategy / Plan	Key Points – from review of recently published Plan(s)
<p>Mid Wales Strategic Intent</p> <p>Link for further information: https://mwjc.nhs.wales/</p>	<ul style="list-style-type: none"> Strategic Intent and Work Programme published annually; with five overarching aims <ul style="list-style-type: none"> Aim 1: Health, Wellbeing and Prevention Aim 2: Care Closer to Home Aim 3: Rural Health and Care Workforce Aim 4: Hospital Based Care and Treatment Aim 5: Communications, Involvement and Engagement
<p>Priorities for 2023/2024</p> <p>Patterson, Liz 09/05/2023 14:27:59</p>	<p>Supporting these aims are a set of annually agreed priority areas. The Draft Priorities for 2023 / 2024 were developed taking into account current priorities, clinical priorities identified by the Clinical Advisory Group, themes and issues identified by the Mid Wales Social Care Group, Commissioning Group and Growing Mid Wales Partnership and feedback from the public:</p> <ul style="list-style-type: none"> - Urology (renewal programme) - Ophthalmology (regional capacity and pathways and leadership of MDT approach) - Cancer (Chemotherapy Day Unit at Bronglais, Radiotherapy and Chemotherapy pathways and access and handover improvements, palliative care including shared workforce approach) - Dental (Feasibility of integrated service for General Anaesthetic list, improvements to provision) - Clinical Strategy for Hospital Based Care and Treatment and Regional Solutions (implementation of Bronglais 10 Year Clinical Strategy including General surgery capacity and colorectal model) - Cross Border Workforce (new and enhanced roles, recruitment, retention and joint training across health and social care) <p>It was also agreed that Extra Care provision; Community Care; Residential Children's Accommodation and Innovative ways of working in Primary Care would be included in workplans of sub groups.</p>
<p>Rural Health and Care Wales</p>	<p>MWJC also established Rural Health and Care Wales, working in collaboration with Universities as a centre for excellence in rural health and social care.</p> <p>Link for further information: https://ruralhealthandcare.wales</p>

Mid and South West Wales



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HDUHB has a footprint spanning the three Local Authority areas of Ceredigion, Carmarthenshire and Pembrokeshire in Mid West and West Wales.

Strategy / Plan

Key Points – from review of recently published Plan(s)

Annual Plan 2023 / 24

HDUHB was escalated by the Welsh Government to Targeted Intervention for Planning and Finance in 2022/23 and this has set the starting point for the development of their plan.

HDUHB have confirmed they are not in a position to produce a balanced financial plan for 2023/2024 and have therefore submitted an Annual Plan.

This sets out Planning Objectives aligned to Ministerial Priorities and key programmes of work in line with Targeted Intervention expectations and opportunities framework.

HDUHB is developing a Clinical Services Plan to bridge operational challenges and plans for a new hospital network.

Domain	Goals	Planning Objectives
Our People <i>We have the people we need to achieve our purpose and strategy</i>	Goal 1: Grow and Train our Workforce <i>We have the right people we need, with the right skills and knowledge</i>	1a - Recruitment plan
	Goal 2: Support and Retain our Workforce <i>Our people feel motivated and supported</i>	1b - Career progression 2a - Staff health and wellbeing 2b - Employer of choice 2c - Workforce and OD strategy
Our Patients <i>Our patients receive the highest quality care</i>	Goal 3: Safe and high quality care <i>Our services are safe and deliver good outcomes</i>	3a - Transforming Urgent and Emergency Care programme 3b - Healthcare Acquired Infection Delivery Plan
	Goal 4: Accessible and kind care <i>Patients have timely access to services and positive experiences</i>	4a - Planned Care and Cancer Recovery 4b - Regional Diagnostics Plan 4c - Mental Health Recovery Plan
Our Future <i>Building a better health care system for future generations</i>	Goal 5: World class infrastructure <i>We are building the infrastructure needed to provide high quality care</i>	5a - Estates Strategies 5b - Research and innovation 5c - Digital Strategy
	Goal 6: Sustainable services <i>Designing and implementing more sustainable services</i>	6a - Clinical services plan 6b - Pathways and Value Based Healthcare 6c - Continuous engagement
Our Communities <i>Our population is healthy and we have a positive impact on the determinants of health</i>	Goal 7: Healthier communities <i>Our communities support good health</i>	7a - Population Health 7b - Integrated Localities 7c - Social model
	Goal 8: Positive impact beyond health <i>As an organisation we have a positive impact beyond health</i>	8a - Decarbonisation & Sustainability 8b - Local Economic and Social Impact 8c - Financial Roadmap 8d - Welsh Language and Culture
Ministerial priorities		Local priorities

This continues to be framed by the longer term strategy 'A Healthier Mid and West Wales' with a future service model designed around a new Urgent and Planned Care Hospital and hub for specialist children and adult services, supported by a network of hospitals and community hubs provided locality based care. This will involve changes to existing Community Hospitals (Prince Phillip Hospital in Llanelli; Glangwili Hospital in Carmarthen; Withybush Hospital in Haverfordwest). There are impacts for those communities in Powys accessing care at these sites. Bronglais Hospital in Aberystwyth continues as a District General Hospital however there are consequential impacts of the longer term strategy in relation to onward referral pathways which would be routed to the new Urgent and Planned Care Hospital following treatment at Bronglais.

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Swansea Bay University Health Board



Swansea Bay University Health Board was created on 1 April 2019 after responsibility for healthcare in the Bridgend County Borough Council area passed to the new Cwm Taf Morgannwg University Health Board; it spans the Local Authority areas of Swansea and Neath Port Talbot.

Strategy / Plan

Recovery and Sustainability Plan 2023/24 – 2025/26

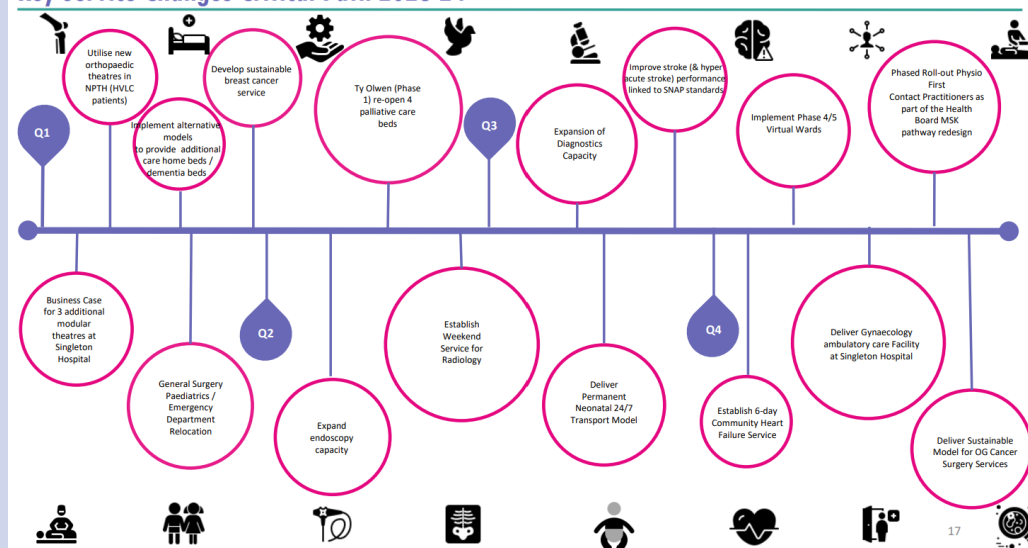
Key Points – from review of recently published Plan(s)

SBUHB have submitted a Recovery and Sustainability Plan, following the approach taken in 2022/2023

This is shaped by an ambition for 'Improving the health and healthcare of our patients and communities' with an integrated and partnership approach.

The plan follows on from significant transformation work already undertaken including centralisation of acute medicine at Morriston Hospital, with next steps to include centralization of elective orthopaedic surgery and rehabilitation at Neath Port Talbot Hospital and the development of the South West Wales Cancer Centre (SWWCC) in Singleton Hospital.

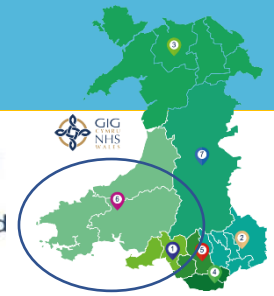
Key Service Changes Critical Path 2023-24



SBUHB have set out an ambition to become a population health focused organisation, with the implementation of a **Population Health Strategy** to improve the overall health and wellbeing of the local population whilst reducing the gap between the least and most deprived communities. It focuses on prevention and tackling the 'causes of the causes' of ill-health, providing an overview of the current context and challenges of the population and society in Swansea Bay.

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South West Wales Cancer Centre



- South West Wales Cancer Centre (SWWCC) based in Singleton Hospital, Swansea provides non surgical oncology services (cancer treatment) predominantly for the population of Swansea Bay University Health Board (SBUHB) and Hywel Dda University Health Board (HDUHB).
- SWWCC serves nearly one-third of the population of Wales. Due to historic flow of patients, some tumour sites for the Bridgend population, including Gynaecology continue to flow into the SWWCC for treatment rather than into the Velindre Centre.
- The SWWCC serves a small catchment area on the South West Powys border, due to geographical location.

Programme	Key Points
South West Wales Cancer Centre (SWWCC) Regional Strategic Programme	<p>To develop and agree the SWWCC Strategic Programme Case (SPC), to confirm the strategic vision and direction of travel for regional non-surgical oncology services over the next 10 year period (23/24 – 33/34)</p> <p>A regional programme looking specifically at improving cancer services for the benefit of patients across South West Wales</p> <p>The strategic objectives are:</p> <ul style="list-style-type: none"> ✓ To provide a fit for purpose SWWCC service for the South West Wales population ✓ To improve the quality of the SWWCC and local cancer services ✓ To increase the capacity of cancer services to meet local demands and improve access and outcomes ✓ To improve the economy of the SWWCC and local cancer services ✓ To improve the efficiency of the SWWCC and local cancer services ✓ To improve the effectiveness of the SWWCC and local cancer services <p>Deliver a Transformational Programme Business Case (PBC) to support the delivery of regional cancer services in South West Wales, including Radiotherapy, and Oncology-Specific Outpatients.</p>

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ARCH Programme



ARCH is a regional collaboration for health between three strategic partners; Swansea Bay University Health Board, Hywel Dda University Health Board and Swansea University. It spans the local authority areas of Ceredigion, Pembrokeshire, Carmarthenshire, Neath Port Talbot and Swansea.

Programme	Key Points
ARCH	<p>Service Transformation</p> <ul style="list-style-type: none"> Regional Pathology and Genomics Centre of Excellence Project Regional Eye Care Services Regional Dermatology Services South West Wales Cancer Centre (SWWCC) - see next page for further detail Neurological Conditions Regional Services Cardiology Regional Services Stroke Regional Services <p>Service Transformation – Pipeline Develop regionally agreed approaches including scope, programme delivery and governance, regional service models, resourcing and management for:</p> <ul style="list-style-type: none"> Oral & Maxillofacial Surgery Radiology Services Orthopaedics Endoscopy Children's Services <p>Other Regional Projects/Programmes Sexual Assault Recovery Centre (SARC): Established a regional programme to work with the National Programme to deliver the agreed national workforce and service model, establish a Regional Children's Hub, and ISO accredited services for Adults. Transforming Access to Medicines (TRAMS):</p>



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GIG
CYMRU
NHS
WALES

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

South / South East Wales




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Cwm Taf Morgannwg University Health Board

Cwm Taf Morgannwg University Health Board was created on 1 April 2019, expanding the responsibility of the former organisation with responsibility for healthcare in the Bridgend area; it also spans the Merthyr Tydfil and Rhondda Cynon Taf local authority areas.



Strategy / Plan	Key Points – from review of recently published Plan(s)
<p>Three Year Plan 2023 – 2026</p> <p>Patterson, Liz 09/05/2023 14:27:59</p>	<p>CTMUHB have submitted a Three Year Plan which sets out the context, drivers, major projects which will deliver transformation and the implementation of the Clinical Services Strategy 'CTM 2030 Our Health Our Future'. Three major projects are noted:</p> <ul style="list-style-type: none"> - Regional Diagnostic and Treatment Centre for South East Wales adjacent to Royal Glamorgan Hospital - Redevelopment of Maesteg Community Hospital as an Integrated Health and Care Hub in the Llynfi Valley - Acute site utilisation – review to be carried out Spring 2023, <u>roadmap</u> to follow; the review and mapping will enable a more detailed assessment of any changes relevant to Powys residents <p>CTM 2030 is continuing to be developed and implemented and four strategic goals have been identified which will be met through a 'life course' approach:</p> 

Aneurin Bevan University Health Board



ABUHB in South East Wales covers the local authority areas of Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen and also provides some healthcare services for residents in South Powys.

Strategy / Plan	Key Points – from review of recently published Plan(s)
Three Year Plan 2023 - 2026	<p><i>*Full plan not published at time of producing this report therefore this summary is based on Draft information</i></p> <p>ABUHB have confirmed that they are unable to submit a financially balanced plan for 2023 – 2026 but have developed and submitted a three year plan. The plan has three core themes of quality, efficiency and workforce.</p> <p>It builds on the plan submitted last year particularly the life course approach and role as a population health organisation. ABUHB is now a 'Marmot region' and this is reflected in the plan.</p> <p>The priority areas have been refreshed and encompass planned care, urgent care and the development of the place based care model. This includes the work on neighbourhood care networks (linked with Accelerated Cluster Development).</p> <p>There is a future focus with the continuation of work on decarbonisation and the Clinical Services model for sites beyond the Grange Hospital development.</p> <p>ABUHB noted challenges in terms of delivery against Ministerial Priorities and sets out the difficulties and expected trajectories on waiting lists and work that will focus on the longest waiting patients which will continue. There is a focus on the single cancer pathway in relation to the utilisation of organisational capacity.</p>

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CVUHB in South Wales covers the Local Authority areas of Cardiff and the Vale of Glamorgan; both areas also come together in the Cardiff and Vale Integrated Health and Social Care Partnership (RPH) footprint.

Strategy / Plan	Key Points – from review of recently published Plan(s)
<p>Annual Plan 2023 - 24</p> <p>Patterson, Liz 09/05/2023 14:27:59</p>	<p>CVUHB have produced an Annual Plan 2023 – 24 and confirmed that as for the previous year, they are unable to deliver a financially balanced plan. CVUHB have therefore submitted a one year plan with key priorities alongside an ambitious cost improvement programme with a trajectory to financial balance over the medium term.</p> <p>It has three components, being:</p> <ol style="list-style-type: none"> 1) the context including the population, strategy and partnership – this encompasses the regional partnerships and cluster planning; key planning assumptions and strategic commissioning intentions are set out in this section 2) The delivery framework, operational model and approach to leadership, culture, knowledge and learning with a whole systems perspective and delivering value 3) Priorities which encompass Urgent and Emergency Care; Planned Care, Cancer and Diagnostics; Specialist Services; Children and Women; Mental Health and Regional Priorities <p>The key components of the Financial Recovery plan are also set out as are the key considerations and areas of focus for delivering quality.</p> <p>This continues to be set in the context of their long term strategy 'Shaping our Future Wellbeing'. Developed prior to the pandemic, this set out goals for population health and wellbeing.</p>

All Wales

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Welsh Health Specialised Services Committee (WHSSC)

WHSSC is responsible for the joint planning of Specialised and Tertiary Services on behalf of Local Health Boards in Wales.

Strategy/ Plan	Key Points – from review of recently published Plan(s)
Integrated Commissioning Plan (ICP) 2023/4	<p>The Welsh Health Specialised Services Committee (WHSSC) Integrated Commissioning Plan for 2023/4 seeks to maximise value from core resources; ensure decision-making is on a risk assessed basis; considerations of equality and equity are central; repatriation of services maximises value for patients and wherever possible is delivered within the existing resource envelope.</p> <p>Collectively, WHSSC seeks to maintain the renewed focus on performance management and value for money from contracts; ensuring in-year work on value, cost-avoidance and demand management across whole pathways; and to assess previous investments and bring forward recommissioning choices in-year.</p> <p>In relation to rare diseases, Wales is part of UK wide work to design a UK Rare Diseases Framework and a Rare Disease Action Plan (2022-2026) has also been developed by Welsh Government setting out the actions required by health boards and all-Wales bodies.</p> <p>The health board participates in collective action via Welsh Health Specialised Services Committee (WHSSC) to improve value. It will work with the Welsh Health Specialised Services Committee to improve value through a focus on improved outcomes, experience and cost. This includes equitable access and reducing unwarranted variation for the Powys population; reviewing Parenteral Nutrition pathways; Improving Welsh Child and Adolescent Mental Health Services and medium secure services through better utilisation of out of area placements; reviewing specialised psychology services; reviewing efficiency including comparative cost and contracting mechanisms; evaluating investments from the last 3 years.</p>
10-year Strategy	<p>Engagement process to develop 10 year strategy concluded in December 2022. The strategy will be developed in readiness for May 2023 to inform the WHSSC Integrated Commissioning Plan and Health Board's Integrated Medium Term Plans (IMTPs) for 2024 and beyond. More information is available from https://pthb.nhs.wales/whssc-strategy.</p>

Emergency Ambulance Services Committee (EASC) and National Collaborative Commissioning Unit (NCCU)

Strategy/ Plan	Key Points – from review of recently published Plan(s)
<p>EASC Integrated Medium Term Plan 2023 / 26</p> <p>https://easc.nhs.wales</p>	<p>EASC have submitted an IMTP which is described as an an iterative development of the existing plan, which recognises the significant challenges that NHS Wales has faced over the previous 12 months and as such takes a pragmatic approach to breadth and scale of change and delivery that can take place over the timeline of this plan.</p> <p>The plan covers 3 broad areas:</p> <ol style="list-style-type: none"> 1. Commissioning approach and work plan 2. Priorities for commissioned services including performance, commissioning intentions and strategic intent 3. Wider system requirements and expectations. <p>The Commissioning priorities for 2023/6 are:</p> <ul style="list-style-type: none"> - Quality and Safety - Performance Improvement - Performance Enablers - Financial sustainability and efficiency - Commissioning intentions for commissioned services (2023/24) - Informatics and Ambulance - Quality Indicators with an increased focus on outcome measures - Maximising the impact of Six Goals for Urgent and Emergency Care Programme outputs - Transfer, Repatriation and Discharge Services - NHS 111 Wales - EASC's role as an integral part of national commissioning - Value based approaches to commissioned services <p>NB this information is based on the Draft Plan available at the time of producing this report, EASC noted that some refinement may be made post March 2023 as confirmation of investment and priorities was still awaited</p>
<p>EMRTS / Air Ambulance Service</p>	<p>The Wales Air Ambulance Charitable Trust announced on February 22, 2023 its new aviation partner as Gama Aviation Plc that successfully bid for the seven-year contract to provide aviation services to the air ambulance in Wales, starting on January 01, 2024. The Charity also confirmed that it is extending its contracts with Caernarfon Airport and Welshpool Airport, where two of its operations are currently based, until 2026.</p> <p>This announcement by the Charity to begin the new aviation contract whilst continuing with the four bases means that the EMRTS Service Review engagement can conclude whilst the Charity and EMRTS continues to provide services on the current basis.</p>

Welsh Ambulance Services Trust (WAST)

Strategy/ Plan	Key Points – from review of recently published Plan(s)
IMTP 2023 – 2026	<p>WAST have submitted an Integrated Medium Term Plan (IMTP) for a three year period, set in the context of the NHS Wales Planning Framework and the EASC Commissioning Intentions for 2023/24.</p> <p>It continues to be framed by WAST's long term strategy 'Delivering Excellence' published in 2019 which sets strategic objectives for the period up to 2030 and describes the ambition, enablers and fundamentals which continue to shape the WAST IMTP.</p> <p>There are three priorities set out:</p> <ul style="list-style-type: none"> - A focus on improving outcomes and experience for our patients and reducing harm, by providing the right advice and care, in the right place, every time - A focus on improving our people's workplace experience, enabling them to be the best they can be - A focus on delivering a balanced and transformational plan, by delivering exceptional value <p>Key service areas set out in the plan:</p> <ul style="list-style-type: none"> - NHS Wales 111 including digital first vision and platforms, extension to urgent dental care, strengthened leadership and career pathways, remote clinical assessment capacity in the wider healthcare community - Working with health boards on Same Day Emergency Care, pathways for fallers, chest pain, breathing problems and those with mental health needs - EMS Operational and Clinical Transformation to balance urban and rural areas and performance whilst continuing to 'invert the triangle' with specific actions on red performance, use of data to stratify responses, maximising the Clinical Support Desk, consult and close rates and case management through a new Amber Virtual Ward, alternatives to conveyance, Advanced Paramedic roles etc - Ambulance Care encompassing re-rostering in Non Emergency Patient Transport, the move of Urgent Care Service to Ambulance Care, transfer and discharge services - The case for further change through formal engagement, demand and capacity review and independent scrutiny of evidence - 'Our People' application of Kings Fund 3Cs framework – culture, capability and capacity - Financial Plan – WAST are submitting a balanced revenue position

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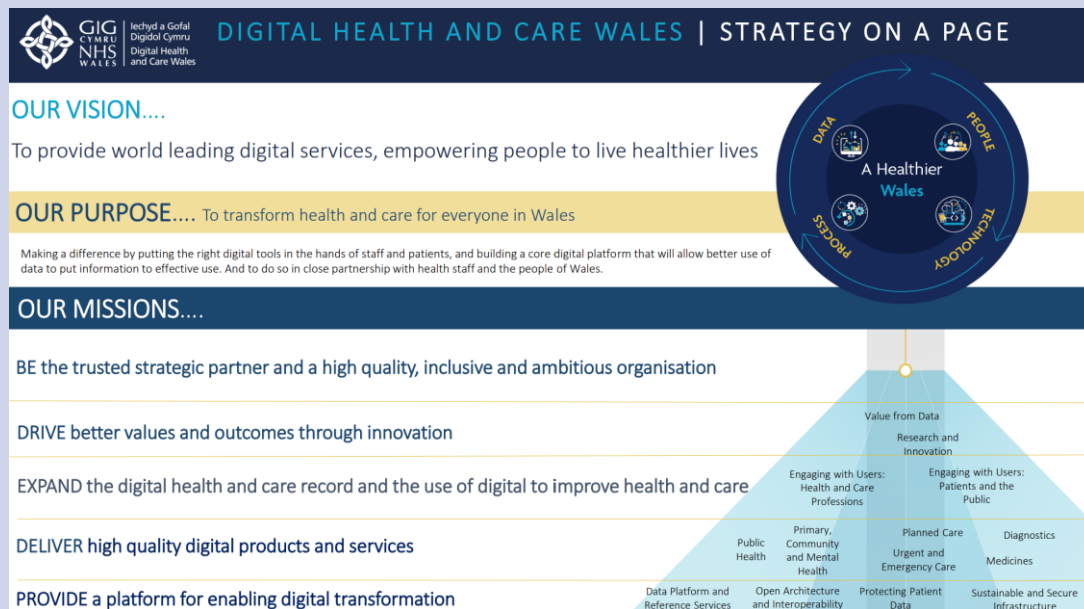
Digital Health and Care Wales (DHCW)

Strategy/ Plan

IMTP 2023 – 26

Key Points – from review of recently published Plan(s)

DHCW have confirmed that they are unable to submit a financially balanced plan. They have submitted an Integrated Medium Term Plan 2023 – 26. This sets out Five Missions each with a set of Digital Deliverables and Outcomes.



The plan also highlights that DHCW runs over 100 live services and integrates with many more. They deliver major national digital transformation programmes, some of which will reach significant milestones in this period:

- Digital Services for Patients and the Public: NHS Wales App and Website
- National Data Resource: transition to live cloud platform and national API management platform
- Digital Medicines: proof of concept for primary care transfer to community pharmacies; electronic prescribing; shared medicines record and NHS Wales App/website
- Diagnostics systems for radiology and laboratory information management

Roadmaps are also provided in the IMTP for key national services:

- New National Critical Care system
- Welsh Patient Administration System: expanding the digital health and care record, particularly through the Welsh Clinical Portal and Welsh Nursing Care Record

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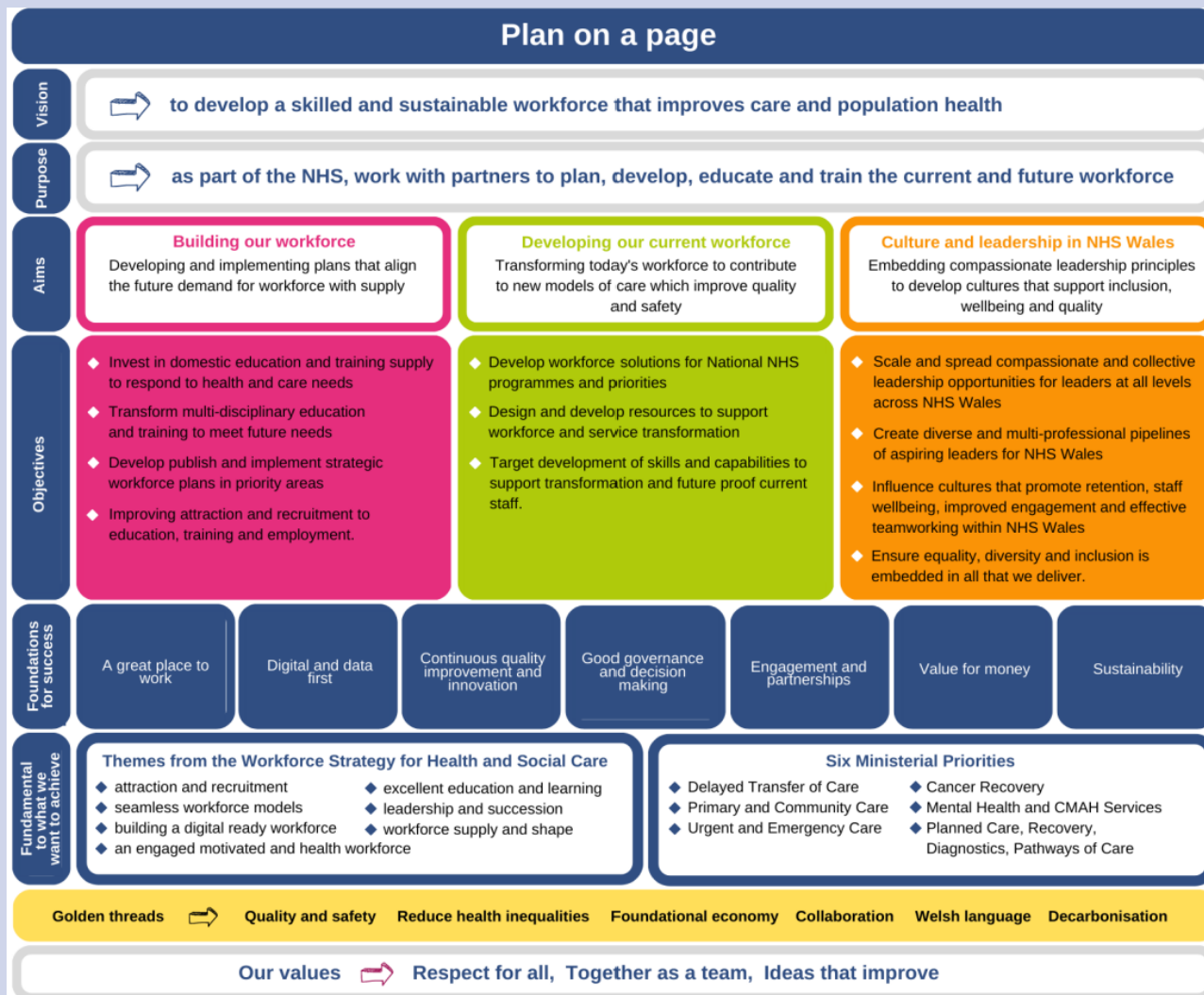
Health Education and Improvement Wales (HEIW)

Strategy/ Plan

IMTP 2023 - 26

Key Points – from review of recently published Plan(s)

HEIW have published a three year Integrated Medium Term Plan. The plan builds on the previous year with newly identified and simplified strategic aims. A number of strategic objectives relate to the National Workforce Implementation Plan launched by Welsh Government and the Education and Training Plan approved in January 2023.



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Public Health Wales

Strategy/ Plan	Key Points – from review of recently published Plan(s)
Strategic Plan 2023 - 26	<p>PHW have published a Strategic Plan 2023 – 2026, this sets out the following Strategic Priorities:</p> <div><div>❖ Influencing the wider determinants of health</div><div>❖ Promoting mental and social well-being</div><div>❖ Promoting healthy behaviours</div><div>❖ Supporting the development of a sustainable health and care system focused on prevention and early intervention</div><div>❖ Delivering excellent public health services to protect the public and maximise population health outcomes</div><div>❖ Tackling the public health effects of climate change</div></div> <p>For each of these, the plan sets out the scope, outcomes and strategic objectives. It includes a range of change activity that across each strategic priority and enablers, particularly in year 1.</p> <p>PHW note that their change agenda will be kept under ongoing review to ensure that it delivers the intended benefits and remains achievable in light of in-year changes, recognising that they are operating in a volatile and changing environment and will therefore demonstrate an ability to dynamically respond to new and emerging threats and opportunities.</p> <p>PHW note that they will deliver four statutory functions and core public health services as part of the delivery of this plan, including discharge our responsibilities as a category 1 responder.</p> <p>This includes the delivery of our national screening programmes, infection service, health protection, data, knowledge and research. A number of strategic developments and improvements in relation to these service and functions are set out within the plan.</p> <p>PHW also note that during 2023/24, Improvement Cymru will be working closely with the newly established NHS Executive in advance of transferring by no later than April 2024. As a result, the strategic objectives that relate to Improvement Cymru included will be subject to ongoing review and are likely to change into year 2.</p>

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NHS Wales Shared Services Partnership

Strategy/ Plan

IMTP 2023 - 26

Key Points – from review of recently published Plan(s)

NWSSP agreed its Provisional IMTP at its January Board meeting and at that point were intending to submit a financially balanced plan (no subsequent changes known at time of producing this report so that is the latest position known). NWSSP have set out a smaller number of key organisational priorities and a Strategy Map as shown below.

Key Priorities for 2023-24



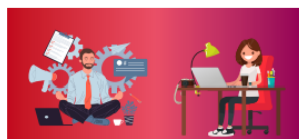
1. Good financial governance - We are committed to a balanced budget, compliance with our breakeven duty and a targeted re-investment plan for those NWSSP services that directly support NHS recovery and Ministerial Priorities.



2. Decarbonisation and Climate Change - We will provide whole system leadership to the NHS in Wales through the provision of expert guidance to others in delivering their local Decarbonisation Action Plans and support to the national Health and Social Care Climate Emergency Programme.



3. Implementation of our new Digital Strategy - With digital as a critical enabler, we will drive innovation, adopt new technologies and ensure secure ways of working that enhance the digital workplace for our staff. We will be more data driven, automate more and improve system performance and reliability, in partnership with Digital Health and Care Wales.

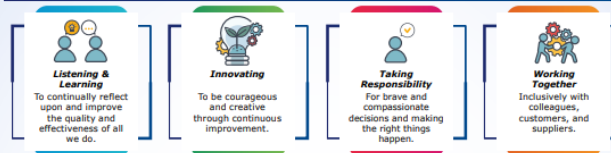


4. Employee Wellbeing - We will continue to provide support to all our staff to support their physical, mental, and financial wellbeing. We will continue to adopt a strong partnership approach with our Trades Unions as we navigate future change, to ensure the voices of our staff are heard and acted upon.

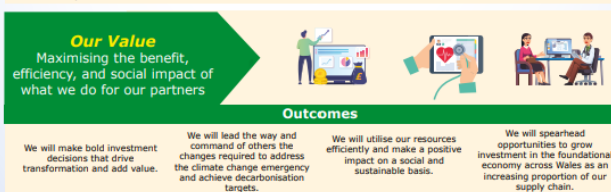
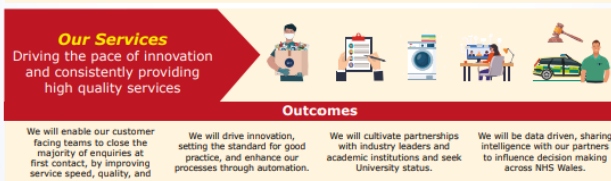
We are determined to optimise opportunities to further improve our standards of quality, and ensure consistency, across the full range of services we provide. Delivery of our plan will be challenging, with continued uncertainty around the wider economic environment and the ensuing level of risk to the assumptions in our financial plan particularly. However, we feel there remains sufficient stretch in our plan to deliver innovation and excellence in the services we provide.

NWSSP Strategy Map Delivering Value, Innovation & Excellence through Partnership

Our Values



Our Strategic Objectives



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NHS Executive (from 1st April 2023)

Strategy	Key Points
<p>The NHS Wales Executive is a new, national support function, operational from 1 April, 2023.</p> <p>Key purpose is to:</p> <ul style="list-style-type: none">• Drive improvements in the quality and safety of care - resulting in better and more equitable outcomes, access and patient experience, reduced variation, and improvements in population health.• The NHS Executive will provide strong leadership and strategic direction – enabling, supporting and directing NHS Wales to transform clinical services in line with national priorities and standards. <p>This will be achieved by:</p> <ul style="list-style-type: none">• Strengthening national leadership and support for quality improvement• Providing more central direction to ensure a consistent and equitable approach to national and regional planning based on outcomes• Enabling stronger performance management arrangements, including capacity to challenge and support organisations that are not operating as expected. <p>The NHS Executive is a hybrid function bringing together Delivery Unit, Finance Delivery Unit, Improvement Cymru and Health Collaborative. Improvement Cymru will retain their name and brand for now. From 1 April 2023, the Improvement Cymru brand will be used alongside the NHS Wales Executive brand where relevant.</p>	
Programmes	<p>Five National Clinical Networks: Mental Health, Maternity and Neonatal, Cardiac, Cancer, Critical Care.</p> <p>There are a range of Implementation Groups and Network Boards established:</p> <ul style="list-style-type: none">• Diabetes Implementation Group• End of Life Care Implementation Board• Liver Diseases Implementation Group• Neurological Conditions Implementation Group• Rare Diseases Implementation Group• Respiratory Health Implementation Group• Stroke Implementation Group• Women's Health Implementation Group <p>Current Programmes: Endoscopy; Pathology; Laboratory Information Network Cymru (LINC); Imaging; Radiology Informatics Systems Procurement; Sexual Assault Service Programme; Irritable Bowel Disease (IBD), Stroke Programme, Neonatal transport.</p> <p>Link for further information: Home - NHS Wales Executive</p>

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England

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England

- Major changes have come into effect in health and care legislation, infrastructure and delivery mechanisms this year.

Legislation / Strategy	Key Points
Health and Care Act 2022 Integrated Care Systems	<ul style="list-style-type: none"> The Health and Care Act 2022 was passed in July 2022, this established Integrated Care Systems (ICS) on a statutory footing in England, replacing the previous Clinical Commissioning Groups (CCGs). Each Integrated Care System has two statutory elements, an Integrated Care Partnership (ICP) and Integrated Care Board (ICB). <ul style="list-style-type: none"> Integrated Care Partnership (ICP) - a statutory committee jointly formed between the NHS Integrated Care Board and all upper-tier local authorities that fall within the ICS area. The ICP brings together partners concerned with improving the care, health and wellbeing of the population, with membership determined locally. It is responsible for producing an integrated care strategy on how to meet the health and wellbeing needs of the population in the ICS area. Integrated Care Board (ICB) - a statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in the ICS area.
NHS England/ Improvement	<ul style="list-style-type: none"> NHS England and NHS Improvement came together to work as a single organisation in April 2019 The NHS Long Term Plan (England) was published in 2019 – this remains the key planning document and spans ten years up to 2029 – it proposes an increased focus on population health, prevention, care quality and outcomes and a new service model comprising <ul style="list-style-type: none"> Transformed out of hospital care and integrated community based care Reducing pressure on emergency hospital services Giving people more control over their own health and personal care Digitally enabling primary care and outpatient care Better outcomes for major health conditions The NHS People Plan was published in July 2020 with Our People Promise, organised around four pillars: <ul style="list-style-type: none"> looking after our people – with quality health and wellbeing support for everyone belonging in the NHS – with a particular focus on tackling the discrimination that some staff face new ways of working and delivering care – making effective use of the full range of our people's skills and experience growing for the future – how we recruit and keep our people, and welcome back colleagues who want to return.

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Shropshire, Telford and Wrekin

NHS Shropshire, Telford and Wrekin was created on 1 July 2022, replacing NHS Shropshire, Telford and Wrekin Clinical Commissioning Group (CCG), as part of Shropshire Telford and Wrekin Integrated Care System.



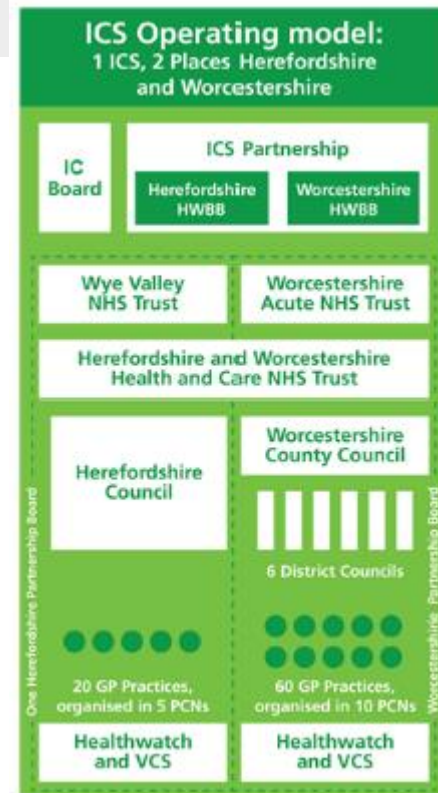
Strategy	Key Points
Integrated Care System	<p>Shropshire, Telford and Wrekin ICS includes the following healthcare providers:</p> <ul style="list-style-type: none"> • <u>The Shrewsbury and Telford Hospital NHS Trust</u> • <u>The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust</u> • <u>Shropshire Community Health NHS Trust</u> • <u>Midlands Partnership NHS Foundation Trust</u> • <u>West Midlands Ambulance Service Foundation Trust</u> <p><u>NHS Shropshire, Telford and Wrekin</u> is the commissioning body within the ICS. It came into being as a statutory body on 1 July 2022, and took on the duties and responsibilities of the former NHS Shropshire, Telford and Wrekin Clinical Commissioning Group.</p> <p>There are two local authorities within the ICS; <u>Shropshire Council</u>, and <u>Telford & Wrekin Council</u>.</p>
Programme	Key Points
Hospital Transformation Programme (HTP)	<ul style="list-style-type: none"> • During 2023/4 SaTH will be taking its detailed plans through the national assurance process, with NHS England and HM Treasury. • Submission of the Outline Business Case is targeted as being in Summer 2023 and if approved, full and final business case will be submitted in Autumn 2023. • These include the commitments made during the 2018 consultation to include financial plans, architect designs and clinical strategy. • Building works to then proceed with an aim to be ready by late 2026.
Cardiology change - Telford	<ul style="list-style-type: none"> • On-going temporary change until the completion of the HTP • Co-located Cardiology service provision adjacent to current Cardiology Ward at PRH.

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Herefordshire and Worcestershire

Herefordshire and Worcestershire Integrated Care System was created on 1 July 2022

Strategy	Key Points
Integrated Care System	<p>Herefordshire and Worcestershire Integrated Care system was formally designated in April 2021 and Clinical Commissioning Groups functions have transferred to a statutory Integrated Care Board (ICB).</p> <p>In addition, the Herefordshire and Worcestershire Integrated Care Partnership (HW ICP) was established as a statutory committee, between Herefordshire Council, Worcestershire County Council and NHS Herefordshire and Worcestershire ICB. The ICP will formulate an Integrated Care Strategy.</p> <p>Existing provider organisations are continuing whilst the place based operating model is refined.</p>
Programme	Key Points
Integrated Care Board Programme	<p>System level priorities are noted in the visual on the right hand side. Programmes of work initiated by the former 'STP' are also being resumed (including the Stroke programme noted below). Immediate operational priorities centre on elective care waits; diagnostic services and centres, urgent care and handovers, mental health investment, primary care, health and care workforce, financial sustainability.</p>
Stroke Programme	<p>Herefordshire and Worcestershire Stroke Programme has carried out a period of stakeholder engagement in 2022 and is now undertaking further detailed work on the service models and options. Evaluations are due to be considered at the April meeting. Next steps include the development of clinical pathways (Acute and Rehabilitation), demand and capacity modelling, workforce requirements and financial assessment. The Programme Board are aiming to complete this stage of work by August 2023.</p>
Haematology	<p>Service changes in response to fragility in provision at WVT – regional partnership approach being taken to ensure alternative pathways in place</p>



ICS priority work programmes @ system level
Includes

- Reset and recovery
- Development of PHM
- Health and Care Inequalities
- Digital strategy
- Capital/Estates
- UEC, Cancer, MH etc

NHS Service Change Engagement and Consultation Update

Last updated 19 April 2023

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Update on Llais and changing arrangements for NHS Service Change

On 1 June 2020, The Health and Social Care (Quality and Engagement) (Wales) Act became law, with the main measures within the act coming into force from April 2023. This includes strengthening the voice of citizens, by replacing Community Health Councils with a new all-Wales Citizen Voice Body (known as Llais) that will represent the interests of people across health and social care.

Llais has been established from April 2023, replacing Powys Community Health Council as well as other CHCs across Wales. More information is available from www.llaiswales.org.

During 2022/23, [formal consultation took place by Welsh Government](#) on key working arrangements for the new body including: Representations; Visits; and, NHS Service Change. PTHB has responded to these consultations, with our response referencing the specific opportunities and challenges for a commissioning health board with vital pathway relationships within both Wales and England.

Representations

[Statutory guidance on representations](#) has now been published. This guidance expects that the NHS and local authorities should:

- have a clear system for dealing with representations, which is proportionate to the issues
- keep Llais aware of progress in dealing with representations
- ensure that Llais learns of the outcome of its representations

The resultant procedures should support determinations on whether or not representations need to be shared with relevant committees. Given that it is anticipated within the guidance that representations may cover issues such as strategic plans, service change and commissioned services there is expected to be a key role for the Planning, Partnerships and Population Health Committee, as well as for other committees such as Patient Experience, Quality and Safety Committee. Work is now under way to develop our Llais Representations procedure.

Visits

Statutory guidance on visits is expected by June 2023. A further update will be provided when more information is available.

NHS Service Change

The extant guidance for engagement and consultation on changes to health services is being updated to reflect the changing statutory framework. The health board's standard operating procedures for engagement and consultation on service change will be updated to reflect this new guidance when available. The Planning, Partnerships and Population Health Committee will have a key role given its responsibilities in relation to assurance of the health board's arrangements for engagement and consultation in respect of service change (ToR 3.1c). An update on the publication of national guidance and the development of local procedures will be brought to a future meeting of the Committee.

Engagement and Consultation Exception and Highlight Reports

Engagement under way:

- EMRTS / Welsh Air Ambulance

Consultation under way:

- Powys Well-being Plan
- Hywel Dda University Health Board new hospital location

Engagement planned or under consideration

- PTHB Accelerated Sustainable Model

Consultation planned or under consideration

- Hywel Dda University Health Board interim configuration of paediatric services

Period of engagement or consultation has ended and next steps awaited:

- Gilwern Branch Surgery
- South Wales Specialist Auditory Hearing Implant Services
- Herefordshire and Worcestershire Stroke Services

Current Status	<ul style="list-style-type: none"> • UNDER WAY: A 12-week period of formal consultation on the draft Well-being Plan is under way until 19 April 2023
Lead Body	<ul style="list-style-type: none"> • Powys PSB
Overview	<ul style="list-style-type: none"> • The Well-being of Future Generations Act requires a period of formal consultation on the draft Well-being Plan for a minimum period of 12 weeks. • Initial engagement towards the development of the draft plan has been an iterative process including the development of the Well-being Assessment and a structured period of engagement from 27 October 2022 to 13 November 2022 at https://www.haveyoursaypowys.wales/big-ideas and https://www.dweudeichdweudpowys.cymru/syniadau-mawr • Formal engagement on the draft plan is now under way
Impact and interdependency	<ul style="list-style-type: none"> • Inter-relationships with development of budget and corporate plan (PCC) and annual plan / IMTP (PTHB)
Key Dates	<ul style="list-style-type: none"> • Engagement on the draft Well-being Plan is under way until 19 April 2023 • Feedback will be reviewed and contribute to the final plan which must be approved by the PSB and member organisations by May 2023
Key Materials	<ul style="list-style-type: none"> • Website: www.haveyoursaypowys.wales/powys-well-being-plan-survey and www.dweudeichdweudpowys.cymru/arolwg-cynllun-llesiant-powys
Engagement Planning	<ul style="list-style-type: none"> • PTHB, PCC and PAVO worked together to develop the initial engagement on behalf of the RPB and PSB. The statutory consultation on the draft well-being plan is now under way.
Llais Liaison	<ul style="list-style-type: none"> • Email updates on engagement planning have been shared with the CHC Chief Officer. • Update on engagement included in presentations to R&B Committee on 3 November and Montgomeryshire Committee on 10 November. • Information about statutory consultation was shared with Chief Officer and Deputy Chief Officer on 11 January and update to Service Planning Committee on 17 January 2023. • Regular touchpoints with Llais regional director provide an opportunity for ongoing liaison

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Current Status	<ul style="list-style-type: none"> Under way: Formal engagement is currently under way with end date to be confirmed
Lead Body	<ul style="list-style-type: none"> EASC with EMRTS and Welsh Air Ambulance Charity
Overview	<ul style="list-style-type: none"> Media coverage on 17 August indicated that the Welsh Air Ambulance Charity and the NHS Emergency Medical Retrieval and Transfer Service (EMRTS) were reviewing their operational delivery model. Based on media reports, options include the closure of the Welsh Air Ambulance bases in Welshpool and Caernarfon, with relocation to a new base in North Wales. EASC is now leading a service development process which includes a two-phase engagement process which is currently under way. The first phase will: Describe how EMRTS works now; Discuss what must be in place and what are the must haves (constraints); Discuss how we measure the benefits and risks of each option (investment objectives); Discuss how the process reflects that some benefits are most important than others (weightings). The second phase later this spring will present options for the future shape of services, including their benefits and risks, and seek views.
Impact and interdependency	<ul style="list-style-type: none"> These proposals potentially affect all residents of Wales including all residents of Powys. A deeper understanding of potential impact is expected once updated modelling and analysis has been undertaken. There are interdependencies with public experience and perception of the wider emergency care system including emergency ambulance services, emergency department services etc.
Key Dates	<ul style="list-style-type: none"> Engagement is now under way with the first meetings taking place on Tuesday 4 April in Newtown. Further public meetings in Powys include 13 April (Builth Wells), 18 April (Knighton), 26 April (Welshpool) and 23 May (Machynlleth) End date of this phase of engagement to be confirmed
Key Materials	<ul style="list-style-type: none"> Engagement information is available from the EASC website at EMRTS Service Review - Emergency Ambulance Services Committee (nhs.wales) Information is also available from the PTHB website at https://pthb.nhs.wales/air-ambulance
Engagement Planning	<ul style="list-style-type: none"> The latest information is available from https://pthb.nhs.wales/air-ambulance
Llais Liaison	<ul style="list-style-type: none"> An update was presented by the Chief Officer of EASC to the CHC Services Planning Committee on 20 September 2022. An update was included in the PTHB Update to CHC SPC on 22 November 2022, and a further update to SPC on 17 January 2023. Regular touchpoints with Llais regional director provide an opportunity for ongoing liaison

Current Status	<ul style="list-style-type: none"> • UNDER WAY: A period of formal consultation on the new hospital location is under way from 23 February to 19 May
Lead Body	<ul style="list-style-type: none"> • Hywel Dda University Health Board
Overview	<ul style="list-style-type: none"> • As part of the Healthier Mid and West Wales strategy, Hywel Dda University Health Board has agreed to develop a new Emergency and Planned Care hospital, bringing together many of the services currently provided at Glangwili Hospital in Carmarthen and Withybush Hospital in Haverfordwest. • Consultation on the location of the new hospital is under way.
Impact and interdependency	<ul style="list-style-type: none"> • Glangwili is the main acute hospital for some communities in mid-west Powys. Following this reconfiguration, these communities will be closer to alternatives (e.g. Morriston or Prince Charles). This consultation is an opportunity to continue to raise awareness of the forthcoming changes and to discuss the impacts and mitigation. • Glangwili also provides a level of step-up care for Bronglais Hospital patients which includes residents of North West Powys. This consultation is an opportunity to raise awareness of the ways in which onward pathways may change in future.
Key Dates	<ul style="list-style-type: none"> • Consultation under way from 23 February to 19 May • Public drop-ins on 21 April (Aberystwyth) and 9 May (Llandovery) have been promoted to residents of north west and mid west Powys, as well as wider digital opportunities for engagement and voice
Key Materials	<ul style="list-style-type: none"> • Consultation materials are available from the HDdUHB website at https://hduhb.nhs.wales/new-hospital-site • HDdUHB were contacted on 27 February to request clearer localised messages for communities affected in Powys. A localised message for Powys was received on 10 April and has been issued through our local channels to key stakeholders in mid west and north west Powys.
Engagement Planning	<ul style="list-style-type: none"> • PTHB Engagement and Communication team has undertaken targeted engagement and communication to inform key stakeholders in mid west and north west Powys of the consultation, raise awareness of the direct and indirect impact, and promote opportunities to get involved.
Llais Liaison	<ul style="list-style-type: none"> • Regular touchpoints with the Llais Regional Director have been used to share the current position and expected next steps.

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Current Status	<ul style="list-style-type: none">• UNDER CONSIDERATION: A period of engagement is expected later in 2023 to co-produce a future sustainable model for health and health services in Powys
Lead Body	<ul style="list-style-type: none">• PTHB
Overview	<ul style="list-style-type: none">• Initial work is under way on an Accelerated Sustainable Model for Powys including the development of a draft Discovery report. More detailed plans for public and stakeholder engagement will be developed for the Design phase of this work.
Impact and interdependency	<ul style="list-style-type: none">• This work potentially has impact across all service delivery and commissioning areas for all parts of Powys.
Key Dates	<ul style="list-style-type: none">• TBC
Key Materials	<ul style="list-style-type: none">• TBC
Engagement Planning	<ul style="list-style-type: none">• Engagement planning is under way through the health board's Transformation and Value Group.
Llais Liaison	<ul style="list-style-type: none">• Board to Board discussion in February 2023.• Regular liaison through touchpoints with CHC Chief Officer / Llais Regional Director.

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Current Status	<ul style="list-style-type: none">• PLANNED: A period of formal consultation on the interim configuration of paediatrics is expected to commence in Q2 following the current consultation on new hospital site location
Lead Body	<ul style="list-style-type: none">• Hywel Dda University Health Board
Overview	<ul style="list-style-type: none">• There have been temporary changes to paediatric services in Hywel Dda. A consultation is also planned to consider the interim configuration of these services until the new hospital is established.
Impact and interdependency	<ul style="list-style-type: none">• The interim changes to paediatric services are not expected to have a direct impact for Powys residents but are included here for awareness linked to the wider impact of the hospital reconfiguration plans.
Key Dates	<ul style="list-style-type: none">• Further information awaited
Key Materials	<ul style="list-style-type: none">• Further information awaited.
Engagement Planning	<ul style="list-style-type: none">• Targeted engagement will take place in those areas of Powys using services in Carmarthenshire and Ceredigion.
Llais Liaison	<ul style="list-style-type: none">• Highlight report to CHC Services Planning Committee on 22 November 2022• Further update will be provided once statutory consultation arrangements are confirmed.

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Current Status	<ul style="list-style-type: none"> • CLOSED: Formal engagement took place from 10 January 2023 to 6 March 2023.
Lead Body	<ul style="list-style-type: none"> • PTHB with Crickhowell Group Practice
Overview	<ul style="list-style-type: none"> • Crickhowell Group Practice has submitted an application to close their premises at Belmont Branch Surgery in Gilwern and consolidate their services at their premises in Crickhowell. • Powys Teaching Health Board considers such requests in accordance with its “Branch Surgery Closure Process”. • In accordance with this policy, a period of engagement took place from 10 January 2023 to 6 March 2023 to inform a decision by health board in response to the application.
Impact and interdependency	<ul style="list-style-type: none"> • 9300 patients are registered with Crickhowell Group Practice. Of these around 3100 live in the Aneurin Bevan Health Board area, which is where Belmont Branch Surgery is located. • These proposals directly affect residents of the Gilwern area in Monmouthshire for home the Gilwern Branch Surgery is their most local GP surgery branch. GP primary care services will continue to be available from War Memorial Health Centre in Crickhowell. • War Memorial Health Centre is 3.2 miles from Gilwern. The nearest alternative five GP practices are between 3.5 and 7 miles from Gilwern and are accepting new patients.
Key Dates	<ul style="list-style-type: none"> • Engagement plan discussed at Executive Committee on 14 December 2022. • A period of formal engagement took place from 10 January 2023 to 6 March 2023. • We expect the outcome of engagement to be presented to a Branch Practice Review Panel by the end of April, and to the Health Board during May
Key Materials	<ul style="list-style-type: none"> • Letter to household, FAQs, online and printed questionnaire, alternative formats (BSL, Easy Read, Audio), draft Equality Impact Assessment, engagement website at www.pthb.nhs.wales/gilwern and www.biap.gig.cymru/gilwern
Engagement Planning	<ul style="list-style-type: none"> • A detailed engagement plan was developed and delivered to raise awareness of the proposals and enable people to have their say.
Llais Liaison	<ul style="list-style-type: none"> • Powys CHC has been formally notified in line with the Branch Practice Review Process, with the CHC Chief Officer having observer status on the Branch Practice Review Panel. The application was discussed in Part B of the Services Planning Committee on 22 November. • An update was provided to SPC on 17 January and to R&B Local Committee on 26 January. • A mid-term review took place with Powys CHC and Aneurin Bevan CHC on 31 January. • A report on engagement has been developed and shared with Llais (Powys region and Gwent region). • Llais will be represented on the Branch Practice Review Panel when this meets later in the spring.

Current Status	<ul style="list-style-type: none"> • CLOSED: Formal engagement took place from 4 January 2023 to 14 February 2023
Lead Body	<ul style="list-style-type: none"> • WHSSC
Overview	<ul style="list-style-type: none"> • Urgent temporary arrangements have been in place for the provision of Cochlear Implant services from a single centre at CVUHB since 2019 when the service provided at the PoW, Bridgend became unavailable. A commitment was made to undertake engagement in line with NHS Wales guidance on the temporary change and future service model. • Cochlear Implant services in South Wales are currently only provided in Cardiff following this temporary change, but historically South Powys patients would have been referred to Cardiff or Princess of Wales depending on needs/pathway. • Bone Conduction Hearing Implant services are currently located at Royal Gwent, Cardiff and Neath Port Talbot. South Powys patients are normally referred to Cardiff or Neath Port Talbot. • Following a process of assessment and review, it is proposed that a single centre for Cochlear Implants and Bone Conduction Hearing Implants is established with an outreach support model. The intended benefits include a more reliable service that can maintain appropriate staffing and skills, offering a higher number of procedures which is associated with improved outcomes, and with a greater critical mass of patients there is greater scope for adoption of new technological advances to bring more treatment options for more people.
Impact and interdependency	<ul style="list-style-type: none"> • These proposals affect people in south Powys who access specialist auditory services in South Wales. If the preferred option is implemented then some patients would need to travel further for implant but could continue to receive outreach support closer to home in hub sites. • Between 2017 and 2021 there was an average 56 adult and 20 paediatric cochlear implant referrals in South Wales per year leading to 28 adult implants and 16 paediatric implants per year. Between 2017 and 2021 there was an average 42 adult and 2.5 paediatric BCI referrals in South Wales per year, leading to 17 adult implants and 0 paediatric implants per year. South Powys activity is typically less than 5 referrals per year. • Pathways for patients in north and mid Powys to BCNUB and England are not affected.
Key Dates	<ul style="list-style-type: none"> • Health Board Meetings took place on 28 and 29 September to consider the proposal to undertake engagement. • A period of formal engagement took place from 4 January 2023 to 14 February 2023. • We expect the outcome of engagement to be presented to Health Boards later in 2023.
Key Materials	<ul style="list-style-type: none"> • Materials included a core engagement document and questionnaire, summary document, easy read document and draft Equality Impact Assessment. These are available from our website at https://pthb.nhs.wales/cochlear
Engagement Planning	<ul style="list-style-type: none"> • A local engagement plan for Powys supported local delivery of the regional engagement led by WHSSC. This included publication of information on our website, intranet and social media channels and distribution to key stakeholders.
Llais Liaison	<ul style="list-style-type: none"> • There has been ongoing liaison with the CHC, with draft engagement materials discussed at Powys CHC Executive Committee on 13 September 2022. Engagement materials were shared with the CHC and highlighted at meetings of the Services Planning Committee and the Radnorshire & Brecknock Local Committee during the engagement period.

Herefordshire & Worcestershire Stroke Services

Current Status	<ul style="list-style-type: none"> CLOSED: Formal engagement took place from 20 September 2022 to 11 November 2022
Lead Body	<ul style="list-style-type: none"> Herefordshire and Worcester Integrated Care System Stroke Programme Board. PTHB and WAST are members of the programme board, with Powys CHC as observers.
Overview	<ul style="list-style-type: none"> A review of stroke services in Herefordshire and Worcestershire is currently under way. This includes the stroke services provided at County Hospital in Hereford. They are looking at the best way to deliver quality stroke services, including for the patients they serve in Powys. A key driver is the challenge in recruiting and retaining sufficient specialist staff including specialist stroke consultants to meet national clinical standards for hyperacute and acute stroke services on two sites. Discussions have been ongoing for several years, including previous engagement activities with local stakeholders to raise awareness of the challenges and discuss possible solutions. A formal period of engagement took place from 20 September 2022 to 11 November 2022. Following engagement, refined proposals are being developed for review through the Clinical Senate process in England.
Impact and interdependency	<ul style="list-style-type: none"> These proposals affect people in mid and east Powys for whom Hereford County Hospital is their main acute hospital for hyperacute and acute stroke services. Under the proposals, County Hospital would no longer provide hyperacute and acute stroke services which would be centralised to Worcester. A pathway would be in place for triage, assessment and diagnostics at County Hospital including provision of thrombolysis as needed. Local rehabilitation and community services in Powys are not directly affected, and nor are stroke pathways for residents of other parts of Powys (e.g. Princess Royal Hospital, Bronglais Hospital, Morriston Hospital, Prince Charles Hospital). However, a review of stroke services in South and West Wales is being established, with a National Stroke Programme Board being established and due to meet on 13 October.
Key Dates	<ul style="list-style-type: none"> Further details awaited on the next steps
Key Materials	<ul style="list-style-type: none"> Website: https://pthb.nhs.wales/hereford-stroke Issues Paper (EN, CY, Easy Read) Narrated presentation
Engagement Planning	<ul style="list-style-type: none"> A local PTHB engagement plan was delivered to raise awareness of these proposals amongst Powys populations and stakeholders.
Llais Liaison	<ul style="list-style-type: none"> There has been ongoing liaison with the CHC. Powys CHC has observer status on the Herefordshire & Worcestershire Stroke Programme Board. A presentation on the proposals was made to the CHC Services Planning Committee on 20 September 2022.

Agenda item: 3.3

PLANNING, PARTNERSHIPS AND POPULATION HEALTH COMMITTEE		Date of Meeting: 11 May 2023
Subject :	Engagement and Communication Team Q4 Delivery Assurance Report	
Approved and Presented by:	Helen Bushell, Director of Corporate Governance	
Prepared by:	Adrian Osborne, Assistant Director (Engagement and Communication)	
Other Committees and meetings considered at:	Executive Committee Members (by email), Engagement and Communication Team Touchpoint	

PURPOSE:

The attached report provides a Q4 update on delivery and progress by the Engagement and Communication Team, and sets out the process by which the priority work programme for 2023/24 is being developed.

RECOMMENDATION(S):

The Planning, Partnerships and Population Health Committee is asked to:

- **NOTE and DISCUSS the Engagement and Communication Q4 Delivery Assurance Report**

Approval/Ratification/Decision	Discussion	Information
✓		

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

Strategic Objectives:	1. Focus on Wellbeing	✓
	2. Provide Early Help and Support	✓
	3. Tackle the Big Four	✓

	4. Enable Joined up Care	✓
	5. Develop Workforce Futures	✓
	6. Promote Innovative Environments	✓
	7. Put Digital First	✓
	8. Transforming in Partnership	✓
<i>The Engagement and Communication Programme supports delivery of all strategic objectives and management of principal risks. Section 2 of the Delivery Assurance Report sets out the detailed delivery plan against the organisation's strategic objectives.</i>		
Health and Care Quality Standards:	1. Safe	✓
	2. Timely	✓
	3. Effective	✓
	4. Efficient	✓
	5. Equitable	✓
	6. Person-Centred	✓
<i>The Engagement and Communication Programme supports delivery across all quality standards and enabling standards. In consideration of the Duty of Quality the team has identified a core set of compliance themes, and a self-assessment against these themes is included in Section 5 of the Delivery Assurance Report.</i>		

EXECUTIVE SUMMARY:

The health board's engagement and communication team provides a vital role to connect the organisation with the public, our staff, and our wider stakeholders. This includes:

- Leadership and execution of engagement and insight to support key decisions and developments (e.g. service change consultations, North Powys Wellbeing programme)
- Development and management key channels (e.g. website, social media, intranet, staff newsletters, digital screens)
- Design and delivery of campaigns (e.g. SilverCloud, vaccine preventable respiratory infection)
- Support for, or fulfilment of, of key projects and prioritise (e.g. Community Training Portal)
- Consultancy and expertise on reputation management, media relations and stakeholder involvement
- Creation and innovation in design and print (e.g. wide format printing, document design)

This document provides an overview of the team's delivery during Q4 and a look forward to 2023/24:

- Section 1: Q4 Highlights
- Section 2: Q4 Programme Delivery and Forward Look to 2023/24

- Section 3: High Level Plan of 2023/24 Campaigns
- Section 4: Horizon Scanning to 2023/24
- Section 5: Governance and Resources overview
- Section 6: Special focus on planning, partnerships and population health

Going forward, the quarterly Delivery Assurance Reports will form part of a process of targeted assurance reflecting the roles and responsibilities of those health board committees with duties in relation to engagement and communication:

- Q4 Delivery Assurance Report (this report): Planning, Partnerships and Population Health lens focusing on assurance of engagement and communication in the development and delivery of our strategic plan, and engagement and consultation on service change
- Q1 Delivery Assurance Report: Patient Experience, Quality and Safety lens focusing on engagement and communication on quality improvement, for patient experience and clinical & professional leadership & standards (4 July 2023)
- Q2 Delivery Assurance Report: Delivery and Performance lens focusing on engagement and communication for key delivery areas including financial health, digital services, capital & estates (14 November 2023)
- Q3 Delivery Assurance Report: Workforce and Culture lens focusing in staff engagement and communication (5 March 2024)

This approach will support the vital assurance role of these committees, as well as rounded scrutiny of the engagement and communication priorities and programme on behalf of the Board.

This report therefore focuses within Section 6 on the principal activities of the team, and the wider engagement and communication programme across the organisation, to SOCIALISE OUR PLAN, ENABLE VOICE, WORK IN PARTNERSHIP and develop partnership CHANNELS.

Section 5 of the report sets out a self-assessment against key compliance themes which is summarised as follows:

Theme	Line of enquiry	Status
STRATEGY	Does the health board have an agreed strategic programme of engagement and communication activity in place that supports the organisation to achieve its strategic objectives and manage its principal risks?	Some gaps
ENGAGE	Are capacity, capability, systems and processes in place to support compliance with relevant legislation and guidance on engagement & consultation on service change?	Some gaps

CAMPAIGNS	Are plans and campaigns developed using appropriate models such as COM-B and OASIS?	Further work needed
AUDIENCES and CHANNELS	Does the health board have a range of channels in place to reach different audiences?	Some gaps
EQUALITY and INCLUSION	Is the health board's approach to engagement and communication meeting statutory requirements and best practice in relation to Welsh Language, Equality Act, Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018 etc?	Some gaps
STAFFING	Is an appropriate staffing model in place with plans to support the development of the skills and capabilities of the team?	Refocus to reflect reduced resource
PARTNERSHIP	Does the team make effective use of partnerships to maximise benefit for the people of Powys?	Some gaps
EVALUATION	Is evaluation and insight embedded in the work of the team to inform future planning and priorities?	Further work needed
REPUTATION	Are robust 24-7-365 systems in place for responding to critical reputation issues and major incidents?	In Hours Only

The delivery programme for the engagement and communication team aims to strengthen assurance against these key themes within available resources. Key risks are reflected in the team risk register which contributes to the directorate risk register and corporate risk register as appropriate in line with the health board's risk management framework.

NEXT STEPS:

- **Finalise plan for 2023/24 through relationship management meetings with directorates**
- **Continued delivery of engagement and communication programme**
- **Presentation of programme of quarterly committee reports**

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The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board’s Equality Impact Assessment Policy (HR075):

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
Age				X
Disability				X
Gender reassignment				X
Pregnancy and maternity				X
Race				X
Religion/ Belief				X
Sex				X
Sexual Orientation				X
Marriage and civil partnership				X
Welsh Language				X
<div>Statement</div> <p>The work of the Engagement and Communication Team supports the health board to deliver mitigation actions arising from impact assessments to address potential downside risks for different equality groups, to provide targeted information and communication for different equality groups, and to gather insights as part of engagement programmes to inform decisions.</p>				
Risk Assessment:				
	Level of risk identified			
	None	Low	Moderate	High
Clinical		X		
Financial		X		
Corporate		X		
Operational		X		
Reputational		X		
<div>Statement</div> <p>A summary of high level risks is included in the paper.</p>				

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PTHB Engagement and Communication Team

Q4 Delivery Assurance Report

Last Updated 2 May April 2023

Adrian Osborne, Assistant Director (Engagement and Communication) - adrian.osborne@wales.nhs.uk

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Introduction and Overview

The health board's engagement and communication team provides a vital role to connect the organisation with the public, our staff, and our wider stakeholders. This includes:

- Leadership and execution of engagement and insight to support key decisions and developments (e.g. service change consultations, North Powys Wellbeing programme)
- Development and management key channels (e.g. website, social media, intranet, staff newsletters, digital screens)
- Design and delivery of campaigns (e.g. SilverCloud, vaccine preventable respiratory infection)
- Support for, or fulfilment of, of key projects and prioritise (e.g. Community Training Portal)
- Consultancy and expertise on reputation management, media relations and stakeholder involvement
- Creation and innovation in design and print (e.g. wide format printing, document design)

This document provides an overview of the team's delivery during Q4 and a look forward to 2023/24:

- Section 1: Q4 Highlights (slides 3-14)
- Section 2: Q4 Programme Delivery and Forward Look to 2023/24 (slides 15-25)
- Section 3: High Level Plan of 2023/24 Campaigns (slides 26-29)
- Section 4: Horizon Scanning to 2023/24 (slides 30-32)
- Section 5: Governance and Resources overview (slides 33-35)
- Section 6: Special focus on planning, partnerships and population health (slides 36-40)

We welcome any comments and feedback on this document, which can be directed to Adrian Osborne, Assistant Director (Engagement and Communication) at adrian.osborne@wales.nhs.uk

Section 1: Q4 Highlights

The first section of this report provides highlights from Engagement and Communication programme delivery during Q4 2022/23

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1.1 January to March 2023: Gilwern Engagement

During Q3 the health board received an application from Crickhowell Group Practice to close Belmont Branch Surgery in Gilwern. This triggers a programme of engagement in line with the health board's Branch Practice Review Process.

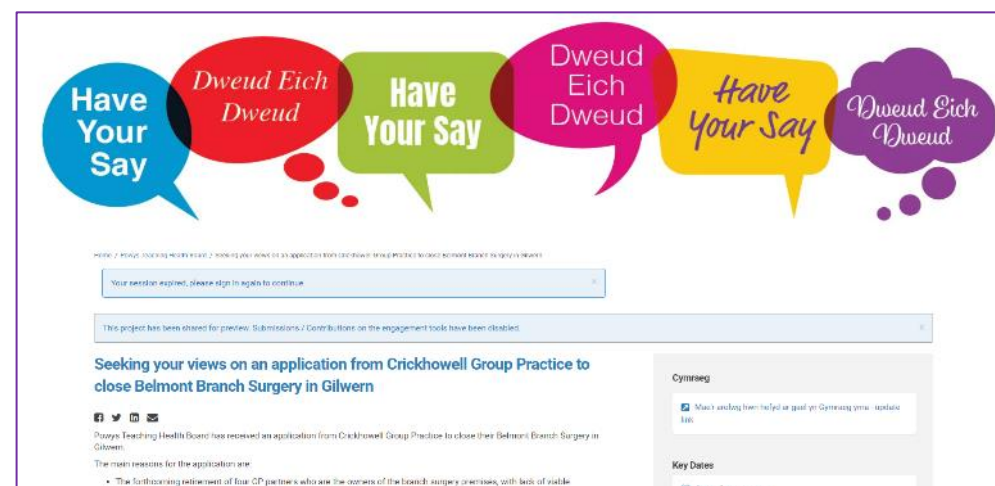
The Engagement and Communication Team quickly put in place a comprehensive plan, developed through liaison with the health board's primary care team, Powys CHC, Aneurin Bevan CHC and Aneurin Bevan University Health Board ready for launch in January 2023. With a preliminary meeting of the Branch Practice Review Panel taking place on 28 November, by the end of the following week the team had put together draft materials for review and approval by the health board's Executive Committee:

- Engagement Plan including stakeholder analysis
- Patient Letter
- Patient Questionnaire
- FAQs

By 22 December this had been expanded further with a draft engagement website (www.haveyoursaypowys.wales/gilwern), marketing & publicity materials, commissioning of Welsh Language translation and accessible materials (easy read, BSL and audio) and preparation of the draft equality impact assessment. These were reviewed and discussed with the PTHB primary care team, Crickhowell Group Practice, ABUHB primary care team and both Powys and AB Community Health Councils.

Engagement commenced on schedule on 10 January 2023 and continued until 6 March 2023. An online engagement event was successfully delivered on 30 January 2023 (<https://youtu.be/mwWwIR0T5fU>), followed by a face-to-face event on planned for 14 February.

By the end of March, comprehensive analysis of over 700 engagement responses had been undertaken with a detailed Engagement Report and Annexes presented to Executive Committee and ready for consideration at a Branch Practice Review Panel meeting scheduled for late April.



1.2 January to March 2023: Public Briefings

PTHB Chief Executive Carol Shillabeer holds regular online public briefing and Q&A sessions, with two events taking place during Q4 on 12 January and 9 March.

These events began at the height of the COVID pandemic and have continued as regular opportunities to share updates from the health board. The events take place via Microsoft Teams and are also livestreamed through the Health Board's Facebook channel. Teams does not have functionality to automatically livestream to social channels so this continues to present some technical challenges requiring the use of multiple devices and OBS Studio interfacing. Along with many other organisations we continue to ask Microsoft to consider adding this useful tool.

The March 2023 briefing covers similar issues to [our recent staff briefing](#), including the work ahead on the Accelerated Service Model to make sure that the NHS is fit for the future. Other highlights included the latest updates on Ysbyty Bro Ddyfi redevelopment, Brecon Car Park, Llanidloes Birth Centre and Knighton Hospital. Carol also reminded people about the importance of COVID boosters, and the universal offer is ending on 31 March with the primary course offer ending on 30 June.

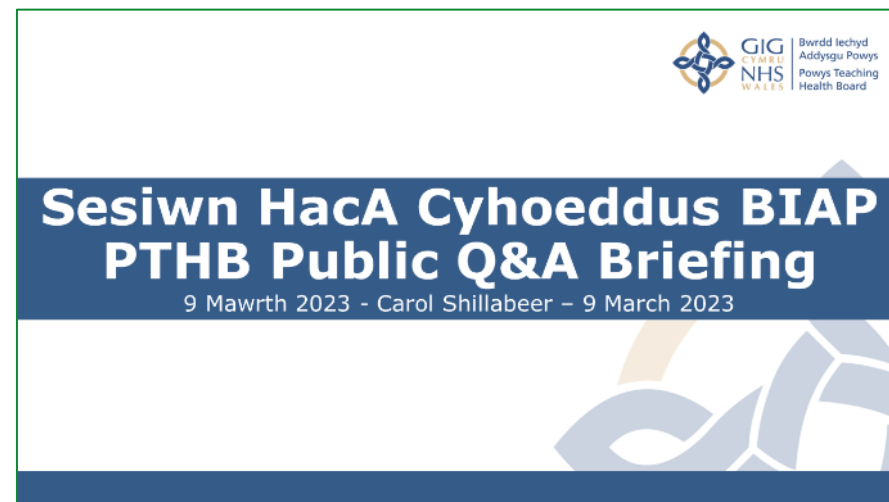
The briefing also provided an opportunity to highlight recent, current and forthcoming engagement and consultation including Gilwern, Cochlear Implant and BCHI Services in South Wales, Hywel Dda's consultation on the location of the new emergency and planned care hospital, PSB consultation on the draft well-being plan, and forthcoming engagement on the future model for EMRTS and Air Ambulance.

Promotion of the briefing continues after the event:

- It is available to watch on YouTube: <https://youtu.be/gwXk33wPQag>
- We have added it as a news item to our website home page carousel [Q&A session available to watch online - Powys Teaching Health Board \(nhs.wales\)](#) where you can also download the slides
- We have also shared it internally with staff [The latest Public Briefing and Q&A with Carol Shillabeer is available to watch online \(sharepoint.com\)](#) flagging that it reflects the content in our recent staff briefing
- It continues to be available to watch on our Facebook channel.
- By Monday we will also have an online form to encourage people to contribute to the Accelerated Service Model development

Our next public briefing is scheduled for 4 May 2023.

Click below to read the Public Briefing slides from 9 March 2023.



1.3 March 2023: Certificate of Appreciation and Staff Excellence Awards

Our latest Certificate of Appreciation of Event took place on Thursday 16 March 2023, providing an opportunity to celebrate and thank colleagues who go the extra mile. The event is now available to watch online.

Every three months we hold our Certificate of Appreciation Events, [Nominations are always open](#) and provide an opportunity for you to help us recognise and celebrate people who go the extra mile, colleagues who have won awards, and those who have achieved new qualifications. Alongside this we get the chance to say thank you to people who have reached their [30 year long service milestone](#).

These were launched as virtual events during COVID, but have become a mainstay of the staff engagement calendar particularly recognising the vast and sparsely populated area served by Powys which can make it difficult to come together face-to-face from across the county

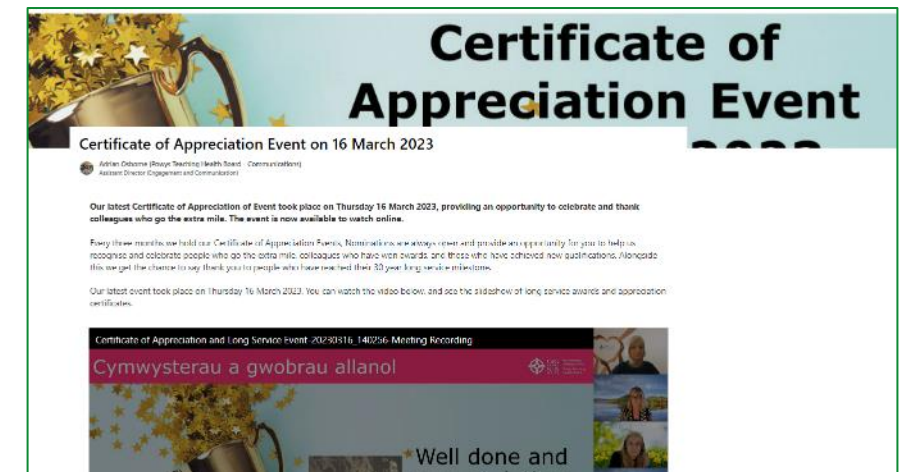
Our latest event took place on Thursday 16 March 2023. It featured 15 people who have reached their 30 year long service milestone so together have given nearly 500 years of service to the NHS.

Individuals and teams were also celebrated for the awards they have won, the qualifications they have achieved, and the support they have given to service users and colleagues

The video is available to watch at [Certificate of Appreciation Event on 16 March 2023 \(sharepoint.com\)](#)

During Q4 work has also begun in readiness for re-launching our Staff Excellence Awards which were paused during the COVID pandemic. Engagement is under way to develop a proposal for an awards event later in 2023, with awards nominations publicised to coincide with celebrations of the 75th anniversary of the NHS on 5 July 2023.

Click below to watch the Certificate of Appreciation Video



1.4 From March 2023: EMRTS Engagement

The PTHB Engagement and Communication Team has supported the design and delivery of formal engagement by EASC on the future model for EMRTS.

Formal engagement began at the end of Q3, and locally the team has ensured that information has been shared via our website and social channels, as well as internally to staff via intranet and staff Facebook channels. Details have also been added to the Powys Have Your Say engagement hub.

The programme of engagement events is subject to change but already includes:

- 4 April: Newtown Drop-in and Newtown Public Meetings
- 13 April: Welshpool Drop-in and Builth Wells Public Meeting
- 18 April: Knighton Public Meeting
- 26 April: Welshpool Drop-in and Welshpool Public Meeting
- 23 May: Machynlleth Public Meeting

More information about engagement events is available from [Engagement Timetable - Emergency Ambulance Services Committee \(nhs.wales\)](#) and further information about the review including engagement documents and supporting information is available from [EMRTS Service Review - Emergency Ambulance Services Committee \(nhs.wales\)](#)

The Health Board's Assistant Director (Engagement and Communication) has also taken a key role in providing advice and support to the EASC team in the development of their engagement approach, which is expected to take place in two phases:

- The current phase focuses on explaining how the service works and the role it plays, encouraging debate and discussion about the opportunities and challenges for the service, to hear ideas for options to address these issues, and to seek views on how decisions should be made about the future model of the service (including specifically on criteria for assessing options, and the weighting that should be used)
- A second phase is expected later this year which will include sharing assessed and weighted options and seeking views.

Click below to find out more



Click here for service updates including NHS Industrial Action

Home > News > Health Board News > Have Your Say on EMRTS Service Review Engagement



Have Your Say on EMRTS Service Review Engagement

The first dates for the Emergency Medical Retrieval and Transfer Services (EMRTS Cymru) engagement sessions have been announced by the Chief Ambulance Services Commissioner (CASC), responsible for leading the all-Wales engagement process.

The formal public engagement process, in relation to EMRTS Cymru who work in partnership with the Wales Air Ambulance Charity, has started this month with a series of engagement events during a six-week period.

The Chief Ambulance Services Commissioner, Stephen Harthy, has been appointed by the Emergency Ambulance Services Committee (EASC) to explore and maximise the additional activity that could be achieved from existing bases and to explore options to reconfigure the air ambulance service.

The engagement timetable shows how a mix of public engagement sessions is being offered to include in-person public meetings, walk-in sessions, and virtual sessions online giving people a range of options to provide feedback during an initial six-week period.

1.5 February 2023 onwards: HDdUHB New Hospital Site Consultation

The PTHB Engagement and Communication Team has ensured that information about proposed changes to Hywel Dda Hospital services has been shared with Powys residents.

On 23 February, HDdUHB began a consultation seeking views on the location of a new urgent and planned care hospital. It is important to ensure that Powys residents are aware of these proposals and specifically:

- residents of mid west Powys who currently access DGH services in Carmarthenshire, to ensure that they are aware that in future Glangwili Hospital will become a community hospital with 24-7 GP urgent care rather than a consultant-led A&E
- residents of north west Powys who currently access DGH services in Aberystwyth are reassured that these proposals do not alter the commitment by HDdUHB to retain services at Bronglais Hospital

We contacted HDdUHB on 27 February asking for a localised narrative for Powys we well as consideration of a drop-in in Llandovery to be more accessible to Llanwrtyd Wells with an interest in these proposals. We received this narrative on 12 April and have ensured that has been shared through multiple channels including PTHB website, Engagement HQ, SharePoint intranet, Facebook, Twitter, and Nextdoor. Information has also been shared with MSs, MPs, county councillors in the Hywel Dda catchment, town and community council contacts in the Hywel Dda catchment, third sector cascade, GP practices (Machynlleth, Builth) and Llais.

We will continue to share information through to the end of the consultation on 19 May. There will be an ongoing need to engage and communicate with mid West Powys residents as the proposed changes to Glangwili Hospital and the relocation of emergency and planned care services further west mean that in future their nearest DGH may be Prince Charles or Morriston.

Click below to find out more

The screenshot shows the NHS Powys Teaching Health Board website. At the top is a navigation bar with the NHS logo, 'GIG YN Y WYLLI Addysgu Powys Powys Teaching Health Board', and links for 'Skip Navigation', 'Accessibility', 'Feedback', 'Contact Us', and 'Cymraeg'. Below this is a search bar and a main navigation menu with links to 'Home', 'Hospitals and Centres', 'Services', 'Urgent Care', 'Staying Healthy', 'Working for us', 'About Us', and 'Contact Us'. A prominent blue banner reads 'Click here for service updates including NHS Industrial Action'. Below the banner, a news item is displayed with the headline 'Do you access hospital services in Carmarthenshire or Ceredigion? Have your say by 19 May on proposals affecting the future of district general hospital services'. The article features an illustration of a nurse holding a large heart shape containing a hospital building. The title of the article is 'Ymgynghoriad Safle Ysbyty Newydd New Hospital Site Consultation'. The text of the article states that during 2018, the health board sought views on proposals affecting the future of district general hospital services in the Hywel Dda area (Carmarthenshire, Ceredigion and Pembrokeshire). It then lists key decisions: 'Glangwili Hospital in Carmarthen and Withybush Hospital in Haverfordwest will be re-purposed as community hospitals. Both will provide 24/7 GP-led urgent care centres. They will have facilities for day case procedures, as well as therapy and nurse-led beds for less critical needs and rehabilitation. Diagnostic support (x-ray, ultrasound etc) will continue, as well as outpatient and other clinics. The more specialised services for urgent and planned care currently provided at Glangwili and Withybush hospitals will in future be provided at a new Urgent and Planned Care Hospital. It will provide specialist children, adult, and mental health services, and will function as the Trauma Unit and main Emergency Department in the Hywel Dda area.'

1.6 Throughout Q4: Duty of Quality and Duty of Candour

PTHB Engagement and Communication Team has been leading the way in Wales in the implementation of the new statutory Duty of Quality and Duty of Candour.

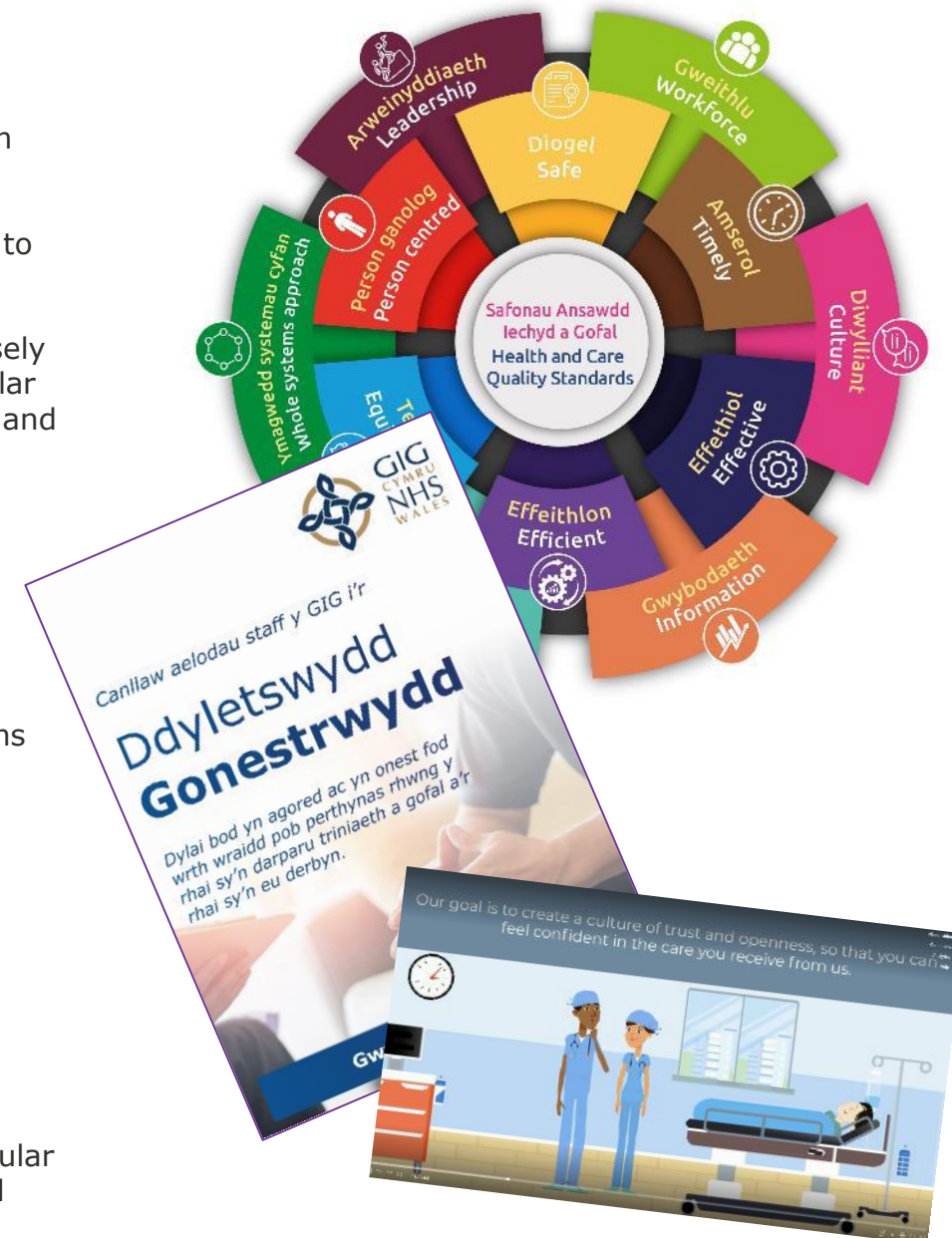
The health board's Assistant Director of Engagement and Communication has been national workstream lead for the Engagement and Communication Workstream for duties implementation.

This has included establishing and ensuring a programme of work to deliver key communication assets to support internal and external communication of the duties, sign-off of key assets in line with delegated responsibility, representing the workstream at the national programme board, leadership for the work programme at the implementation groups for the Duty of Candour and the Duty of Quality working closely with teams in Shared Services and NHS Wales Collaborative, liaising with Welsh Government, and regular updates to HB, NHS Trust and SHA engagement and communication leads to update them on progress and seek feedback.

Key outputs have included:

- Duty of Candour:
 - Duty of Candour staff awareness leaflets and intranet content
 - Duty of Candour patient awareness leaflets, produced in Cymraeg, English and Easy Read – national versions for NHS Wales and localised option for individual organisations, as well as procure, print and distribution of printed copies of the national leaflet to individual organisations and to primary care contractors
 - Duty of Candour staff awareness video
 - Duty of Candour public awareness video
 - Template website content for health boards, NHS Trusts and SHAs
 - National intranet page as central hub for advice and resources
- Duty of Quality:
 - Quality standards visual identity (see right)
 - Duty of Quality On A Page awareness poster
 - Template intranet text for health boards, NHS Trusts and SHAs
 - Duty of Quality awareness video

The team has also ensured that these national materials have been localised for use in Powys, with regular Duties updates issued to the organisation and dedicated Duties content established on the health board website to ensure information is available to the public.



1.7 Powys NHS Jobs Facebook

Building a new social media channel to aid recruitment.

At the start of January, the team developed a new Facebook channel specifically to promote health jobs in Powys.

Fb.com/PowysNHSjobs advertises jobs from Trac to a wide audience across the county and beyond.

During autumn 2022, the Team worked closely with WOD to develop a set of resources, adverts and materials to support them at recruitment events. Through this work we identified that PTHB was not making efficient use of social media to attract applicants.

The WOD team had previously established a Facebook page dedicated to advertising jobs but this was never activated due to lack of capacity within the team.

Therefore the Engagement and Communication Team agreed to launch a new Facebook channel as a pilot from 4 January 2023 until the end of financial year 2022/23 to support the recruitment efforts of WOD and the wider organisation.

Reach and Engagement

As with any new social channel, PowysNHSjobs started with no followers. A target was set of reaching 500 followers by the end of the financial year. By 4 April it had exceeded this target with 391 likes and 724 followers and one post reached over 32,000 people with sharing and paid promotion.

Paid advertising on Facebook costs around £30-100 per campaign, compared with £500-1,000 for a single advert in a newspaper.

Next steps

Establishing this channel was done as a pilot with the expectation that WOD would hopefully be able to take over its management moving forward. However limited capacity in the WOD recruitment team means this is not possible. For the time being Engagement and Comms is continuing to manage the channel and a paper has been prepared to look at options for the long-term maintenance of this, clearly successful, channel.

Dream it, live it
Be at the heart of it in Powys

Powys NHS Jobs
391 likes • 724 followers

Maternity Admin Support Llandrindod Wells Hospital
• Band 2

Patient Services Coordinator Llandrindod Wells Hospital
• Band 3

Community Mental Health Practitioner Newtown
• Band 6 or 5+ training
• Full time
• Newtown
• £34,212 - £41,197
• Closing 23/4/23
• Any registered health professional with MH
• Band 5 will be given
• training to reach band 6

Dream it, live it
Be at the heart of it in Powys

1.8 Help Us Help You and MIU Opening Times

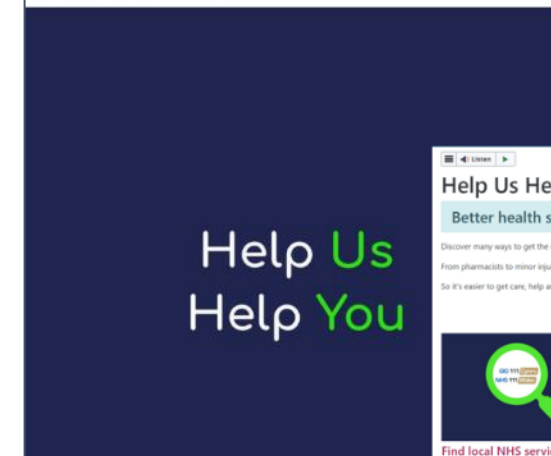
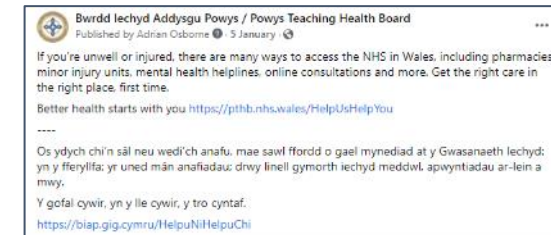
During this quarter we have continued to promote the Help Us Help You campaign - a key Welsh Government campaign which helps to signpost the public to information on where to get the right care in the right place at the right time.

As well as maintaining a local Help Us Help You hub and resources library on our website, we have shared relevant information across our social media channels.

Recent messaging has included information regarding

- Choosing Pharmacy First for common ailments
- Easter bank holiday weekend preparation - reminder to order repeat prescriptions in good time
- Treating minor conditions at home with a well-stocked first aid kit

With the support of colleagues in the Unscheduled Care team we have developed a weekly social media post that lists the opening times of PTHB's MIUs for the week ahead. This post is then updated if there are any last-minute changes to opening times which may be flagged during the week. These posts remind individuals to phone ahead of attending a MIU if they are able and direct them to more information on our website.



PTHB Minor Injury Units
Week beginning 17 April 2023

- **Brecon** (24hour, 7 days) 01874 615800
- **Llandrindod Wells** (07:00-00:00, 7 days) 01597 828735
- **Welshpool** (08:00-20:00, 7 days) 01938 558919/558931
- **Ystradgynlais** (08:30-16:00, Mon-Fri) 01639 844777

Minor injury units in Powys are able to treat adults and children aged 2+. Walk in will always be accepted, though it can be helpful to call first in order that we can provide you with immediate advice over the telephone, book you in to an appointment or even advise you of an alternative service.

Many GP Practices in Powys also provide a minor injury service. Check with your Practice for details.

www.pthb.nhs.wales/HelpUsHelpYou


 Bwrdd Iechyd Addysgu Powys / Powys Teaching Health Board

Help Us Help You
Better health starts with you.

Discover many ways to get the right care, in the right place, first time.


From pharmacies to minor injury units and mental health helplines to online consultations, there are many ways to access the NHS in Wales. So it's easier to get care, help and advice with new or existing conditions, even without leaving your home or workplace.

Getting help from the NHS




Find local NHS services

Find health services close to you such as dentists, pharmacists, optometrists, doctors and hospital services.



Online Symptom Checker

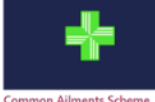
Not sure which service to use? Use the NHS 111 Wales online symptom checker to point you in the right direction.




Don't live in Powys?

Get in touch with your local health board who run the NHS services in your area.


Self-care



Common Ailments Scheme



Find your local pharmacy



First aid kit essentials

1.9a Graphic Design Support: Recruitment

With support from COVID funding the health board was able to secure a fixed term 0.6wte graphic design specialist. During 2022/23 we were able to extend this to 0.8wte including support from the national SilverCloud project hosted by PTHB.

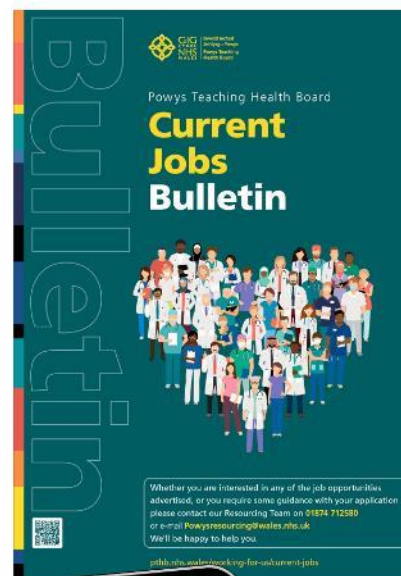
The temporary addition of this role has transformed the visual presence of the health board, both through physical collateral (e.g. room wraps, posters, pull-up banners) as well as digitally.

A key focus during Q4 for the graphic design specialist has been the production of high impact materials to support our recruitment activities (this page). SilverCloud has also been a priority area given the additional funding in 2022/23 (overleaf). The post has also added significant value to a wider range of health board programmes (subsequent page) including North Powys Wellbeing, Project Gwyrdd, Eirlys, Makaton awareness and patient feedback.

COVID-funding for the post ended in March 2023.



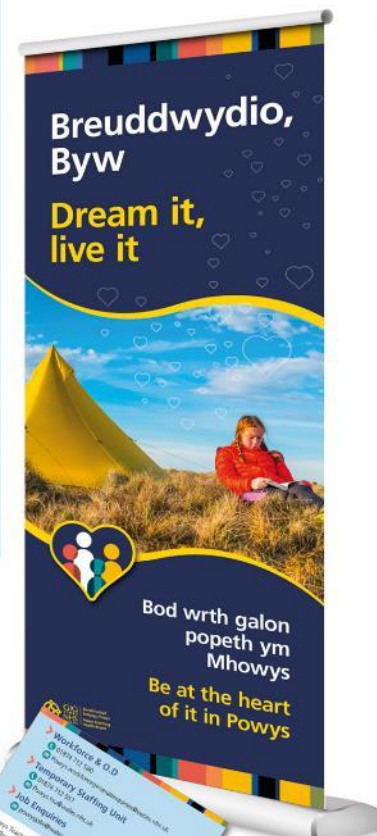
Recruitment merchandise



Social media



Business cards



Banners



Dydych chi ddim ar eich pen eich hun.

A4 Posters

Cymorth iechyd meddwl ar-lein y GIG i bobl ifanc 16-18 oed.



Mae llawer o bobl ifanc yn cael trafferth gyda'u hiechyd, fel teimlo'n orbryderus neu'n isel.

Y newyddion da yw bod llawer y gallwch wneud i helpu eich hun, fel cofrestru ar gyfer rhaglen hunangymorth, dan arweiniad ar-lein sy'n rhad ac am ddim.

Mae rhaglenni SilverCloud® yn defnyddio technegau Therapi Gwybodaeth.

Pam ddylwn i gofrestru?

Gallwch ei defnyddio unrhyw le, unrhyw bryd drwy eich ffôn symudol, tabled neu liniadur.

Mae'n ddiennw, yn ddiogel ac yn hawdd i'w defnyddio.

Gallwch gofrestru heb angen atgyfeiriad gan feddyg.

Byddwch yn cael gwiriadau rheolaidd gan Gefnogaeth CIL.

Space from Alcohol

Help to explore your relationship with alcohol.



Have you noticed that maybe you're drinking more lately? Perhaps you're thinking about making some positive changes, but aren't sure where to start? If you're worried about your drinking, support is available to you.

Guided self-help programme, Space from Alcohol, can help you explore your relationship with alcohol and make changes that feel right for you if, or when, you're ready.

People aged 16+ who are affected by mild-to-moderate alcohol use* can sign up for a 12-week online programme – based on Cognitive Behavioural Therapy (CBT) and Motivational Enhancement Therapy (MET) – free on the NHS in Wales.

Confidential and judgement-free
It's secure, supportive and delivered online. No need to be referred by a GP.

Access anytime, anywhere
Sign up using your phone, tablet or laptop and access 24/7. Work through the programme at your own pace.

Online therapy with a human touch
Receive guidance and feedback from a SilverCloud® Supporter via fortnightly online check-ins. Learn more and sign up:

nhs.wales.silvercloudhealth.com/signup

*SilverCloud's online guided self-help programmes are designed to support people who are looking to explore their relationship with alcohol and other substances but are not at risk of harm. 2022 SilverCloud All Rights Reserved. SilverCloud is a registered trademark of American Well Corporation.



Social media

Instagram

Online guided self-help programme: **Supporting an Anxious Child**

For parents of children aged 4-11

You will learn:

- Parenting an anxious child
- Changing thoughts
- Parenting positively
- Facing fears
- Changing anxiety
- Problem solving

17,280 views
Username Instagram template etemplate
4 days ago

Instagram

New Online CBT Programme: **Supporting an Anxious Teen**

For parents of young people aged 12-18

You will learn:

- Parenting an anxious teen
- Changing thoughts
- Parenting positively
- Facing fears
- Changing anxiety
- Problem solving

17,280 views
Username Instagram template etemplate
4 days ago

Online guided self-help programme: **Supporting an Anxious Teen**

For parents of young people aged 12-18

You will learn:

- Parenting an anxious teen
- Changing thoughts
- Parenting positively
- Facing fears
- Changing anxiety
- Problem solving

Help your child manage anxiety and thrive

NHS online mental health support for young people, parents and carers.

If your child is experiencing symptoms of anxiety or low mood, they are not alone. As a parent or carer trying to support them.

Access anytime, anywhere



Gofod i Les Amenedigol

Ydy'r gwasanaeth hwn yn iawn i mi?

I bobl 16+ oed

Byddwch yn meddwl i reoli gorbryder ac iselder, dysgu sut i fyfyrwch ar symptomau, darganfod rhyddid o leriâu tensiwn a phryder a gwellu eich hwyliad.

Ar gyfer pwys mae'r rhaglen?

Dyluniwyd y rhaglen hon i gefnogi rhieni a gofalewyr yn ystod y cyfnod amenedigol. Gall fod yn dddefnyddiol i rieni newydd, pobl sy'n mabwysiadu plentyn, ac i fenywod sy'n benthyg eu croth. Gall fod yn arbennig o dddefnyddiol i bobl sy'n profi (neu mewn perygl o brofi) symptomau ysgafn i gymedrol o iselder a/neu gorbryder.

Sut ydych chi'n cofrestru?

- Ewch i: <https://nhs.wales.silvercloudhealth.com/signup/>
- Darlennwch grynodeb o'r rhaglen Gofod i Les Amenedigol a dewlsich 'cofrestru' i ddewis y rhaglen. Sicrhewch eich bod yn darllen y wybodaeth cyn cofrestru, gan gynnwys contract y cleient.
- Ar ôl i chi greu cyfrif, bydd gofyn i chi gwbliu cyfres o holiaduron; Mae hyn yn ein helpu asesu os mai dyma'r gwasanaeth cywir ar gyfer eich anghenion. Os ydy, byddwch yn cael Cefnogaeth SilverCloud® a byddwch chi'n barod i fynd. Os nac ydy – nid eich bai chi yn hysbysu i chi meddyg teulu am gymorth i ddod o hyd i'r cymorth cywir ar gyfer eich anghenion.

Gwellu cwsig

Deall mwy am gwsig a sut y gall y cyfnod amenedigol effeithio arno.

Cymryd camau

Archwilio sut y gallwch reoli hwyliad isel neu iselder gydag ymyrraeth sy'n seiliedig ar dystiolaeth o'r enw Actifadu Ymddyddiad.

Ymdopi â phryder

Dysgu sut i ymdopi a rheoli eich pryderon mewn modd effeithlon.

Aros yn iach

Casio cymorth wrth gynnal newidiadau cadarnhaol ac aros yn iach yn y dyfodol.

Dywedodd 100% o gleientiaid yn ein hastudiaeth bellol fod y rhaglen yn eu helpu rheoli eu symptomau yn fwy effeithiol.

Gwych ar gyfer rhieni newydd a phrysus, oherwydd gallwch ddilyn y rhaglen ar gyflymder sy'n siwtio chi.

Defnyddiwch Rhaglen Gofod i Les Amenedigol.

User guides

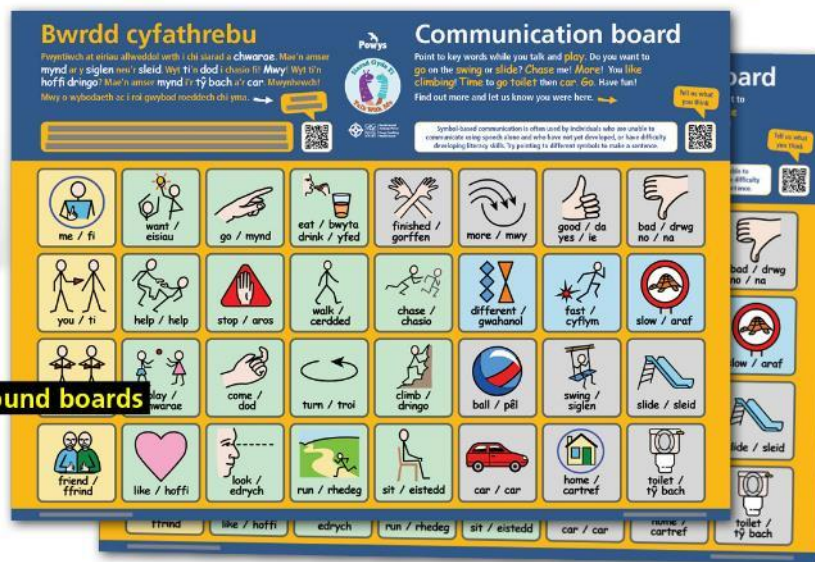
1.9c Graphic Design Support: PTHB Projects and Programmes



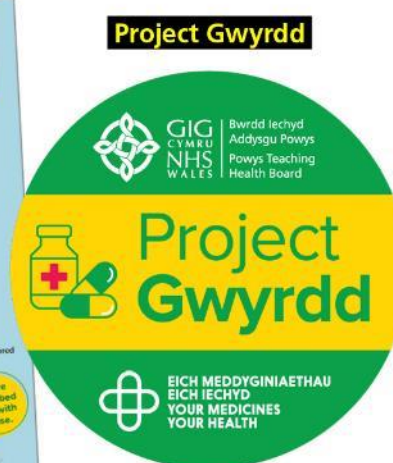
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Displays systems



Large playground boards



Branding - ongoing



Section 2: Q4 Programme Delivery

The second section of this report summarises our progress against our priority objectives in support of the health board's corporate objectives. As this is the first report in this format, trajectory information is not yet available.

Rating	
Green	On track with no escalations
Yellow	Some escalations but do not present significant risk to programme
Amber	Concerns that present risk to programme delivery
Red	Significant issues requiring resolution to ensure programme delivery
Blue	Closed / Complete

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Annual Plan Year End Review

The engagement and communication programme has an impact across multiple delivery areas in the health board's Annual Plan 2022/23, and is specifically reflected in Strategic Priority 23 (key action number 23.5.01).

This action is marked as "complete" within the annual plan performance review, with the following Q4 narrative summary:

The health board's engagement and communication team has continued to deliver a wide-ranging programme of activity during Q4. Key achievements during the quarter include: continued onboarding of departments to the SharePoint intranet; continuation of engagement on next phase of North Powys Wellbeing Programme in support of Outline Business Case development; continued focus on winter respiratory vaccination campaign including conclusion of autumn COVID boosters and readiness for spring COVID boosters; continued promotion of Help Us Help You messaging around access to the right care at the right time; delivery of period of engagement following an application from Crickhowell Group Practice to close Gilwern Branch surgery with preparation and publication of engagement outcome report; readiness for GovDelivery launch; agile response to new and emergent issues (e.g. cold chain, Strep A); support to EASC for launch of engagement on EMRTS service development proposals. During Q4 the AD (Engagement and Communication) also provided national leadership for the communication workstream for launch of the new Duty of Quality and Duty of Candour which came into force on 1 April 2023.

Progress against key actions and milestones

Key Actions	No.	Key Milestones	Exec Lead	RAG	Expected Year End Outcome
Delivery of programme of Communications, with continuous and targeted engagement	23.5.01	Communications Plan implementation	BS	Q1-Q4	Complete

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Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Focus on Wellbeing	1.1 Implement winter respiratory vaccination campaign (COVID, Flu) to encourage uptake, overcome barriers to uptake and reduce inequalities	=	<ul style="list-style-type: none"> During Q4 the focus shifted to alternative models of delivery (e.g. autumn COVID boosters shifted to drop-in, launch of flu drop-in, children's flu vaccination at MVCs by appointment) Publicity issued ahead of close of autumn / always open booster offer in March 2023 Promotion ahead of spring booster campaign launching from April 2023 including reactive comms in relation to changes in delivery model. Complete overhaul of web content ready for commencement including FAQs and reserve list. 	<ul style="list-style-type: none"> Winter respiratory campaign 2022/23 has closed but will be a recurring requirement in the annual plan. Spring booster promotion / reactive comms will need to be a priority for Q1.
	1.2 Continue to implement "Protect" agenda to warn and inform the public about COVID-related risks subject to changing public health conditions	=	<ul style="list-style-type: none"> Reduced priority in Q4 to focus on wider system pressures and Help us Help You 	<ul style="list-style-type: none"> 2022/23 activities have been completed. 2023/24 plan will include refocus on revised Health Protection response
	1.3 Support amplification and delivery of national wellbeing campaigns that support local PTHB priorities (e.g. Healthy Weight Healthy Wales, Help Me Quit, Childhood Immunisation)	=	<ul style="list-style-type: none"> Ongoing publicity in place, primarily "light touch" amplification of national campaigns due to competing local priorities. Regular activity has included awareness of blood donation session, Help Me Quit and other public health programmes. Design and fulfilment of 30+ railing banners to promote Help Me Quit including for schools and playground 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Priority campaigns focus to be agreed as part of 2023/24 annual planning
	1.4 Promote support for Cost of Living	=	<ul style="list-style-type: none"> Maintain ambient awareness. 	<ul style="list-style-type: none"> 2022/23 activities have been completed. 2023/24 priorities will include work with PCC to review web content and ensure remains consistent with current messaging and needs.
	1.5 NEW Support for vaccination cold chain recall activities	↑	<ul style="list-style-type: none"> Significant support provided for planning and implementation following vaccination cold chain incident 	<ul style="list-style-type: none"> Closed

Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Early Help and Support	2.1 Promote alternatives to primary care dentistry (e.g. self-care), support activities to manage demand and capacity (e.g. DNAs) and build confidence in the steps the health board is taking to address availability of NHS dentistry	=	<ul style="list-style-type: none"> No new contract announcements during Q4 and a range of reactive media / political enquiries given continued media/political focus on dental access 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Priority focus to be agreed as part of 2023/23 annual planning
	2.2 Support the sustainability of GP primary care services	=	<ul style="list-style-type: none"> Implementation of Gilwern Engagement from 10 January to 6 March 2023 has been a considerable resource requirement in Q4 Maintenance of #BeKind campaign and broaden focus to wider health and care roles, seeking crowdsourced contributions e.g. child drawings 	<ul style="list-style-type: none"> Carry forward: During Q1, conclude engagement report for Gilwern and support Branch Practice Review Panel process and presentation to Board Wider priority focus to be agreed as part of 2023/23 annual planning
	2.3 Deliver national Help Us Help You (winter) campaign locally in Powys to support & enable appropriate access to treatment in right place right time	=	<ul style="list-style-type: none"> Significant continued programme on Help Us Help You activity during Q4 aligned with national campaign activity, including maintenance of local Help Us Help You digital information hub and resource library Enhanced focus towards Easter to support with messaging linked to wider system pressures 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Help Us Help You is an ongoing requirement to be reflected in 2023/24 planning and priorities.
	2.4 Support timely access to planned care including expectations management (Community Training Portal)	=	<ul style="list-style-type: none"> The new community training portal was maintained and expanded during the quarter. Technical issues identified in relation to public access were addressed with a wide variety of system-facing content has been launched and development continues. However, funding for continuation of project not identified and fixed term post ended in March 2023. 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Work in 2023/24 is paused pending a decision on the future of the platform
	2.5 NEW Refresh and review of pharmacy and medicines management website content	=	<ul style="list-style-type: none"> Significant work has taken place to review and refresh pharmacy and medicines management content on the website including clearer separation between public and HCP content. 	<ul style="list-style-type: none"> Carry forward: Work on pharmacy website content including antiviral service will be concluded in Q1 Wider priority focus to be agreed as part of 2023/23 annual planning.
	See also 7.2 Carbon Neutral Prescribing			

Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Tackling the Big Four	3.1 Support strategic engagement and communication of the Strategic Review of Mental Health Services	=	<ul style="list-style-type: none"> No activities were requested during the year 	<ul style="list-style-type: none"> Closed
	3.2 Continue leadership of communication and marketing activity for national implementation and deployment of SilverCloud	=	<ul style="list-style-type: none"> Launch of new Space from Substance Use and Space from Alcohol modules as well as support for pregnancy 	<ul style="list-style-type: none"> 2022/23 activities have been completed. As a hosted national project with ring-fenced funding this will continue to be a priority for the team in 2023/24.
	3.3. Support for engagement and communication on Herefordshire & Worcestershire Stroke Services and wider national stroke review in Wales	=	<ul style="list-style-type: none"> No activity in this quarter. 	<ul style="list-style-type: none"> 2022/23 activities have been completed. For 2023/24 priorities and planning we await further updates on the next steps following engagement, but anticipate that there will be requirement to support a period of formal consultation on the future model.
	3.4 Support the implementation of ChatHealth platform for school nursing for young people's emotional health	=	<ul style="list-style-type: none"> Continue marketing approach with the Women and Children's team on a comprehensive multi-media campaign supported by in-house design of compelling marketing collateral (e.g. stickers, ecopens etc.). 	<ul style="list-style-type: none"> Closed – ongoing maintenance and resource replenishment will be included in business as usual
	3.5 Support engagement and communication on North Wales nuclear medicine	=	<ul style="list-style-type: none"> Watching brief during Q4 pending identification and agreement of mitigation actions for downside risks for Powys residents by WHSSC / BCU 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Awaiting further updates on the next steps following engagement

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Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Joined Up Care	4.1 Support the design and delivery of the frailty and community model for Powys, with a particular focus on the model for East Radnorshire	=	<ul style="list-style-type: none"> Second edition of Knighton and East Radnorshire Community Focus issued by end January with communication and engagement plan in place to work with the community on the interim model. Third edition in planning for issue early Q1 aligned with opening of reablement beds 	<ul style="list-style-type: none"> Carry forward: Priority focus on Knighton Hospital continuing into Q1 with particular focus on opening of reablement beds in April 2023 2023/24 priorities to be identified as part of annual planning but will include Q1 support for patient bedside whiteboards
	4.2 Working in partnership to support Powys residents to address impacts from cost of living on personal agency and health choices	=	<ul style="list-style-type: none"> See 1.4 	<ul style="list-style-type: none"> See 1.4
	4.3 Support engagement on WHSSC developments and priorities	=	<ul style="list-style-type: none"> Local engagement on Cochlear and BCHI services in South Wales delivered during Q4. 	<ul style="list-style-type: none"> 2022/23 activities have been completed. For 2023/24 we await the outcome of engagement but anticipate that next steps include formal consultation on proposed model
	4.4 Support for wider delivery of urgent & emergency care including six goals and 24-7 urgent primary care model	=	<ul style="list-style-type: none"> Continuing work on EMRTS/WAA service development in partnership with EASC – ongoing local stakeholder engagement and expectations Syndication of EASC briefings through our channels to local stakeholders Partnership working towards launch of phase one of formal engagement which commenced at the end of Q4 	<ul style="list-style-type: none"> Carry forward – engagement is ongoing and we will need to continue local support for the delivery of this. Phase 1 delivery currently planned until end May 2023 with Phase 2 thereafter.
	4.5 NEW Support awareness of Makaton and non-verbal communication	↑	<ul style="list-style-type: none"> Design and fulfilment of 90 Makaton boards for installation in playgrounds across PTHB 	<ul style="list-style-type: none"> 2022/23 activities have been completed. During 2023/24. installation by PCC is taking place during Q1
	See also 2.2 "Help Us Help You" activity	=		

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Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Workforce Futures	5.1 Plan and deliver replacement activities for Diolch Powys event	=	<ul style="list-style-type: none"> Diolch Powys was cancelled end Q2 due to period of national mourning but focus has shifted to wellbeing roadshows which have continued through Q4. 	<ul style="list-style-type: none"> 2022/23 activities have been completed. During 2023/24, priorities will include reviewing roadshows and making decision on continuation through 2023/24, and planning and delivering relaunched Staff Excellence Awards event.
	5.2 Work with WOD on the recruitment offer to further utilise digital and social media	=	<ul style="list-style-type: none"> Continue design support for publicity materials to support recruitment activity; advice / consultancy / support for WOD around options & costs for sustained recruitment approach; ongoing support through social channels for publicity for roles and recruitment events New Powys NHS Jobs channel on Facebook established early Q4 as “proof of concept” Design and delivery of promotion for hospital recruitment events during Q4 (Llanidloes, Welshpool, Machynlleth, Llandrindod Wells) Design and delivery of promotion for Ystradgynlais mental health event (event shortly after year end) Design and fulfilment of bespoke recruitment event materials for careers conferences etc. (Nomadics, pull-ups, badges, t-shirts etc.) 	<ul style="list-style-type: none"> 2022/23 activities have been completed. But carry forward decision on maintenance of Powys NHS Jobs channel into 2023/24 due to reduced team resources.
	5.3 Promote the development and delivery of the Health and Care Academy including through an official opening and/or open day	=	<ul style="list-style-type: none"> CLOSED (Official opening took place on 13 October with Minister attending) 	<ul style="list-style-type: none"> CLOSED
	5.4 Work in partnership with WOD to develop a refreshed Employee Engagement and Communications Strategy	=	<ul style="list-style-type: none"> An ongoing programme of support is in place which is set out in more detail in Section 6 of the Q3 report 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Review priorities as part of 2023/24 annual planning
	5.5 Identify and deliver priority actions in relation to staff financial wellbeing and industrial action	=	<ul style="list-style-type: none"> Significant programme of work continued during Q3 to support organisational response to industrial action including internal and external comms plan and assets and participation in Silver BCP meetings - main impact from WAST activity, England activity plus ongoing uncertainty 	<ul style="list-style-type: none"> 2022/23 activities have been completed. During 2023.24 this remains an active watch area as further industrial action taking place in England in Q1

Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to Q4 / Concluded / Closed
Digital First	6.1 Continue implementation of SharePoint intranet and staff digital channels	=	<ul style="list-style-type: none"> Continued the delivery of Service Area Communications Hub sites; digital consultancy to Directorates and Teams to improve the user journey and build a sustainable and user-focused intranet site. 31 live Service Area communications hub sites (3 new hubs in Q3) with a further 9 in development 	<ul style="list-style-type: none"> Work ongoing to migrate Stay Well in PTHB staff wellbeing intranet to be fully integrated into main organisational intranet (awaiting procurement of migration software by the Digital Team to move the current content to the new section of the intranet)
	6.2 Continue implementation of Healthcare Communications programme	=	<ul style="list-style-type: none"> This has moved to a watching brief during Q4 	<ul style="list-style-type: none"> CLOSED
	6.3 Implement Yammer as a tool to support staff communication and engagement	=	<ul style="list-style-type: none"> Active promotion maintained during Q4 with plan to accelerate in Q1 linked to transition from “Yammer” to “Viva Engage” 	<ul style="list-style-type: none"> Carry forward: review session with DHCW and Microsoft early Q1.
	6.4 Continue implementation of Community Training Platform	=	<ul style="list-style-type: none"> See 2.4 	<ul style="list-style-type: none"> See 2.4
	6.5 Implement GovDelivery e-comms solution	=	<ul style="list-style-type: none"> Platform finalisation nearing completion at end Q4 	<ul style="list-style-type: none"> Carry forward to implement full launch early Q1
	6.6 NEW Maintain and review website and social channels	=	<p>Whilst the maintenance and review of our website and social media channels is not a “new” team requirement, from Q4 we have added this as an explicit objective to our programme plan to ensure that the work activity is more visible within our delivery assurance report. Key priorities in Q4 have included the following:</p> <ul style="list-style-type: none"> Accessibility audit has taken place including refresh of alt text across website images. Refresh and review of pharmacy content (see 2.5). Establishment and maintenance of new “service updates” section to provide timely updates on service outage and impact of industrial action Creation of new dedicated sections for Duty of Quality and Duty of Candour Training undertaken with Dental team to allow them to create a resources area on the website Update of Feedback & Concerns pages with new online feedback forms and addition of CIVICA surveys Develop SilverCloud pages with the addition of a useful information 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Maintenance and review of website and social channels will continue to be a priority for 2023/24 including expansion of therapies content for the public website during Q1.

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Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Innovative Environments	7.1 Provide communication and engagement support to principal capital programmes as appropriate	=	<ul style="list-style-type: none"> Ongoing comms and publicity support for key capital projects including Ysbyty Bro Ddyfi, also reactive/stakeholder support on issues such as Bronllys Hospital development, Llanfair Caereinion replacement medical practice, Brecon car park, Llanidloes Birth Centre 	<ul style="list-style-type: none"> Carry forward – plan for opening of services at Ysbyty Bro Ddyfi in early May followed by official opening on 25 May
	7.2 Support agreed priorities in relation to decarbonisation (carbon neutral prescribing project)	=	<ul style="list-style-type: none"> Active support from E&C team wound down during Q4 with ending of fixed term HoC post 	<ul style="list-style-type: none"> CLOSED
	7.3 NEW Support environmental improvements through murals and vinyl wrapping	↑	<ul style="list-style-type: none"> Initial work under way during Q4 for key programme priorities scheduled in Q1 	<p>Effectively this is a new priority for the programme in 2023/24 as initial scoping work took place during Q4 2022/23 but main delivery takes place in Q1 2023/24:</p> <ul style="list-style-type: none"> Carry Installation of Bro Ddyfi mural (x3) Design and development of Brecon NHS 75 mural (x1) Design, development and installation for Claerwen Ward (x2) and Panpwnton reablement facility

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Q4 Programme Update and 2023/24 Forward Look

Work Area	Q4 Priorities	Status	Current Position	Carry Forward to 2023/24 - Concluded - Closed
Transforming in Partnership	8.1 Develop options for the re-establishment of continuous engagement mechanisms (e.g. local health forums)	=	<ul style="list-style-type: none"> Options for re-establishing continuous engagement mechanisms need further discussion including in relation to funding Proposal agreed for utilising investment in Consultation Institute for training offer for engagement staff 	<ul style="list-style-type: none"> Carry forward: Continue continuous engagement discussions, implement training offer, implementation of new NHS Service Change guidance consultation when available, implementation of representations guidance, new relationship with Llais Develop updated SOP for consideration of service change (target by end Q1)
	8.2 Delivery of Q3 plan for North Powys Wellbeing Programme	=	<ul style="list-style-type: none"> Refocusing of activity in context of Accelerated Service Model 	<ul style="list-style-type: none"> Carry forward: Refocusing of activity in context of Accelerated Service Model
	8.3 Support whole system engagement in the development of the Area Plan and Well-being Plan	=	<ul style="list-style-type: none"> Support for formal consultation on Well-being Plan which ended shortly after year end. 	<ul style="list-style-type: none"> CLOSED
	8.4 Support ongoing engagement and/or consultation in relation to strategic change programmes within and outside Powys	=	<ul style="list-style-type: none"> Key focus needed on engagement/consultation on South Wales Cochlear/BCHI, HDUHB new site location (see 8.9), and delivery of Gilwern Engagement (see 2.2) 	<ul style="list-style-type: none"> 2022/23 activities have been completed. Hywel Dda consultation is carried forward below. Key priorities to be identified through whole system service change review.
	8.5 Support engagement and communication in relation to key governance priorities	=	<ul style="list-style-type: none"> Comms support for executive team and portfolio realignment, and updated Board Photos Support to Corporate Governance team to improve usability of intranet policy library 	<ul style="list-style-type: none"> 2022/23 activities have been completed. 2023/24 priorities to include support for recruitment for IM (Finance)
	8.6 Conclude next phase of work on digital screen implementation	=	<ul style="list-style-type: none"> Implementation ongoing but awaiting Estates support for installation of screens delivered March 2022, and ICT support for upgrade to existing screens 	<ul style="list-style-type: none"> Carry forward to expedite installation of existing purchased items, and continue to seek funding to expand network of screens
	8.7 Support organisational messaging on financial position	=	<ul style="list-style-type: none"> Transition into Accelerated Service Model work 	<ul style="list-style-type: none"> Carry forward: engagement and communication activity in support of Accelerated Service Model will be clarified in Q1
	8.8 Support for national programme of engagement and communication on Duty of Quality and Duty of Candour	=	<ul style="list-style-type: none"> Supporting national programme of work as workstream chair for engagement and communication. Q4 planning and delivery ready for implementation of new duties from 1 April 2023. 	<ul style="list-style-type: none"> 2022/23 activities have been completed. National programme closed in Q1.
	8.9 NEW Hywel Dda New hospital site	↑	<ul style="list-style-type: none"> Launch local activities in support of Hywel Dda's consultation on their new site location. 	<ul style="list-style-type: none"> Conclude consultation (expected 19 May) with further consultation on paed's configuration expected later in the spring.

Political and Strategic Engagement (last updated 27 March 2023)

Based on our strategic priorities and principal risks, the following areas currently represent our political and strategic engagement priorities, for active management by the Corporate Governance Senior Management Team:

Tier 1	Tier 2	Tier 3
East Radnorshire Project (including Panpwnton Ward)	County-wide site development plan (i.e. plans for each community hospital including Bronllys, Ystradgynlais, Llanidloes)	
Accelerated Service Model / North Powys Wellbeing	Next steps on partnership with PCC	
Strategic Review of Mental Health Services (including Crug Ward)	Maternity including SaTH and CTM pathways	
Living within our means (organisation) and Accelerated Service Model	Cost of living impact on our patients (impact on self care, maintaining independence, carer support, cost of access to services etc.) and our staff (impact on recruitment & retention, morale, discretionary effort)	
Overall Public Perception of the NHS (including NHS75) plus Gilwern branch closure application engagement	NHS Dentistry, 24 hour urgent primary care model (111, MIU, Shropdoc etc.) and GP Access	
Review of EMRTS / WAA and other potential high impact/sensitivity service changes TBC	High impact / sensitivity neighbouring service change (NHS Future Fit, H&W Stroke, All-Wales Stroke, HDUHB site location / paed) s	Lower impact / sensitivity neighbouring service change (Cochlear/BCHI, HDdUHB land identification and interim paediatric model)
Industrial Action impact		

Section 3: High level plan of campaigns for 2023/24

This section sets out planned proactive campaign activity, including priority support for national campaigns and key local campaigns

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National and local campaigns plan for 2023/24

Information is awaited from Welsh Government and from Public Health Wales on their national campaign priorities for 2023/24.

Alongside this, local campaign priorities will be identified reflecting the health board's annual plan.

However, it is anticipated that our campaign focus will include:

- SilverCloud (year round – national campaign led by PTHB for the whole of Wales)
- Help Us Help You (year round – with particular focus on winter pressures, bank holidays etc.)
- holidays etc.)
- Vaccine Preventable Disease Programme (year round but including specific focus on COVID/Flu winter respiratory vaccination campaign)
- NHS 111 Wales (year round – with particular focus on winter pressures, bank NHS75 (year round with focus on July 2023)
- NHS 111 Wales Press 2 for Mental Health (subject to launch)
- Act FAST (Wales-specific campaign launches in April 2023)
- Recruitment
- Key equalities campaigns e.g. Pride events, International Women's Day and/or professional awareness days/weeks (e.g. International Nurses Day)
- Help Me Quit

The campaign plan overleaf will be populated in more detail once national and local priorities are confirmed.



Campaign Planner

		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Local Priorities	SilverCloud (PTHB leads national campaign, year round)												
	Help Us Help You (national, year round)	Easter								Winter Pressures			
	Vaccine Preventable Diseases (national, year round)						COVID/Flu						
	NHS 111 Wales (national, year round)												
	NHS 111 Wales Press 2 for Mental Health (local)			Launch (TBC)									
	Act FAST (national)	National Focus											
	Recruitment												
	Help Me Quit (PHW, TBC)												
	NHS75				NHS75								
Other national campaigns with ambient support subject to capacity	Summer Safety (PHW)												
	MenACWY (PHW)												
	Bowel Cancer Awareness Month (PHW)												
	Healthy Weight Healthy You (PHW)												
	Antimicrobial Awareness Week (PHW)												
	Antenatal Screening Wales (PHW)												

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Public Health Wales 2023 Plan on a page



POWER UP



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Wales

This document summarises the proposed priority campaign programme for PHW during 2023.

This is kept under review through the year by PHW, and where appropriate (subject to alignment with health board priorities and available capacity) PTHB localises and socialises these national campaigns for Powys.

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
KEY EVENTS	Cervical Cancer Awareness Month w/c 17th	LGBT History Month Time to Talk Day World Cancer Day WAST 111 Campaign International Day of Women and Girls in Science	International Women's Day (8th) St David's Day Zero Discrimination Day Healthcare Science Week Nutrition and Hydration Week	Ramadan Bowel Cancer Awareness Month World Health Day World Immunisation Week Eid	18th May G7 Summit: AMR on agenda. International Nurses Day Deaf Awareness Week World Hand Hygiene Day Mental Health Awareness Week International Day against Homophobia, Transphobia and Biphobia	Pride Month - Pride Cymru 17th & 18th June Cervical Screening Awareness Week Learning Disability Week International Day of Newborn Screening Carers Week	NHS 75th Anniversary (5 July) World Hepatitis Day	Cycle to Work Day International Youth Day	Rugby World Cup (travel vacs) Childhood Cancer Awareness Month World Sexual Health Day (Hepatitis) Rosh Hashanah World Suicide Prevention Day World Patient Safety Day	Stoptober Black History Month Breast Cancer Awareness Month Yom Kippur Allied Health Professionals Day World Stroke Day	National Safeguarding Week World Diabetes Day Trans Awareness Week World Antimicrobial Awareness Week Diwali HIV Testing Week	World AIDS Day International Day of People with Disabilities
ALL CHANNEL / STRATEGIC THEMES		Cost of Living Campaign				HPV vaccination Antimicrobial Awareness week	NHS 75th Anniversary (5 July)			NHS Wales Awards Winter resp. vaccine		
NEWS	← P: Impact of COVID on older people Llwynhendy TB Outbreak Report P: Screening inequity report	International Horizon scanning report	P: Housing warmth and health in Wales survey P: Adolescent and young people health and wellbeing survey	P: Intergenerational ACEs in children of prisoners WHOCC HPV Vaccine Awareness	Covid Inquiry. Public hearings begin.	P: CoL Survey Results WHOCC (TBC)	'Time to talk public health'					→
CAMPAIGNS	Amplifying Jo's Trust Cervical Cancer Prevention Week campaign Help Me Quit Cervical Cancer Awareness Month	Healthy Weight Healthy You	Supporting WG with Mps	vaccination message Bowel Cancer Awareness Month VSL video Winter Resp. Vaccine Campaign evaluation Stroke	What is screening? Mental Health Awareness Week International Day of the Midwife: MAC screening AAA 10 yr Anniversary Healthy Weight Healthy You Campaign	Diabetic eye screening HPV vaccination	Summer Hapus Safety Help Me Quit	MMR/MenACWY Antenatal Screening Wales Healthy Weight Healthy You Launch of high risk breast cancer screening			Antimicrobial Awareness week	
INTERNAL		Duty of Candour Time to Talk day (4th) Cultural Assessment survey	NHS Executive My Contribution	Onboarding and induction launch NHS 75th Anniversary Long-term strategy Behavioural Framework World Health Day International Nurses Day	WHIWB Pilot finishes NHS 75th Anniversary Long-term strategy Behavioural Framework	Possible Pay award and updates NHS Wales staff survey (TBC)		WHIWB Pilot finishes NHS 75th Anniversary Long-term strategy Behavioural Framework		Staff Flu Vaccinations Allied Health Professionals Day (14)	Christmas Staff Meeting/Message	
DIGITAL	Web Estate Disc.	Web Estate Disc. Project Photo/video assets html build of VPDP patient information leaflets	Web Estate Disc. Ends commission Launch refreshed CSW microsite Workshop - correct use of imagery Build Sharepoint pages - Covid Enquiry Redesign Environmental health webpages	Design and build Health Protection Internet sites Launch new Social Media landscape review Share channel plan - optimizing Instagram	Share Channel plan - TikTok							
OTHER	Self Care Improvement Cymru Vaccinations	Child immunisations	Self Care podcast 7-8th COVID Spring Booster	Feel the Difference	HPV content COVID Vacc. 6months - 5yrs at risk Healthy Weight Healthy You (TBC)	Self Care LS 3-14th			Self Care LS 19-20th	Talking Improvement Self Care LS 28-29th		

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Section 4: Horizon Scanning to 2023/24

This section sets out initial intelligence on priority work areas for 2023/24 subject to development and agreement of the IMTP and Annual Plan

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Effective engagement and communication support the health board to deliver its strategic priorities on behalf of patients and communities, and to manage principal risks.

It helps to ensure that plans and priorities are informed by “what matters” to stakeholders, and that people are equipped with information and support to enable them to take action to maintain and improve their health and wellbeing.

The public perception context for the NHS is challenging as the health board moves into 2023/24, as after a period of widespread support for the healthcare response to Covid, communities now face pressures associated with the Covid burden and increased waiting times, alongside cost of living challenges and wider social pressures.

This Integrated Plan provides an opportunity to reframe relationships with patients, the public and partners including through the development of the Accelerated Sustainable Model. As outlined above, this is also a critical period for staff engagement to ensure a sustainable workforce in a great place to work that places employee health and wellbeing at its heart.

Key Areas of Delivery

- Design and delivery of a programme of marketing and communications to support the delivery of the health board’s wellbeing and enabling objectives, focusing on areas where communication activity can offer the most significant strategic benefit and management of principal risks.
- Design and delivery of a programme of continuous and/or targeted engagement to support strategic insight to inform health board priorities & programmes, gather community voice and co-produce solutions that make best use of community skills and assets; design and deliver compliant programmes of engagement and/or consultation reflecting new national guidance on service change including the development of partnership approach with new Citizen Voice Body from April 2023.
- Ensure effective engagement and communication to support Workforce Futures priorities for ensure a sustainable workforce in a great place to work that places employee health and wellbeing at its heart.

Key areas of delivery outlined in 2023/24 will continue in Years 2 and 3, ensuring communications and engagement is central to the delivery of the health board’s strategy and delivery.

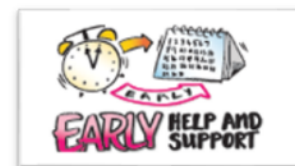
The organisation's draft Annual Plan On A Page 2023/24 is included right.

The engagement and communication team priorities will be developed to reflect this.

Work is under way during April and May 2023 through relationship management meetings with each directorate to identify their support and delivery needs from the engagement and communication team during 2023/24 and through the IMTP period.



1. Population health improvement including health inequalities
2. Health Protection including vaccination



3. Primary Care
**Ministerial Priority*
4. Diagnostics
**Ministerial Priority*
5. Ambulatory Care
**Ministerial Priority*
6. Planned Care
**Ministerial Priority*



7. Cancer
**Ministerial Priority*
8. Circulatory
9. Respiratory
10. Mental Health
**Ministerial Priority*



11. Frailty and Community Model
**Ministerial Priority in relation to DTOC*
12. Urgent and Emergency Care
**Ministerial Priority*
13. Specialised Care

Wellbeing Objectives:
providing the bridge to the medium term and longer term ambition

In Year Strategic Priorities:
(incorporating Ministerial Priorities)

Enabling Objectives supporting delivery of Strategic Priorities



Transformation & sustainability of our workforce
A great place to work
Employee health and wellbeing
Joint workforce futures programme



Digital strategic framework
Implement clinical digital systems
Resilient, cyber secure infrastructure
Electronic document management and digitalisation
Modernise data architecture and business intelligence



Capital and estates programme
Environmental management and decarbonisation



Governance
Engagement and communication
Strategic commissioning, partnerships, performance & planning
Innovation and improvement
Strategic equalities and Welsh language

Enabling Priorities 2023-2026

Section 5: Resource and Governance

This section sets out current team resources and self assessment of compliance.

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Resources

Two full time fixed term posts came to an end in March 2023 reducing the overall resource available to the organisation: interim Head of Communications (secondment cover for the Assistant Director) and Community Training Portal Administrator (fixed term funding to March 2023).

Corporate Engagement and Communication Team

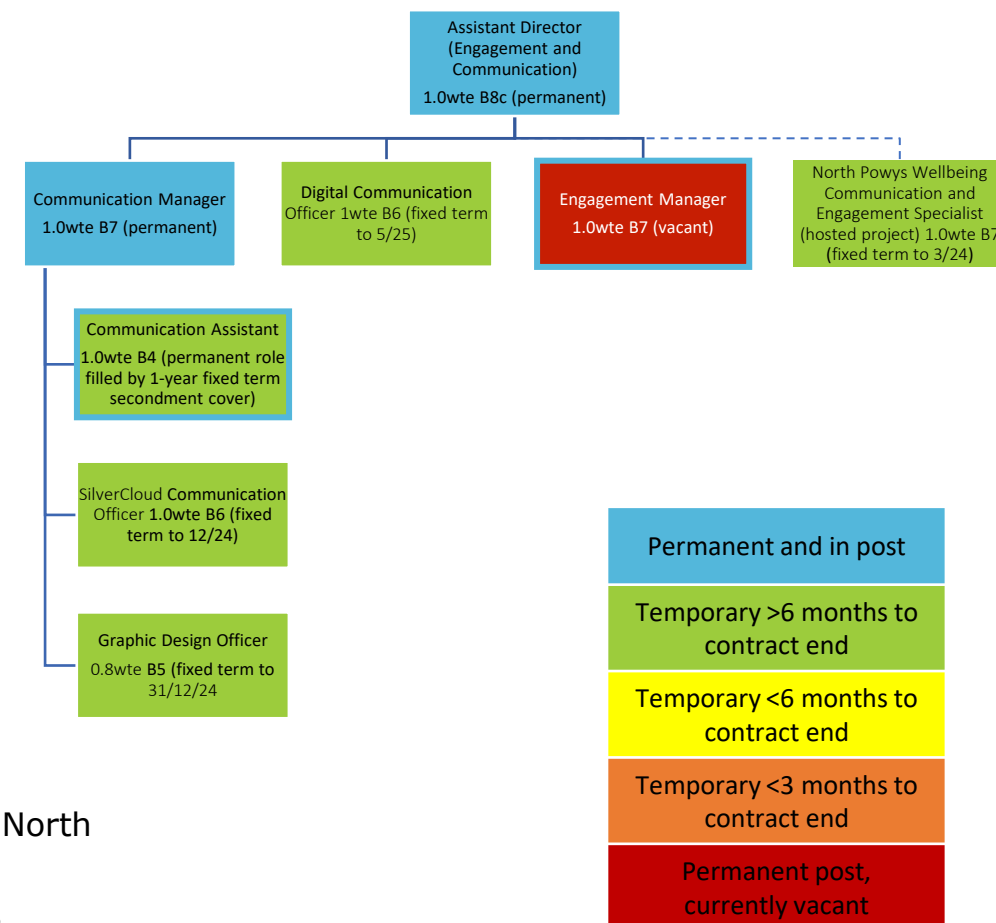
- 2.0wte permanent members of staff currently in post:
 - Assistant Director of Engagement and Communication
 - Communication Manager
- 1.0wte permanent role covered by one year fixed term (postholder on secondment):
 - Communication Assistant on secondment as ILA Business Manager to 3/24
- 1.0wte vacancies:
 - *B7 Engagement Manager post (subject to job evaluation) will replace Engagement Officer in permanent establishment. Recruitment will commence after job evaluation.*
- 1.0wte fixed term members of staff
 - B6 Digital Communication Officer to 03/25 (funded through Digital Transformation)

Hosted Posts (dedicated funding streams)

- 2.8wte fixed term posts with funding linked to specific programmes:
 - 1.0wte B6 SilverCloud Communication Officer (to 12/24) (SilverCloud funding)
 - 0.8wte B5 Graphic Design Officer (to 12/24) (SilverCloud funding)
 - 1.0wte North Powys Wellbeing Communication and Engagement Specialist (to 03/24) (North Powys Wellbeing funding)

SilverCloud is a nationwide project providing online CBT for the whole of Wales hosted by PTHB.

The engagement and communication team does not have a local non-pay budget for discretionary use on programme activities. Programme activities are funded by the relevant lead department.



Self Assessment of Compliance and Assurance

Theme	Line of enquiry	Status	Examples	Further actions to be considered
STRATEGY	Does the health board have an agreed strategic programme of engagement and communication activity in place that supports the organisation to achieve its strategic objectives and manage its principal risks?	Some gaps	This report sets out the key activities and programmes for the Engagement and Communication Team aligned to the Annual Plan delivery priorities for the health board. It is kept under review including at Executive Committee (most recently on 29 November 2022) and WOD Committee (most recently December 2022).	Relationship management meetings in place with each directorate to assess work requirements for 2023/24. The 2022/23 plan benefited from additional short-term funding (e.g. COVID-related) but will need to be reviewed from 2023/24 to reflect the end of fixed term funding.
ENGAGE	Are capacity, capability, systems and processes in place to support compliance with relevant legislation and guidance on engagement & consultation on service change?	Some gaps	The health board has an experienced senior lead in engagement & consultation to provide advice and expertise. Recent engagement/consultation activities have adequately addressed legislation and guidance. Engagement HQ (www.haveyoursaypowys.wales) has been established as an integrated engagement platform across RPB partners and the next step will see the implementation of govDelivery to strengthen direct delivery of information to our stakeholders.	Develop options for the re-establishment of continuous engagement mechanisms (e.g. local health forums) [See 8.1]
CAMPAIGNS	Are plans and campaigns developed using appropriate models such as COM-B and OASIS?	Further work needed	Historically the pace of work requirements combined with relatively small team capacity has meant that the planning approach has often been quite dynamic and responsive. COM-B is increasingly being used as a framework for planning, and core tools are in place for engagement/consultation (workbook) and communications (plan on a page).	Continue to maintain and strengthen use of planning tools
AUDIENCES and CHANNELS	Does the health board have a range of channels in place to reach different audiences?	Some gaps	The engagement and communication team manages a wide range of internal channels (including the new SharePoint intranet, Powys Announcements, staff digital screens) and external channels (including website, Facebook, Twitter, Instagram, NextDoor, patient screens, Engagement HQ). Implementation of Yammer (internal), GovDelivery (external) and Community Training Platform is progressing well. In addition, hosted posts (SilverCloud, North Powys Wellbeing) manage channels relevant to their programmes.	Some rationalisation will be needed in 2023/24 to ensure that our channel strategy is achievable within reduced available resources.
EQUALITY and INCLUSION	Is the health board's approach to engagement and communication meeting statutory requirements and best practice in relation to Welsh Language, Equality Act, Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018 etc?	Some gaps	Core legislative requirements are being met (e.g. CY and EN website, CY and EN social media channels, website platform developed to fulfil Accessibility Regulations) but resource constraints place limitations on our ability to meet best practice standards (e.g. multiple formats & languages) and a risk-based approach needs to be taken.	Continue to keep under review based on organisational priorities, risks and resources.
CAPACITY AND CAPABILITY	Is an appropriate staffing model in place with plans to support the development of the skills and capabilities of the team?	Refocus to reflect reduced resource	PADR and statutory & mandatory training remains a key focus on team meetings and 1:1s although there are currently some areas of non-compliance exacerbated by staff turnover, secondments and short/fixed term nature of contracts. Key areas of development include current hosting of administrator for Community Training Platform and joint support for Apprentice with RIIC.	Currently considering options for staff development programmes focused on (a) engagement and consultation and (b) graphic design. Decisions needed on rationalisation of work programme to reflect reduced resources. Decision to replace B5 Engagement Officer with B7 Engagement Manager will improve strategic support to AD but reduces operational delivery capacity.
PARTNERSHIP	Does the team make effective use of partnerships to maximise benefit for the people of Powys?	Some gaps	The team leads or participates in a wide range of partnerships including: All-Wales NHS Comms Directors, WG Heads of Comms group, All-Wales Engagement Leads, RPB Engagement and Insight Network, PTHB-PCC Comms Collaborative, MURA Service Implementation Board. Members of the team also take on national lead roles (e.g. Duty of Candour/Quality)	Continue to take advantage of opportunities to strengthen local partnerships
EVALUATION	Is evaluation and insight embedded in the work of the team to inform future planning and priorities?	Further work needed	Evaluation and review of engagement/consultation processes is reasonably well-developed but formal evaluation is less-well established within communication programmes	Consider options for prudent evaluation,
REPUTATION	Are robust 24-7-365 systems in place for responding to critical reputation issues and major incidents?	In hours only	The health board is not able to implement an out of hour rota of communications cover which increase risk during evenings and/or weekends and/or reliance on good will.	Reflected in risk register. Keep out of hours cover options under review

Section 6: Special Focus

Strengthening communications and engagement for planning, partnerships and population health

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Each quarter we review our engagement and communication approach through a different committee lens. Our Q4 report is focused on Planning, Partnerships and Population Health.

This includes our support for key supporting frameworks including the Health and Care Strategy, Strategic Commissioning Framework and other Enabling Frameworks. It also reflects that a specific area of responsibility for the Committee is to seek assurance that the health board's arrangements for engagement and consultation in respect of service change matters are robust and effective.

The key management mechanisms during the year have included the Chief Executive Team Weekly Meeting (comprising Chief Executive, Director of Corporate Governance, Associate Director of Corporate Business, and Assistant Director of Engagement and Communication), Transformation and Value Group (providing an opportunity for executive level review of programmes of strategic and service change), project-specific forums (e.g. Gilwern Engagement Touchpoint group) and partnership forums (e.g. the RPB Engagement and Insight Network).

Through these mechanisms, a key focus for the engagement and communication planning and delivery is:

- **SOCIALISING OUR PLAN:** Ensure communication and marketing activities that build awareness and support for our strategies and plans, and demonstrate the improvements these are delivering for patients and communities.
- **ENABLING VOICE:** Establish, maintain and develop mechanisms of continuous engagement to gather voice to inform our planning and priorities; and also ensure targeted engagement approaches for specific projects and programmes including in relation to the impact of changes in neighbouring NHS regions on Powys residents.
- **WORKING IN PARTNERSHIP:** Ensure that key mechanisms and processes are in place to ensure a co-ordinated approach to engagement and communication across local partners.
- **CHANNELS:** Development and delivery of partnership channels.

A specific consideration at year end is the transition from the previous Community Health Councils to Llais, the new Citizen Voice Body. New statutory guidance is expected covering Representation, NHS Service Change and Visits, and this guidance will need to be operationalised locally in Powys to reflect the new relationships in place.



Planning, Partnerships and Population Health Work Plan

Theme	Work Focus	Status	Key activities during 2022/23	Looking ahead to 2023/24
Socialising Our Plan	Ensure that the activities and prioritise of the engagement are aligned with achievements of the health board's strategic aims, objectives and priorities		<ul style="list-style-type: none"> The plan in Section 2 represents the alignment of engagement communication focus and resources with the health board's annual plan for 2022/23 	<ul style="list-style-type: none"> Directorate review meetings are planned for Q1 to ensure a prioritised and targeted plan of support from the engagement and communication team aligned with 2023/24 organisational priorities
Socialising Our Plan	Every day version of the IMTP		<ul style="list-style-type: none"> Every day version created for 2022/23: Strategies and Plans - Powys Teaching Health Board (nhs.wales) 	<ul style="list-style-type: none"> Every day version for 2023/24 in development
Socialising Our Plan	Reflect our wellbeing objectives and enabling objectives through our communication channels and products		<ul style="list-style-type: none"> Routine activities such as staff briefings, public briefings and MS/MP briefings include a regular focus on our plans and priorities 	<ul style="list-style-type: none"> Our Engagement Calendar for 2023/24 has been developed and is kept under review through the Chief Executive Team weekly meeting.
Socialising Our Plan	Welsh Government Good News Stories		<ul style="list-style-type: none"> Two "good news" stories are submitted each month for the NHS Wales Executive Board meetings, with the goal of bringing to life the delivery of our Health and Care Strategy. Stories are published via internal and external channels with a library available from our intranet 	<ul style="list-style-type: none"> Monthly good news stories will continue to be a requirement during 2023/24
Socialising Our Plan	Maintaining our visual brand		<ul style="list-style-type: none"> We have a strong visual brand in place for our joint Health and Care Strategy which continues to be reflected through Health Board (e.g. IMTP) and partnership (e.g. Area Plan) planning and delivery 	<ul style="list-style-type: none"> Review and refresh in the context of Accelerated Service Model development
Enabling Voice	Maintain working relationships with CHC and plan for transition to Llais		<ul style="list-style-type: none"> Strong engagement has been in place throughout the year including through CHC attendance at Board & Committees, Board-to-Board meetings, PTHB presentations to CHC Full Council and Committees, and regular management touchpoints. Plans for formal engagement and/or consultation on service change (e.g. Gilwern) have been developed with input from the CHC 	<ul style="list-style-type: none"> Work is under way to review working arrangements in the context of transition to Llais Policies and procedures will need to be update and/or developed to reflect new guidance on representations published shortly after year end, and new guidance on service change expected soon.
Enabling Voice	Deliver Gilwern Engagement (PTHB lead)		<ul style="list-style-type: none"> A comprehensive programme of engagement was planned and delivered following receipt of an application from Crickhowell Group Practice to close their branch surgery in Gilwern Monmouthshire 	<ul style="list-style-type: none"> Finalisation of Engagement Report for consideration by Branch Practice Review Panel (April) and PTHB Board (May); patient and stakeholder communication of outcome and next steps.

Planning, Partnerships and Population Health Work Plan

Theme	Work Focus	Status	Key activities during 2022/23	Looking ahead to 2023/24
Enabling Voice	Support delivery of Herefordshire and Worcestershire Stroke Engagement (H&W lead)		<ul style="list-style-type: none"> Local delivery plan to support a period of engagement on the future shape of stroke services in Herefordshire and Worcestershire was fully delivered. 	<ul style="list-style-type: none"> Outcome of engagement awaited with formal consultation anticipated later in the year. Note that a review of stroke services in Wales is also anticipated.
Enabling Voice	Support delivery of Cochlear and BCHI Engagement (WHSSC lead)		<ul style="list-style-type: none"> Local delivery plan to support a period of engagement on the future shape of Cochlear and BCHI services complete. 	<ul style="list-style-type: none"> Outcome of engagement awaited with formal consultation anticipated later in the year.
Enabling Voice	Support delivery of EMRTS Engagement (EASC lead)		<ul style="list-style-type: none"> Following leaked proposals for the future shape of air ambulance services, the AD has worked with EASC on the development of plans for structured engagement to support agreement on the future model 	<ul style="list-style-type: none"> Phase 1 of formal engagement commenced late March 2023 and the team continues to provide local support for delivery, and for planning of next phases
Enabling Voice	Support delivery of HDdUHB new site consultation (HDdUHB lead)		<ul style="list-style-type: none"> Formal consultation commenced February 2023 with plan in place and being delivered to raise awareness for communities in mid west and north west Powys who access acute hospital services in Hywel Dda 	<ul style="list-style-type: none"> New site consultation continues to 19 May Formal consultation on interim paediatric configuration is expected later in the year but with indirect impact nly for Powys residents
Enabling Voice	Review options for re-establishment of continuous engagement mechanisms paused during COVID		<ul style="list-style-type: none"> Engagement officer post has remained vacant whilst future options under consideration. Plan agreed as part of 2023/24 budget setting to amend to B7 Engagement Manager for which JD has been developed. 	<ul style="list-style-type: none"> Commence recruitment to B7 Engagement Manager once outcome of job banding has been confirmed.
Enabling Voice	Review potential arrangements for Stakeholder Reference Group		<ul style="list-style-type: none"> The Model Standing Orders for Health Boards anticipate that a Stakeholder Reference Group will be in place. In Powys we already have a wide range of engagement structures in place through RPB, PSB and other partnerships that ensure a strong network of voice. 	<ul style="list-style-type: none"> Review options for SRG in the context of new Llais arrangements
Enabling Voice	Deliver partnership engagement to gather community insights to support development plan of Area Plan and Well-being Plan		<ul style="list-style-type: none"> Through the Powys Engagement and Insight Network a rapid engagement plan was developed and implemented to gather “big ideas” via the Have Your Say Powys platform and other channels. 	<ul style="list-style-type: none"> Continue to work together through the Network to design engagement activities that are “bottom up” from people and their needs and not “top down” from organisations and their wants.
Enabling Voice	Plan and deliver engagement in support of Accelerated Service Model		<ul style="list-style-type: none"> Initial awareness-raising activities have taken place during Discovery phase including staff briefings, MS/MP briefings and public briefings 	<ul style="list-style-type: none"> As we move into Design phase a comprehensive programme of engagement and communication is being developed to inform this vital work

Planning, Partnerships and Population Health Work Plan

Theme	Work Focus	Status	Key activities during 2022/23	Looking ahead to 2023/24
Working in Partnership	Establish a Powys Engagement and Insight Network across RPB partners to help us co-ordinate our approach to citizen engagement		<ul style="list-style-type: none"> PEIN has been established during the year and meets routinely on a monthly basis 	<ul style="list-style-type: none"> See below.
Working in Partnership	Review and expand PEIN to encompass wider PSB activity		<ul style="list-style-type: none"> Initial discussions have taken place by year end to consider options to expand to wider PSB partners recognising that many other partners (e.g. MAWW Fire, DPP, NRW) have a much larger footprint than Powys. 	<ul style="list-style-type: none"> Scoping work is planned including consideration of shared approaches such as Citizen Assembly
Working in Partnership	Develop and improve engagement skills across the partnership network		<ul style="list-style-type: none"> The Consultation Institute (tCI) has been commissioned to provide members of PEIN with a bespoke training package which will support more local practitioners to achieve CPD accreditation with the tCI 	<ul style="list-style-type: none"> Delivery of the training programme will take place during 2023/24 A further key focus during 2023/24 will be to strengthen awareness and use of co-production tools and techniques
Working in Partnership	Deliver benefits of co-ordinated communication activity with PCC		<ul style="list-style-type: none"> A weekly touchpoint takes place between the PCC and PTHB comms leads to share current opportunities and challenges. During Q4 a quarterly development session across both teams was reinstated having been paused during COVID. 	<ul style="list-style-type: none"> Diarise quarterly joint development sessions for PTHB and PCC teams and establish priority co-ordinated programme of focus to maximise engagement and reach
Channels	Continue to maintain and develop Have Your Say Powys as a shared engagement hub across RPB partners		<ul style="list-style-type: none"> Have Your Say Powys / Dweud Eich Dweud Powys is now becoming well-established as a single hub for engagement activities by PTHB, PCC, PAVO and hosted programmes including North Powys Wellbeing There have been 54,637 visits to the 'Have Your Say' Powys Engagement HQ site with 12,425 visitors taking part in engagement activities since the launch of the Engagement HQ platform in May 2021 	<ul style="list-style-type: none"> New training materials have been developed to support the onboarding of other teams and departments. Consideration of options for expanding Have Your Say Powys to other PSB members (but note challenges that they cover wider geographies than Powys so "Powys" branding may not be appropriate)
Channels	Pilot GovDelivery and review options for expanding across public sector partners for single Powys voice		<ul style="list-style-type: none"> GovDelivery procured by end Q3 with channel establishment under way during Q4 	<ul style="list-style-type: none"> Launch GovDelivery sign up during Q1 to expand community and stakeholder reach. Review and consider options for multi-agency expansion

Planning, Partnerships and Population Health Committee		Date of Meeting: 11 May 2023	
Subject :	Healthy Child Wales Programme school aged screening programme		
Approved and Presented by:	Claire Roche - Executive Director of Nursing and Midwifery		
Prepared by:	Mary Cottrill Head of Nursing and Louise Turner Assistant Director Womens and Childrens Directorate		
Other Committees and meetings considered at:			
PURPOSE:			
<div>1) To inform the Committee of the progress of the Healthy Child Wales Programme which includes the School Aged Screening Programme</div> <div>2) To assure committee of the governance and reporting arrangements in place locally and nationally</div>			
RECOMMENDATION:			
<div>The Committee is asked to RECEIVE the paper and take ASSURANCE in relation to</div> <div><div>• progress of the Healthy Child Wales Programme (which includes the School Aged Screening Programme)</div><div>• the governance and reporting arrangements in place locally and nationally for the programme.</div></div>			
Approval/Ratification/Decision ¹		Discussion	Information
✓			✓

¹ Equality Impact Assessment (EiA) must be undertaken to support all organisational decision-making at a strategic level – **N/A**

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

Strategic Objectives:	1. Focus on Wellbeing	✓
	2. Provide Early Help and Support	✓
	3. Tackle the Big Four	
	4. Enable Joined up Care	
	5. Develop Workforce Futures	
	6. Promote Innovative Environments	
	7. Put Digital First	
	8. Transforming in Partnership	
Health and Care Standards:	• Staying Healthy	✓
	• Safe Care	✓
	• Effective Care	✓
	• Dignified Care	✓
	• Timely Care	✓
	• Individual Care	✓
	• Staff and Resources	✓
	• Governance, Leadership & Accountability	✓

EXECUTIVE SUMMARY:

The Healthy Child Wales Programme (HCWP) sets out what planned contacts children and their families can expect from their health boards from maternity service handover to the first years of schooling (0-7 years). These universal contacts cover three areas of intervention: screening; immunisation; and monitoring and supporting child development (surveillance).

The School Nurse service offer screening and surveillance for Vision, Hearing and the Child Measurement Programme in Q4 and Q1. As the programme is an opt out programme the uptake is usually high, with an opt out of less than 5% therefore achieving 95-100% uptake.

All screening and surveillance programmes for this academic year in Powys are planned and resourced for delivery.

DETAILED BACKGROUND AND ASSESSMENT:

The Healthy Child Wales Programme (Welsh Government, 2016) sets out what planned contacts children and their families can expect from their health boards from maternity service handover to the first years of schooling (0-7 years). The programme was implemented on 1st October 2016, and accountability for the delivery of the Healthy Child Wales Programme lies with the Health Visitor and their role is to provide expert clinical leadership to the

multi-disciplinary team. Generic Health Visitors are allocated a caseload of 1:250.

Flying Start is the Welsh Governments targeted Early Years programme for families with children under four years of age. Flying Start offers additional support to families living in low-income families which will give their children the best possible start in life. Flying Start Health Visitors are allocated a caseload of 1:110 which enables them to provide additional support and more regular and intensive contact with families.

The Health Visiting Service in Powys is currently able to offer the HCWP in full except for two areas where there is reduced staffing, Newtown Flying Start and Universal service and Llandrindod Wells Flying Start and Universal service. These areas deliver the programme on a priority plan using the All Wales Health Visiting Service management of caseloads where there is reduced staffing.

Within two areas in Powys, Llanfyllin and Knighton a pilot (pathfinder) supported by the early years transformation partnership has commenced in two Health Visiting Teams. The project is focussing on additional contacts within the universal programme. These are a universal antenatal contact by the Health Visitor, a 21 month contact with a Nursery Nurse and a telephone school readiness contact at aged 4 from the Nursery Nurse. In addition to the one-to-one contacts a range of early years groups will be delivered supporting age appropriate development.

School Aged Screening

During the year that a child enters full time education the School Nurse Service will provide all reception class pupil's parents/carers with the information listed below.

- Information introducing the School Nursing Service
- Contact details for their child's named School Nurse
- A questionnaire to be completed by the parent/carer regarding the child's current health, including their immunisation status.
- Information on the hearing impairment screening programmes
- Information on the national vision screening programme
- Information on the Child Measurement Programme

Children failing vision or hearing screening are referred as per national pathways.

Where children fail vision screening once a letter is sent to parent/carer to inform them and request that they take their child to the optician. The optician will then inform the School Nurse Service of the outcome.

Children failing hearing screening will be offered a 2nd screening test within the School Nurse Service. If they fail a 2nd test they will be referred into audiology services.

Child Measurement Programme

The school nursing team will measure and weigh every child in reception class unless their parents have opted the child out of the programme.

Parents can request that their child is weighed and measured but that the results are not used as part of the Child Measurement Programme.

Health board staff enter the information into the child's computerised health record. The measurement is not currently sent to the carers/parents however this is being considered as part of the local Healthy weights workstream and will be reviewed within the development of the School Health and Wellbeing Programme being led by Welsh Government for implementation in 2024.

At the end of the school year, the height and weight results are sent to the Public Health Wales Observatory link who will analyse the data and look for trends at a local level, at a health board level and nationally to learn how children are growing.

Reporting arrangements HCWP

Data for the uptake of contacts within the HCWP is obtained from the child Health Department CYPrIS system on a monthly basis. Team leaders review the lists for missing contacts and discuss with the relevant Health Visitors. The statistics from the monthly reports are also reported to the Womens and Childrens senior clinical leadership meeting.

The Primary contact is reviewed and monitored by PTHB primary care services following development of a 6-8 week medical check monitoring process.

A business case was submitted in 2022 as a joint paper from Informatics and Childrens Services to request additional resource within the Informatics and child health team to improve the management of the Child Health System (CYPrIS) and improve data collection processes.

Quarter 1 and Quarter 2 (2022-2023) national statistics have shown that Powys uptake is above Welsh average for all contacts in Quarter 1 and for 75% of contacts in Q2. The next national statistical release for Q3 22-23 is expected in May 2023.

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Percentage of eligible children with recorded Healthy Child Wales contacts, by quarter and health board

Health and social care > NHS primary and community activity > Healthy Child Wales Programme
> Percentage of eligible children with recorded Healthy Child Wales contacts, by quarter and health board

	Wales (2)	Betsi Cadwaladr	Powys	Hywel Dda	Swansea Bay	Cwm Taf Morgannwg	Aneurin Bevan (2)	Cardiff & Vale
Contact at 10 – 14 days	85.2	93.5	91.2	89.2	93.0	96.4	54.8	92.4
Physical examination at 6 weeks (1)	79.8	78.2	93.4	86.7	90.1	88.7	80.3	59.0
Weight and measurement at 8 weeks (1)	64.8	87.7	86.5	71.9	81.2	84.4	16.8	58.2
Weight and measurement at 12 weeks	59.9	85.2	82.5	60.9	78.1	83.1	3.6	58.8
Weight and measurement at 16 weeks	59.2	87.5	81.5	62.4	76.1	80.2	2.8	58.8
Contact at 6 months	70.7	93.3	85.0	84.1	87.5	92.1	11.2	74.0
Health visitor contact at 15 months	67.0	86.6	73.6	75.7	82.8	86.7	10.6	72.5
Health visitor contact at 27 months	63.4	84.9	76.8	67.6	79.6	82.2	11.3	64.9
Contact at 3.5 years pre-school	52.1	77.9	78.1	46.9	48.8	64.7	9.5	61.6

<https://statswales.gov.wales/v/NExd>

Percentage of eligible children with recorded Healthy Child Wales contacts, by quarter and health board

Health and social care > NHS primary and community activity > Healthy Child Wales Programme
> Percentage of eligible children with recorded Healthy Child Wales contacts, by quarter and health board

	Wales (2)	Betsi Cadwaladr	Powys	Hywel Dda	Swansea Bay	Cwm Taf Morgannwg	Aneurin Bevan (2)	Cardiff & Vale
Contact at 10 – 14 days	88.7	91.3	83.4	86.5	91.2	96.8	75.5	96.1
Physical examination at 6 weeks (1)	79.5	76.6	91.5	85.1	86.8	87.0	78.4	67.4
Weight and measurement at 8 weeks (1)	67.1	84.9	84.1	66.0	80.1	83.0	28.3	68.1
Weight and measurement at 12 weeks	61.3	83.9	86.1	56.9	77.2	81.4	8.0	68.1
Weight and measurement at 16 weeks	62.3	86.5	88.2	58.6	75.4	79.5	6.6	71.3
Contact at 6 months	79.7	89.2	88.4	84.2	87.8	92.6	51.1	81.8
Health visitor contact at 15 months	74.0	83.7	75.9	80.3	78.8	86.8	44.7	77.8
Health visitor contact at 27 months	71.7	84.0	71.5	73.3	74.2	79.2	49.1	75.1
Contact at 3.5 years pre-school	57.9	73.7	79.6	47.5	46.0	59.0	42.1	67.6

<https://statswales.gov.wales/v/NExe>

NEXT STEPS:

- Continue to deliver HCWP programme in Health Visiting Service.
- Continual review of data collection and data cleanse to improve accurate statistics.
- School Nursing Service to continue with delivery of the programme.
- Child measurement programme – need local and national standard for action and referral for unhealthy weights.
- Continue with recruitment exercises to establish teams to be able to deliver full programme.
- Implement, monitor and evaluate the Pathfinder project.

- Consider further business case to support Informatics team to manage CYPrIS child health system and establish improved process for data collection.

The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
				Existing universal service.
Age	X			
Disability	X			
Gender reassignment	X			
Pregnancy and maternity	X			
Race	X			
Religion/ Belief	X			
Sex	X			
Sexual Orientation	X			
Marriage and civil partnership	X			
Welsh Language	X			
Risk Assessment:				
	Level of risk identified			
	None	Low	Moderate	High
Clinical		X		
Financial	X			
Corporate	X			
Operational		X		
Reputational		X		

NHS WALES SHARED SERVICES PARTNERSHIP

SUMMARY PERFORMANCE REPORT

POWYS TEACHING HEALTH BOARD

Period 1st January 2023 – 31st March 2023

*Adding Value
Through Partnership,
Innovation and Excellence*

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Overview

KPI Status

1

5

15

Not Available

1

Points of Contact

Alison Ramsey – Director of Planning, Performance & Informatics (Alison.ramsey@wales.nhs.uk)

Richard Phillips – Business & Performance Manager (Richard.phillips@wales.nhs.uk)

Key Messages

The purpose of this report is to provide summary performance data in respect of the services provided by NHS Wales Shared Services Partnership (NWSSP) for the quarter ended 31st March 2023.

As part of the approval of our Annual Plan for 2022-23, the Shared Services Partnership Committee (the Committee) reviewed our Key Performance Indicators. We then identified a number of Lead indicators for each division. There are 22 Lead indicators in total.

The Quarter 4 performance for the organisation was generally on target with 15 out of 21 KPIs showing as green.

Further action will be taken forward into 2023-24 to address the performance in areas of underperformance.

We have faced continued significant pressure during Qtr 4 in the areas of recruitment; this has been driven by an increase in activity by all Health Boards to recruit more staff. We are also experiencing delays in relation to the Audit plans however still set to deliver annual audit reports and opinions.

Of the 6 KPIs that did not achieve the targets

- 4 are a combination of both NWSSP and our customers processes.
- 2 are the responsibility of the health organisation.

The final Public Sector Payment Policy (PSPP) figures for 2022/23 are not yet available, as we are still waiting on the adjusted (by NHS Organisations) figures reported via Welsh Government as part of the Annual Accounts process.

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Explanation of Appendices

Appendix 1 to this report provides Quarter 4 performance for your Health Organisation against the 22 Lead indicators with comparison data for the rolling twelve-month period to 31st March 2023. Some indicators are new and only reported from April 2022.

Appendix 2 provides Quarter 4 performance against All Wales KPIs which cannot be attributed to a specific health org but report an All-Wales position with comparison data for the rolling twelve-month period to 31st March 2023. Some indicators are new and only reported from April 2022.

Appendix 3 then highlights the position for all health organisations at the end of March 2023.

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Summary Position

PTHB Quarter 4 22-23 Performance

Primary Care Services

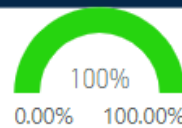
Primary Care payments made accurately and to timescale



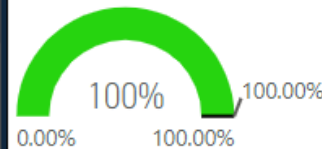
Patient assignments actioned within 24 hours



Urgent medical record transfers to/from GPs and other primary care agencies within 2 working days



Cascade Alerts issued within timescale

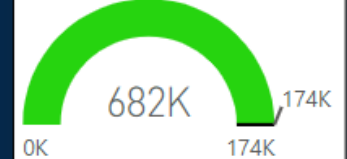


Accounts Payable

Not Available

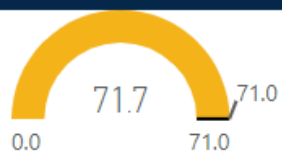
Procurement Services

Procurement savings - YTD

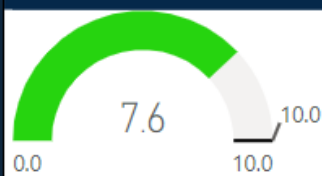


Employment Services

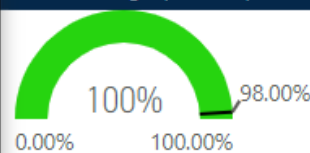
Vacancy Creation to unconditional Offer



Time to Approve Vacancies



% of Vacancies advertised within 2 working days of receipt



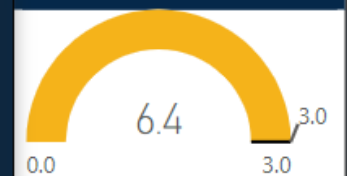
Time to Place adverts



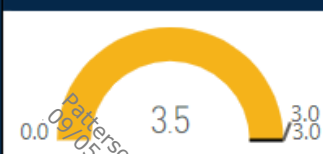
Time to send applications to Manager



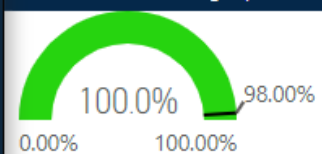
Time to shortlist by Managers



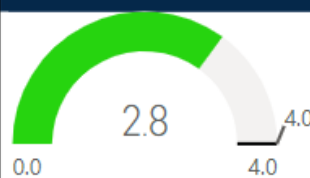
Time to notify Recruitment of Interview Outcome



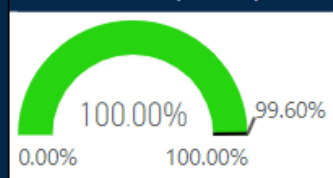
% of conditional offer letters sent within 4 working days



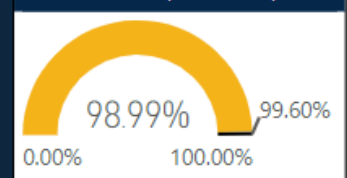
Time to send conditional offer letter



NWSSP Pay Accuracy

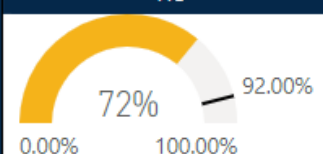


Overall Payroll Accuracy

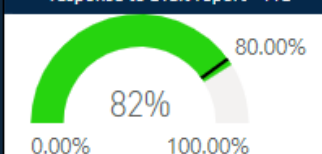


Audit & Assurance

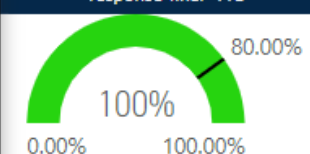
Audits reported % of planned audits - YTD



Report turnaround management response to Draft report - YTD



Report turnaround draft response-final- YTD



Audit Reports to agreed Audit Committee

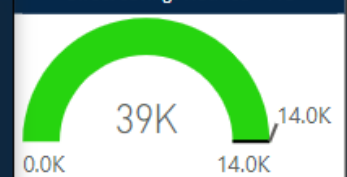
No
(See Explanation in Body of Report)

Professional Influence

1.1M
PI Savings - YTD

Direct Savings

Direct Savings Notified - YTD



Action Plan for Lead Indicators

There was one KPI showing as red for the in-month March position.

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Audit & Assurance

PTHB High Level – KPIs Mar 2023	Target	30/06/2022	30/09/2022	31/12/2022	31/03/2023	Trend
		Internal audit				
Audits reported to agreed Audit Committee	Y/N	Y	N	N	N	

What is happening?
Audits reported to agreed Audit Committee failed to meet the target during March 2023. This has been impacted by three audits not finalised in time for the March Audit Committee deadline, delays were due to delays in completing fieldwork.

What are we doing about it?
A&A are planning to deliver all audits agreed and updated audit plans in time for our annual audit reports and opinions.

Continually working with organisations to review plans and audits that are behind schedule and will realign out resources to audits as required taking into account audit committee dates changing due to delays in the year end accounts timetable.
Any delays are discussed directly with the Health organisations and are made aware of any revised timings.

Heads of Audit continue to discuss report turnaround delays directly with Health Organisations.


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Other areas where action is planned

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Payroll Services

PTHB High Level - KPIs Mar 2023		Target	30/06/2022 Employment Services Payroll services	30/09/2022	31/12/2022	31/03/2023	Trend
Overall Pay Accuracy		99.6%	99.5%	99.7%	99.7%	99.0%	

What is happening?
The overall payroll accuracy performance missed the 99.6% target during March reporting 99.0%. There were 66 total errors reported during March and 65 of these being due to the Health Org. 57 of these errors related to overpayments due to late or incorrect information received into payroll.

What are we doing about it?
The payroll accuracy measures the combined performance of NWSSP and the health organisation. Where errors are made by the health organisation or NWSSP the Payroll Service continue to monitor and where appropriate then advise the health organisation of any specific issues or errors creating overpayments or Manual Payments.

Audit & Assurance

PTHB High Level - KPIs Mar 2023		Target	30/06/2022 Internal audit	30/09/2022	31/12/2022	31/03/2023	Trend
Audits reported % of planned audits - YTD			Target 0%	Target 31%	Target 58%	Target 92%	
			Actual 0%	Actual 27%	Actual 50%	Actual 72%	

What is happening?
Performance in March was missed with 72% of audits reported against a target of 92%.

What are we doing about it?
There are currently 23% of audit outputs in progress and will be brought through to draft/final report stage by the end of May.

Heads of Internal Audit discuss any potential delays regularly with Health organisations.

Employment Services – Recruitment

PTHB High Level – KPIs Mar 2023						
	Target	30/06/2022	30/09/2022	31/12/2022	31/03/2023	Trend
Organisation KPIs Recruitment						
% of vacancy creation to unconditional offer within 71 days		65.2%	60.4%	74.5%	56.9%	
Vacancy creation to unconditional offer	71 days	72.7	79.8	72.1	71.7	
% of vacancies approved within 10 working days		73.5%	70.6%	70.0%	78.3%	
Time to Approve Vacancies	10 days	8.2	9.9	11.3	7.6	
% of vacancies shortlisted within 3 working days		45.9%	39.0%	40.0%	59.0%	
Time to Shortlist by Managers	3 days	6.1	13.3	19.6	6.4	
% of interview outcomes notified within 3 working days		87.7%	82.7%	69.8%	83.1%	
Time to notify Recruitment of Interview Outcome	3 days	1.8	2.1	3.3	3.5	

What is happening?
The recruitment teams are still experiencing unprecedented levels of demand compared to pre-pandemic activity levels, which has meant in some instances compliance with the KPI measures has been missed. Vacancy creation to unconditional has narrowly missed the 71 days target reporting at 71.7 days to complete. Time to Shortlist by Managers has missed the target with an average of 6.4 days. Time to notify Recruitment of Interview Outcome narrowly missed its target of 3 days by reporting 3.5 days this March. These three are dependent on the health organisation although recruitment are working to modernise processes.

What are we doing about it?
Recruitment continue to engage with all organisations on our Recruitment Modernisation Programme to make improvements. The Recruitment Business Partners are meeting Health organisations regularly to share the programme and progress implementation on some of the key changes that can support a reduction in the Time to Hire and an improved customer experience. The Programme Board continues to meet regularly.

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Employment Services – Recruitment

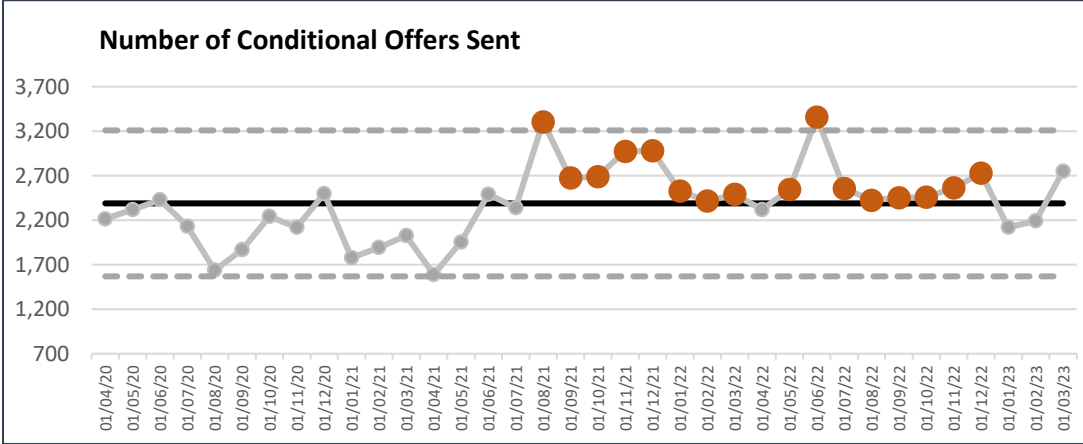
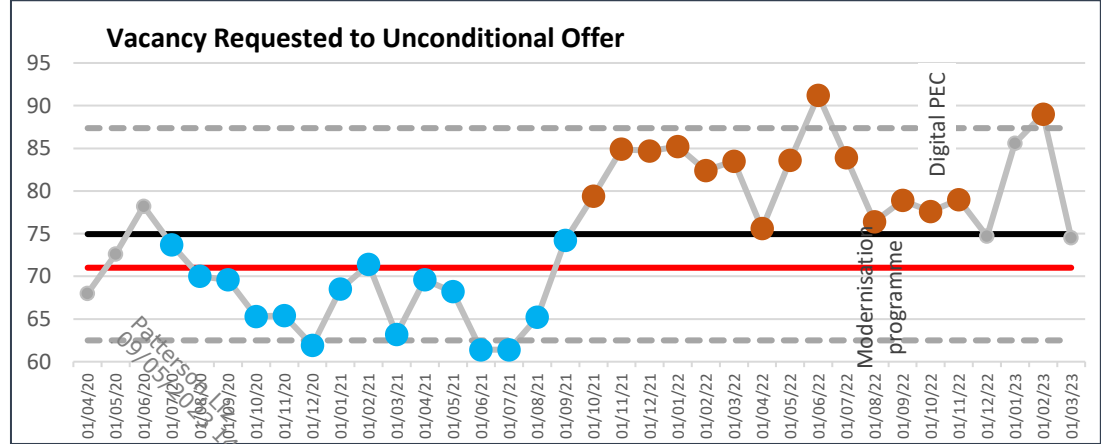
All Wales

What is happening?

The target of creation to unconditional offer within the 71 days has been missed with an average of 75 days however, significantly improved on the February position of 89 days. In broad terms the 71 days can be attributed to as follows:

Responsibility	Days
NWSSP	14
Organisation (Approval)	10
Recruiting Manager	33
Candidate/Occ Health (These can overlap)	14
	71

The charts below demonstrate the increased activity on Number of Conditional offers since 2020.



What are we doing about it?

During March there has been again a push on processing incomplete records, this is a pro active task however, when records are processed over the 71 day target this does affect the average days, there were 199 records processed over 91 days in March compared to in excess of 400 in February, this will become less of an issue and reduce the affect on the performance as less records are cleansed but at this point unable to confirm when this work will be completed.

Appendix 1 – Performance for the rolling twelve-month period to 31st March 2023

PTHB High Level - KPIs Mar 2023		Target	30/06/2022	30/09/2022	31/12/2022	31/03/2023	Trend
Financial Information							
Direct Savings Notified - YTD	£14k	£14k	£14k	£39k	£39k		
Professional Influence Savings - YTD		£0.198m	£0.317m	£0.250m	£1.090m		
Employment Services							
Payroll services							
NWSSP Pay Accuracy	99.6%	100.0%	99.9%	99.9%	100.0%		
Overall Pay Accuracy	99.6%	99.5%	99.7%	99.7%	99.0%		
Organisation KPIs Recruitment							
% of vacancy creation to unconditional offer within 71 days		65.2%	60.4%	74.5%	56.9%		
Vacancy creation to unconditional offer	71 days	72.7	79.8	72.1	71.7		
% of vacancies approved within 10 working days		73.5%	70.6%	70.0%	78.3%		
Time to Approve Vacancies	10 days	8.2	9.9	11.3	7.6		
% of vacancies shortlisted within 3 working days		45.9%	39.0%	40.0%	59.0%		
Time to Shortlist by Managers	3 days	6.1	13.3	19.6	6.4		
% of interview outcomes notified within 3 working days		87.7%	82.7%	69.8%	83.1%		
Time to notify Recruitment of Interview Outcome	3 days	1.8	2.1	3.3	3.5		
NWSSP KPIs Recruitment							
% of Vacancies advertised within 2 working days of receipt	98.00%	100.0%	100.0%	100.0%	100.0%		
Time to Place Adverts	2 days	1.1	1.8	1.9	1.5		
% of applications moved to shortlisting within 2 working days of vacancy closing		98.1%	98.6%	100.0%	100.0%		
Time to Send Applications to Manager	2 days	1.1	1.2	0.9	1.0		
% of conditional offer letters sent within 4 working days	98.00%	100.0%	94.1%	100.0%	100.0%		
Time to send Conditional Offer Letter	4 days	3.2	3.8	3.3	2.8		
Procurement Services							
Procurement savings - YTD		Target £0.020m Actual £0.162m	Target £0.115m Actual £0.256m	Target £0.112m Actual £0.137m	Target £0.174m Actual £0.682m		
Accounts Payable							
Invoices on Hold > 30 days		830	670	849	943		
% Invoices as being in dispute >30 days		46%	61%	56%	26%		
PSPP Compliance non NHS	95%	87.8%	92.2%	81.3%	N/A		
Primary Care Services							
Primary Care payments made accurately and to timescale	100%	100%	100%	100%	100%		
Patient assignments actioned within 24 hours	100%	100%	100%	100%	100%		
Urgent medical record transfers to/from GPs and other primary care agencies within 2 working days	100%	100%	100%	100%	100%		
Cascade Alerts issued within timescale	100%	100%	100%	100%	100%		
Internal audit							
Audits reported to agreed Audit Committee	Y/N	Y	N	N	N		
Audits reported % of planned audits - YTD		Target 0% Actual 0%	Target 31% Actual 27%	Target 58% Actual 50%	Target 92% Actual 72%		
% of audit outputs in progress		12%	35%	20%	23%		
Report turnaround management response to Draft report - YTD	80%	0%	100%	83%	82%		
Report turnaround draft response-final- YTD	80%	0%	100%	100%	100%		

Appendix 2 – All Wales Performance for the rolling twelve-month period to 31st March 2023

ALL WALES KPIs		30/06/2022	30/09/2022	31/12/2022	31/03/2023	Trend
Primary Care Services						
Prescription - Payment Month keying Accuracy rates	99%	99.74%	99.79%	99.72%	99.73%	
Prescriptions processed (Apr-Sept)	70.05m	83.86m	6.88m	42.13m	71.42m	
Welsh Risk Pool						
Time from submission to consideration by the Learning Advisory Panel	95%	100%	100.0%	100.0%	100.0%	
Time from consideration by the Learning Advisory Panel to presentation to the Welsh Risk Pool Committee	100%	100%	100.0%	100.0%	100.0%	
Holding sufficient Learning Advisory Panel meetings	90%	100%	100.0%	100.0%	100.0%	
Legal and risk						
Advice acknowledgement- 24hrs	90%	100%	100%	100%	100%	
Advice response – within 3 days	90%	90%	100%	100%	100%	
Student Awards						
% of NHS Bursary Applications processed within 10 days	100%	100%	100%	100%	100%	
Student Awards % Calls Handled	95%	91.8%	93.9%	95.6%	98.6%	
CTeS						
P1 incidents raised with the Central Team are responded to within 20 minutes	80%	100%	100%	100%	100%	
BACS Service Point tickets received before 14.00 will be processed the same working day	92%	100%	100%	100%	99%	
Digital Workforce						
DWS % Calls Handled	70%	89.20%	73.70%	96.20%	96.20%	
SMTL						
% of incident reports sent to manufacturer within 50 days of receipt of form	Under Review	100%	100%	100%	100%	
% delivery of audited reports on time (Commercial)	87%	93%	100%	100%	100%	
% delivery of audited reports on time (NHS)	87%	NA	NA	NA	NA	
Pharmacy Technical Services						
Service Errors	<0.5%	0%	0%	0%	0%	
Medical Examiner						
Deaths Scrutinised	60%	79%	100%	100%	100%	
All Wales Laundry						
Orders dispatched meeting customer standing orders	85%	98%	99%	110%	102%	
Delivery's made within 2 hours of agreed delivery time	85%	100%	100%	100%	100%	
Microbiological contact failure points	85%	93%	96%	95%	94%	
Inappropriate items returned to the laundry including Clinical waste items	<5	<5	0	0	0	

Appendix 3 – Health Org Performance comparison 31st March 2023

KPIs Mar 2023	KFA	Target	SB	AB	BCU	C&V	CTM	HD	PHW	PTHB	VEL	WAST	HEIW	DHCW	
HEALTH ORG KPIs															
Financial Information															
Direct Savings Notified - YTD	Value Money	for		£176k	£197k	£240k	£210k	£212k	£155k	£17k	£39k	£23k	£26k	0	0
Professional Influence Savings- YTD	Value Money	for	£110m	£17.434m	£37.820m	£47.219m	£19.895m	£9.675m	£14.316m	£0.338m	£1.090m	£2.888m	£2.730m	£0.054m	£0.332m
Employment Services															
Payroll Services															
NWSSP Pay Accuracy	Excellence	99.6%		100.0%	99.9%	99.9%	99.8%	99.9%	100.0%	99.8%	100.0%	99.9%	99.7%	99.9%	99.8%
Overall Pay Accuracy	Excellence	99.6%		99.7%	99.6%	99.8%	99.5%	99.8%	99.9%	99.6%	99.0%	99.6%	99.7%	99.9%	99.7%
Calls Handling % Quarterly Average	Customers	95%							97.4%						
Organisation KPIs Recruitment															
Vacancy creation to unconditional offer	Excellence	71 days		80.8	77.4	79.6	78.3	91.0	65.3	57.2	71.7	70.4	107.1	54.4	58.3
Time to Approve Vacancies	Excellence	10 days		6.2	9.4	3.3	13.3	19.6	5.1	3.8	7.6	6.6	9.2	5.0	0.5
Time to Shortlist by Managers	Excellence	3 days		7.1	8.4	8.4	8.0	7.1	2.8	9.5	6.4	8.7	2.9	17.4	6.7
Time to notify Recruitment of Interview Outcome	Excellence	3 days		3.3	4.2	3.1	2.8	1.7	3.0	2.3	3.5	3.2	2.6	8.8	1.9
NWSSP KPIs Recruitment															
Time to Place Adverts	Excellence	2 days		1.7	1.5	1.3	1.5	1.6	1.5	1.5	1.5	1.4	1.0	0.9	0.9
Time to Send Applications to Manager	Excellence	2 days		1.0	1.1	1.0	1.0	1.0	1.0	1.0	1.0	1.1	1.1	1.1	1.0
Time to send Conditional Offer Letter	Excellence	4 days		3.2	3.8	3.4	3.0	3.9	3.6	3.1	2.8	3.8	3.9	4.0	4.0
Calls Handling % Quarterly Average	Customers	95%							98.9%						
Procurement Services															
Procurement savings- YTD	Value Money	for		Target £1.655m Actual £6.845m	Target £3.826m Actual £10.569m	Target £4.071m Actual £10.777m	Target £3.671m Actual £8.798m	Target £5.680m Actual £6.274m	Target £1.208m Actual £5.858m	Target £0.013m Actual £0.020m	Target £0.174m Actual £0.682m	Target £0.148m Actual £2.501m	Target £0.026m Actual £0.693m	Target £0.003m Actual £0.049m	Target £0.000m Actual £0.215m
Accounts Payable															
Savings and Successes	Value Money	for							£4,583,641						
Invoices on Hold > 30 days	Customers			4,279	5,173	5,214	5,537	5,869	2,244	683	943	1,268	471	114	19
% Invoices as being In dispute >30 days	Customers			41%	54%	60%	57%	45%	45%	50%	26%	83%	66%	68%	37%
Call Handling % - Quarterly Average	Customers	95%							99.4%						
PSPF Compliance non NHS	Excellence	95%							NA						
Audit & Assurance															
Audits reported to agreed Audit Committee	Excellence	Y/N		N	Y	N	N	N	N	Y	N	Y	N	N	Y
Audits reported % of planned audits - YTD	Excellence			Target 61% Actual 52%	Target 85% Actual 73%	Target 83% Actual 66%	Target 95% Actual 79%	Target 85% Actual 74%	Target 83% Actual 81%	Target 73% Actual 73%	Target 92% Actual 72%	Target 57% Actual 57%	Target 71% Actual 67%	Target 90% Actual 80%	Target 87% Actual 87%
% of audit outputs in progress	Excellence			39%	27%	28%	13%	26%	17%	27%	23%	19%	24%	20%	13%
Report turnaround (15 days) management response to Draft report - YTD	Excellence	80%		58%	65%	61%	54%	67%	82%	83%	82%	53%	50%	38%	82%
Report turnaround (10 days) draft response-final- YTD	Excellence	80%		100%	100%	100%	100%	95%	100%	100%	100%	100%	100%	100%	100%
Primary Care Services															
Primary Care payments made accurately and to timescale	Excellence	100%		100%	100%	100%	100%	100%	100%	N/A	100%	N/A	N/A	N/A	N/A
Patient assignments actioned within 24 hours	Customers	100%		100%	100%	100%	100%	100%	100%	N/A	100%	N/A	N/A	N/A	N/A
Urgent medical record transfers to/from GPs and other primary care agencies within 2 working days	Customers	100%		100%	100%	100%	100%	100%	100%	N/A	100%	N/A	N/A	N/A	N/A
Cascade Alerts Issued within timescale	Customers	100%		100%	100%	100%	100%	100%	100%	N/A	100%	N/A	N/A	N/A	N/A

GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership



Patterson Liz
09/05/2023 14:27:59

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Planning, Partnerships and Population Health (PPPH) Committee		Date of Meeting: 11 May 2023
Subject:	COMMITTEE BASED RISKS ON THE CORPORATE RISK REGISTER	
Approved and Presented by:	Director of Corporate Governance	
Prepared by:	Interim Corporate Governance Manager	
Other Committees and meetings considered at:	n/a	

PURPOSE:

The purpose of this paper is to provide the Committee with the February 2023 version of the Committee Risk Register for information.

RECOMMENDATION(S):

It is recommended that the Committee CONSIDERS the February 2023 version of the Committee Risk Register, which reflects the risks identified as requiring oversight by this Lead Committee. This iteration of the Committee Risk Register is based upon the Corporate Risk Register (CRR) considered by the Board on 29 March 2023.

Approval/Ratification/Decision	Discussion	Information
x	✓	✓

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

Strategic Objectives:	1. Focus on Wellbeing	
	2. Provide Early Help and Support	
	3. Tackle the Big Four	
	4. Enable Joined up Care	
	5. Develop Workforce Futures	

Health and Care Standards:	6. Promote Innovative Environments	
	7. Put Digital First	
	8. Transforming in Partnership	✓
	1. Staying Healthy	
	2. Safe Care	
	3. Effective Care	
	4. Dignified Care	
	5. Timely Care	
	6. Individual Care	
	7. Staff and Resources	
	8. Governance, Leadership & Accountability	✓

EXECUTIVE SUMMARY:

The purpose of the Committee Risk Register is to draw together relevant risks for the Committee from the Corporate Risk Register (CRR), to provide a summary of the significant risks to delivery of the health board's strategic objectives.

BACKGROUND AND ASSESSMENT:

The CRR provides a summary of the significant risks to the delivery of the health board's strategic objectives. Corporate risks also include risks that are widespread beyond the local area, and risks for which the cost of control is significantly beyond the scope of the local budget holder. The CRR is reviewed by the Executive Committee on a bi-monthly basis and is noted by the Board.

The Director of Corporate Governance is currently undertaking a review of the CRR in liaison with Executive Directors to ensure it effectively reflects the risks to the organisation and the priorities within the newly developed Integrated Medium Term Plan 2023-26.

The Committee is asked to DISCUSS the risks relating to Planning, Partnerships and Population Health Committee and the risk targets within the Committee Risk Register, and to CONSIDER whether the targets identified are achievable and realistic.

The full Committee Risk Register is attached at **Appendix A.**

NEXT STEPS:

The development of Committee risk registers will be progressed in order to provide greater oversight of the more detailed aspects of the risks, controls and mitigating actions within the Corporate Risk Register.



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

Committee based Risk Register February 2023

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Committee Based Risk Register

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COMMITTEE RISK HEAT MAP: February 2023

There is a risk that...

Impact	Catastrophic	5					
	Major	4					▪ The demand and capacity pressures in the primary care system lead to services becoming unsustainable
	Moderate	3			▪ Ineffective partnership working, including on service change/reconfiguration, results in poorer outcomes and experience for citizens of Powys		
	Minor	2					
	Negligible	1					
			1	2	3	4	5
			Rare	Unlikely	Possible	Likely	Almost Certain
			Likelihood				

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CORPORATE RISK DASHBOARD – February 2023

Risk Lead	Risk ID	Main Risk Type	Risk Description There is a risk that:	SCORE (Likelihood x Impact)	Board Risk Appetite	Risk Target	At Target ✓/✗	Lead Board Committee	Risk Impacts on
DSPC&P	CRR 007	Partnerships	Ineffective partnership working, including on service change/reconfiguration, results in poorer outcomes and experience for citizens of Powys	3 x 3 = 9	Open	6	✗	Planning, Partnerships and Population Health	Organisational Priorities underpinning WBO 8
DSPC&P	CRR 008	Safety	The demand and capacity pressures in the primary care system lead to services becoming unsustainable	5 x 4 = 20	Averse	8	✗	Planning, Partnerships and Population Health	Organisational Priorities WBO 4

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Committee Based Risk Register

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KEY

Risk Appetite Descriptors and Categories

Risk Appetite	Description
Averse	Avoidance of risk and uncertainty in achievement of key deliverables or initiatives is key objective. Activities undertaken will only be those considered to carry virtually no inherent risk.
Minimal	Preference for very safe business delivery options that have a low degree of inherent risk with the potential for benefit/return not a key driver. Activities will only be undertaken where they have a low degree of inherent risk.
Cautious	Preference for safe options that have low degree of inherent risk and only limited potential for benefit. Willing to tolerate a degree of risk in selecting which activities to undertake to achieve key deliverables or initiatives, where we have identified scope to achieve significant benefit and/or realise an opportunity. Activities undertaken may carry a high degree of inherent risk that is deemed controllable to a large extent.
Open	Willing to consider all options and choose one most likely to result in successful delivery while providing an acceptable level of benefit. Seek to achieve a balance between a high likelihood of successful delivery and a high degree of benefit and value for money. Activities themselves may potentially carry, or contribute to, a high degree of residual risk.
Eager	Eager to be innovative and to choose options based on maximising opportunities and potential higher benefit even if those activities carry a very high residual risk.

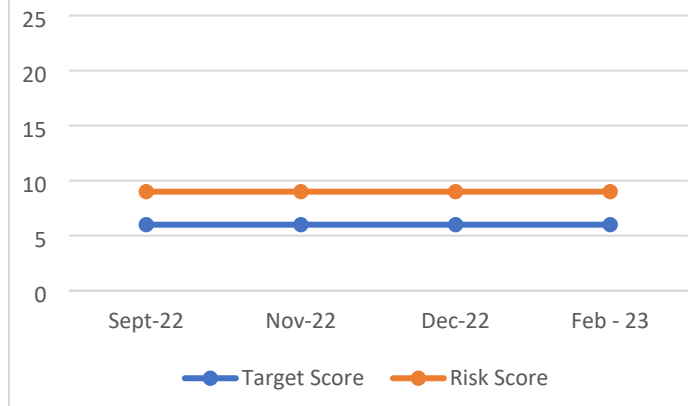
Risk Scoring

LIKELIHOOD	IMPACT				
	Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
Almost Certain 5	5	10	15	20	25
Likely 4	4	8	12	16	20
Possible 3	3	6	9	12	15
Unlikely 2	2	4	6	8	10
Rare 1	1	2	3	4	5

Very Low	1-3	Low	4-8	Moderate	9-12	High	15-25
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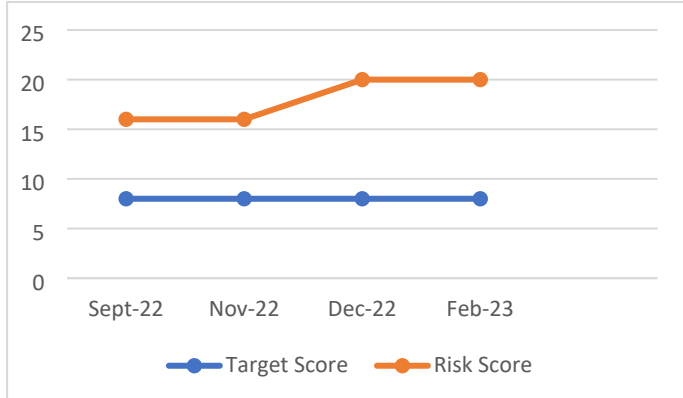
RISK APPETITE	
Category	Appetite for Risk
Safety	Averse
Quality	Minimal
Regulation and Compliance	Cautious
Reputation and Public Confidence	Cautious
Performance and Service Sustainability	Cautious
Financial Sustainability	Cautious
Workforce	Cautious
Partnerships	Open
Innovation and Strategic Change	Open

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CRR 007 Risk that: ineffective partnership working, including on service change/reconfiguration, results in poorer outcomes and experience for citizens of Powys		Executive Lead: Director of Planning and Performance																
Risk Impacts on: Organisational Priorities underpinning WBO 8		Assuring Committee: Planning, Partnerships and Population Health																
Risk Rating (likelihood x impact): Inherent: 3 x 4 = 12 Current: 3 x 3 = 9 Target: 2 x 3 = 6		Rationale for current score: <ul style="list-style-type: none">Effective partnership working arrangements requires strong governance and performance management. There should be a clear approach to ensure and demonstrate that investment in partnerships delivers effective and appropriate outcomes for the local population. In January 2021, Internal Audit reported limited assurance in respect of how the Health Board ensures effective partnership governance.Further, achievement of the health board’s Health and Care Strategy will be dependent on the success of successful working relationships with key partners and stakeholders.																
Date added to the risk register Risk Updated September 2022																		
 <table><caption>Risk Score Data</caption><thead><tr><th>Month</th><th>Target Score</th><th>Risk Score</th></tr></thead><tbody><tr><td>Sept-22</td><td>6</td><td>9</td></tr><tr><td>Nov-22</td><td>6</td><td>9</td></tr><tr><td>Dec-22</td><td>6</td><td>9</td></tr><tr><td>Feb - 23</td><td>6</td><td>9</td></tr></tbody></table>		Month	Target Score	Risk Score	Sept-22	6	9	Nov-22	6	9	Dec-22	6	9	Feb - 23	6	9		
Month	Target Score	Risk Score																
Sept-22	6	9																
Nov-22	6	9																
Dec-22	6	9																
Feb - 23	6	9																
Controls (What are we currently doing about the risk?) <ul style="list-style-type: none">Health Board attendance at Public Service Board, Regional Partnership Board, Joint Partnership BoardHigh-level reporting to Board from Public Service Board, Regional Partnership Board, Joint Partnership BoardPowys Health and Care Strategy in place with Powys County Council and PAVOActive engagement with Mid Wales Joint CommitteeEngaged in regional planning and partnership arrangements such as South East Wales Central Planning Group; Future Fit		Mitigating actions (What more will we do?) <table><thead><tr><th>Action</th><th>Lead</th><th>Deadline</th></tr></thead><tbody><tr><td>Identify all existing partnerships and collaborations to inform development of a Framework</td><td>BS / DPP</td><td>31/03/2023</td></tr><tr><td>Mapping of partnerships and collaborations against existing and proposed governance arrangements to ensure appropriate and robust information flows for monitoring and assurance purposes</td><td>BS / DPP</td><td>28/02/2023</td></tr><tr><td>Development and population of a Partnership Register</td><td>BS</td><td>31/03/2023</td></tr><tr><td>Development of the Partnership Governance Framework for presentation to Board in December 2022</td><td>BS / DPP</td><td>31/03/2023</td></tr></tbody></table>		Action	Lead	Deadline	Identify all existing partnerships and collaborations to inform development of a Framework	BS / DPP	31/03/2023	Mapping of partnerships and collaborations against existing and proposed governance arrangements to ensure appropriate and robust information flows for monitoring and assurance purposes	BS / DPP	28/02/2023	Development and population of a Partnership Register	BS	31/03/2023	Development of the Partnership Governance Framework for presentation to Board in December 2022	BS / DPP	31/03/2023
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Development of the Partnership Governance Framework for presentation to Board in December 2022	BS / DPP	31/03/2023																

Current Risk Rating	Update including impact of actions to date on current risk score
3 x 3 = 9	No further update

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CRR 008 Risk that: the demand and capacity pressures in the primary care system lead to services becoming unsustainable		Executive Lead: Director of Primary Care, Community and Mental Health Services Assuring Committee: Planning, Partnerships and Population Health																
Risk Impacts on: Organisational Priorities underpinning WBO 4		Date last reviewed: February 2023																
Risk Rating (likelihood x impact): Inherent: 4 x 4 = 16 Current: 5x4 = 20 Target: 2 x 4 = 8	 <table><caption>Risk Score Data</caption><thead><tr><th>Month</th><th>Target Score</th><th>Risk Score</th></tr></thead><tbody><tr><td>Sept-22</td><td>8</td><td>16</td></tr><tr><td>Nov-22</td><td>8</td><td>16</td></tr><tr><td>Dec-22</td><td>8</td><td>20</td></tr><tr><td>Feb-23</td><td>8</td><td>20</td></tr></tbody></table>	Month	Target Score	Risk Score	Sept-22	8	16	Nov-22	8	16	Dec-22	8	20	Feb-23	8	20	Rationale for current score: <ul style="list-style-type: none">▪ Sustainability assessment and escalation tool of GP Practices identifying several high risk practices across Powys. Practices may not be able to provide sustainable GMS services.▪ Increasing demand during in and out of hours particularly relating to paediatric demand resulting in impact on routine care.▪ Cybersecurity incident caused by ransomware affecting Adastra system across all NHS (England and Wales). Impact on 111 and Out of Hours Services including access to clinical records available to support consultations. Adastra now up and running however CAS system still not yet operational▪ Dental access gaps across Powys with demand for access currently greater than capacity. Routine and urgent General Dental Services compromised.	
Month	Target Score	Risk Score																
Sept-22	8	16																
Nov-22	8	16																
Dec-22	8	20																
Feb-23	8	20																
Controls (What are we currently doing about the risk?) <ul style="list-style-type: none">▪ Close monitoring and liaison with practices to offer support including regular review of the sustainability matrix to monitor changes and sustainability funding application process.▪ Implementation of Accelerated Cluster Development Programme.▪ Health Board management of practices if contracts are handed back until tendering process is successful.▪ Adastra – Continued daily participation in national BCI calls with 111 to manage situation. Following successfully testing Shropdoc Adastra was reinstated on 19/10/22 albeit with limited functionality. System being used for the patient contact/record. Manual admin process still required at the front end. Reactivation of GP OOH report messaging and special patient notes now in place. Fully operational		Mitigating actions (What more will we do?) <table><thead><tr><th>Action</th><th>Lead</th><th>Deadline</th></tr></thead><tbody><tr><td><ul style="list-style-type: none">▪ Primary Care – Ongoing regular review of sustainability matrix and applications for support. Weekly review of Escalation tool▪ Weekly discussions with Cluster Leads to discuss ongoing demands and additional actions to manage peaks▪ Implementation of the Accelerated Cluster Development Programme to meet national milestones.▪ Following the Adastra Cyber incident on the 4th August, that as of today a fully functioning Adastra system is now operational across Wales and</td><td>DPCC MH</td><td>Ongoing</td></tr></tbody></table>		Action	Lead	Deadline	<ul style="list-style-type: none">▪ Primary Care – Ongoing regular review of sustainability matrix and applications for support. Weekly review of Escalation tool▪ Weekly discussions with Cluster Leads to discuss ongoing demands and additional actions to manage peaks▪ Implementation of the Accelerated Cluster Development Programme to meet national milestones.▪ Following the Adastra Cyber incident on the 4th August, that as of today a fully functioning Adastra system is now operational across Wales and	DPCC MH	Ongoing									
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<p>Adastra and CAS system hoped to be in place before the 4 day Christmas BH period. 111 and Shropdoc remain in BCI</p> <ul style="list-style-type: none"> Commissioning of urgent access slots across Powys and new contract in place for Llandrindod. Implementation of the new Dental contract 22/23 metrics should increase provision and access. Community Dental Service clinics support urgent access to mitigate against gaps in provision. Mid Year Review meetings completed and in year contract adjustments being considered. Awaiting national guidance to support year end. 	<p>Shropdoc. Therefore 111, Shropdoc and SBUHB will be no longer working under BCI arrangements. The national twice weekly Business Continuity & Incident calls have therefore also been stood down as of 16/02/2023</p>		
	<ul style="list-style-type: none"> Dental – Urgent access slots commissioned across Powys. Dental contract reform to improve access. Community Dental Service clinics in place to support urgent access to mitigate gaps until procurement processes successful. New contract currently out to tender for Newtown. 	DPCC MH	Ongoing
Current Risk Rating	Update including impact of actions to date on current risk score		
5x4 = 20	Mitigating actions continue to manage the risks		

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PPPH Work Programme – Draft

The work programme has been drafted, reflecting on the Committee Terms of Reference, review of last years work programme, discussion with lead executives and the Committee Chair.

The Committee is asked to provide comment on the work programme draft, noting it will evolve throughout the year in response to changing needs, ahead of it being provided to the Board on the 24 May.

Theme	Item	Purpose	11.05.23	24.08.23	16.11.23	20.02.24
Governance	Minutes of Previous meeting	Approval	✓	✓	✓	✓
	Declaration of Interests	Governance				
	Action Log	Approval	✓	✓	✓	✓
	Committee Risk Register	Assurance	✓	✓	✓	✓
	Annual Work Programme	Governance	✓			
	Work Programme	Governance		✓	✓	✓
	Annual Assessment of Committee Effectiveness	Assurance	✓			
	Committee Annual Report	Rec to Board	✓			
	Review of Terms of Reference	Rec to Board			✓	
	Social Economic Duty	Assurance				✓
Planning	IMTP – approach for development	Assurance		✓		
	IMTP – draft plan	Rec to Board			✓ or	✓
	Strategic Change Report	Assurance	✓	✓	✓	✓
	Primary Care Cluster Planning Reporting against delivery	Assurance		✓ or	✓	
	Strategic Commissioning Framework	Assurance				

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Partnerships	Regional Partnership Board – Health and Care Strategy and reporting mechanisms RPB Work Programme - Start Well - Live Well - Age Well	Assurance		✓	✓	✓
	RPB delivery plan (<i>ideally earlier in year</i>)	Assurance		✓		
	Integrated Care Fund (annual) and performance reports	Assurance				
	Public Service Board (<i>ideally earlier in year</i>) • Wellbeing Plan • Wellbeing of Future Generations Act	Assurance		✓		
	North Powys Wellbeing Programme – including Models of Care	Assurance		✓		✓
	NWSSP Performance Report	Assurance	✓ (year-end)		✓ (mid-year)	
	Accelerated Sustainable Model (planning and approach)	Assurance		✓	✓	✓
	Partnership Governance Framework	Rec to Board			✓ or	✓
	Arrangements for Engagement and Consultation in respect of service change / Comms and Engagement report	Assurance	✓			
Population Health	Population Health Needs Assessment and Wellbeing Assessment (next needed 2026/27)	Assurance				
	Weight Management Pathway (to include Healthy Wales Assurance Report)	Assurance	✓			

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	Healthy Child Wellbeing Programme School Age Screening Programme Evaluation (CR) Health visiting programme	Assurance	✓			
	Summary of screening programmes (uptake of screening programmes) *when published by PHW	Assurance			✓ (TBC)	
	Annual Report of Director of Public Health (including Reducing inequalities)	Assurance				✓
	Health Protection Summary Report	Assurance			✓ (TBC)	
	Child Immunisation Annual Report	Assurance			✓	
	Deep dive – determine a programme of population health focussed topics	Assurance			✓ (proposals)	✓ (deep dive)
Other Timescales TBC	Primary Care Development Programme Highlight Report	Assurance				
	Endoscopy services	Assurance		✓		
	Additional Learning Needs (ALN)	Assurance				

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