ANNEX 1

GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru Public Health Wales

Public Health Wales

1 Public Health Wales

1.1 Who we are

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

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

1.2 Our purpose and mission

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

1.3 Vision

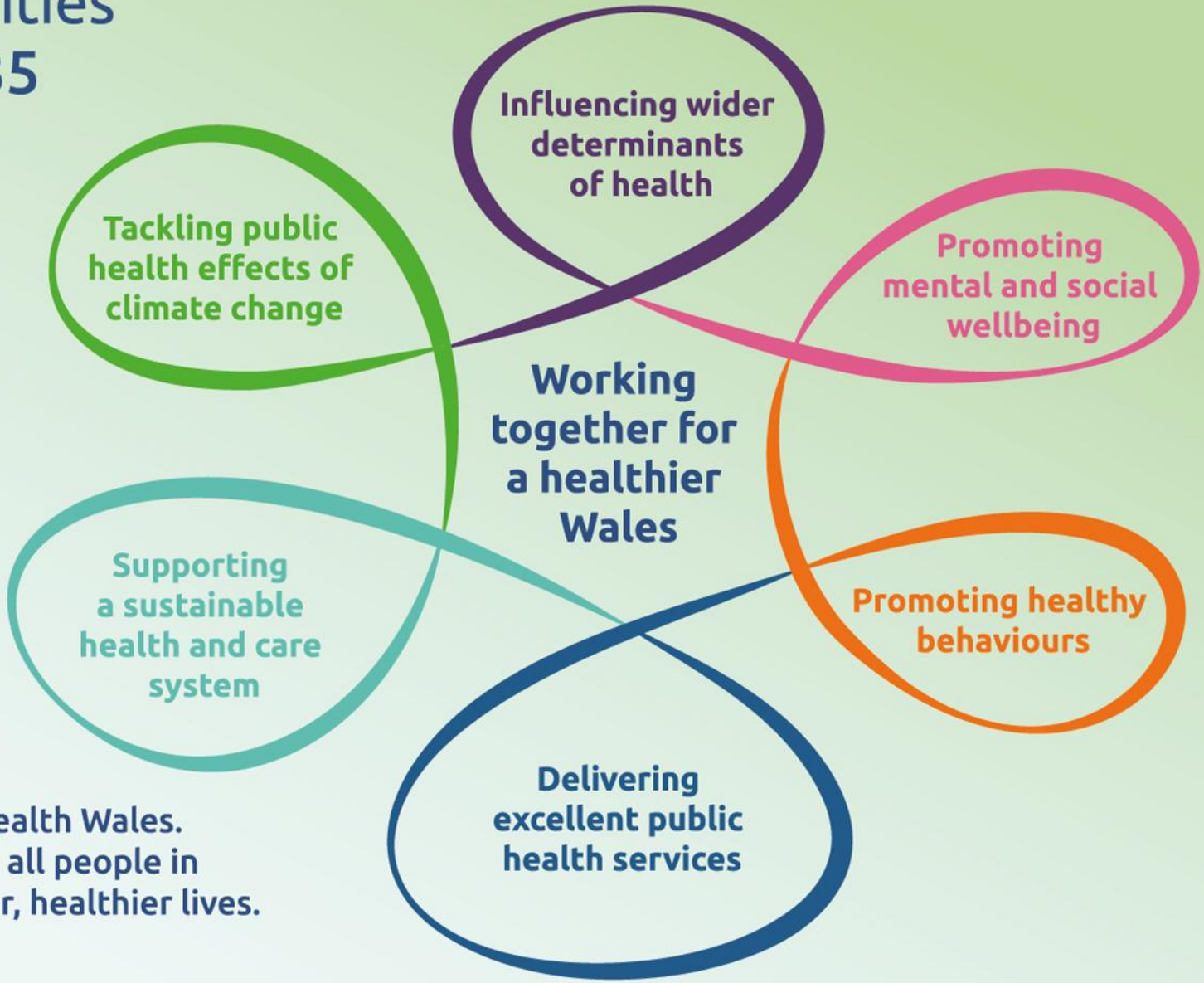
By 2035, we will have achieved a healthier future for Wales. We are working towards a Wales where people live longer, healthier lives and where all people in Wales have fair and equal access to the things that lead to good health and well-being.

1.4 Values

Our values are:

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

Our Priorities 2023-2035



We are Public Health Wales.
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GIG CYMRU NHS WALES
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Public Health Wales

2 Background

2.1. NHS Wales reforms (2009)

The NHS in Wales underwent major change in 2009, in light of the Welsh Government's One Wales Strategy. This determined that the delivery of the NHS in Wales needed redesigning to improve health outcomes and ensure that the NHS delivered care effectively with its partners.

As a result, seven health boards and three NHS trusts were established at that time. Health boards have specific geographical areas and their responsibilities include:

i. improving physical and mental health outcomes
ii. promoting well-being
iii. reducing health inequalities across their population
iv. commissioning services from other organisations to meet the needs of their residents.

The three NHS trusts operate on an All-Wales basis and are responsible for public health (Public Health Wales), ambulance services (Welsh Ambulance Service) and cancer and blood services (Velindre).

In addition, there are also two Special Health Authorities that have been subsequently established (Digital Health and Care Wales and Health Education and Improvement Wales) and a number of support organisations hosted by local health boards and trusts, such as the NHS Wales Shared Services Partnership.

2.2. Establishment of Public Health Wales

Public Health Wales was established in 2009, by the Minister for Health and Social Services, following a review of public health functions of national health organisations and units in Wales, which was undertaken in 2006. The formation of a unified public health organisation was announced on 30 September 2008. This set out the establishment of an independent NHS body that incorporated the functions from a number of pre-existing entities:

- Screening Services
- National Public Health Service for Wales (NPHS)
- Wales Centre for Health (WCfH)
- Welsh Cancer Intelligence and Surveillance Unit (WCISU)
- Congenital Anomaly Register and Information Service (CARIS)

This meant that, for the first time, an independent NHS body was created in Wales with a clear and specific public health remit to provide professionally independent public health advice and services.

2.3. Strategic developments and changes

Since 2009, Public Health Wales has grown considerably and the organisation has taken on, and internally developed, additional and new functions. This has included developments in the areas of:

- policy, research and international collaboration (reflected in our designation as a World Health Organization Collaborating Centre in Investment for Health and Well-being).
- data, knowledge and research with the establishment of a directorate specifically focused on maximising the use of digital, data and evidence to improve public health.
- our core public health services have developed significantly, particularly microbiology and health protection through investment during Covid-19, along with a number of strategic developments such as molecular diagnostics and whole genome sequencing, through our Pathogen Genomics Unit.
- Local Public Health Teams transferred to health boards in October 2022 and Improvement Cymru to the NHS Executive in March 2024.

3 Overview

3.1 Statutory functions

Public Health Wales protects and improves health and well-being and reduces health inequalities for the people of Wales. The Trust was established for the purpose specified in section 18(1) of the NHS (Wales) Act 2006 and has four statutory functions set out in Part 3 of its Establishment Order, these are to:

i. provide and manage a range of public health, health protection, healthcare improvement, health advisory, child protection and microbiological laboratory services and services relating to the surveillance, prevention and control of communicable diseases

ii. develop and maintain arrangements for making information about matters related to the protection and improvement of health in Wales available to the public in Wales; to undertake and commission research into such matters and to contribute to the provision and development of training in such matters

iii. undertake the systematic collection, analysis and dissemination of information about the health of the people of Wales in particular including cancer incidence, mortality and survival; and prevalence of congenital anomalies

iv. provide, manage, monitor, evaluate and conduct research into screening of health conditions and screening of health related matters.

3.2 Board and Executive Team

The Public Health Wales Board is a unitary Board and functions as a corporate decision-making body, with Executive Directors and Non-Executive Directors being full and equal members and sharing corporate responsibility for all decisions. It comprises a Chair, seven Non-Executive Directors (also known as Independent

members), all of whom are appointed by the Cabinet Secretary for Health and Social Services, and six Executive Directors, including the Chief Executive.

The Board has responsibility for:

- Setting the strategic direction
- Setting the governance framework
- Setting organisational culture and development
- Steering the risk appetite and overseeing strategic risks
- Developing strong relationships with key stakeholders and partners
- Successful delivery of Public Health Wales' aims and objectives.

In addition to their role as Board Members, Executive Directors also have responsibility for discharging Public Health Wales' corporate and public health functions.

Public Health Wales has five Board Committees:

- Audit and Corporate Governance
- Quality, Safety and Improvement
- People and Organisational Development
- Knowledge, Research and Information
- Remuneration and Terms of Service.

The Chief Executive (and Accountable Officer) of the organisation has responsibility for maintaining appropriate governance structures and procedures. The Chief Executive has established an Executive Team for the collective execution of delegated responsibilities (in addition to the delegated individual accountabilities and responsibilities that each Director in the Executive Team has with their respective portfolios).

You can view our Board meetings here.

3.3 Strategic partnerships

Partnership working is essential to the successful delivery of our strategy. We have established a number of strategic and operational partnerships over recent years to help us deliver our ambitions and core services. We recently undertook an assessment of our existing partnerships at a Board and Executive Team level. It showed that:

- we have relationships with over 40 organisations and 147 individuals at a Board (Chair/Vice Chair) and Executive Team level
- a significant number of our relationships are with Welsh Government (58)
- partnerships with some sectors appear lower than we might expect, such as the voluntary sector

- we have developed a number of formal partnership arrangements over recent years, particularly Memornada of Understandings with, for example, the Policing and Criminal Justice partners in Wales and Natural Resource Wales.

As part of the implementation of our new strategy, the board decided that we should identify a small number of strategic partnerships to help us successfully implement our strategy. The following definition was developed and agreed to guide the work:

'A strategic partnership is an arrangement where two or more organisations work together to deliver on areas of high strategic value to achieve mutually beneficial results.'

Following discussions, the Board agreed that we should initially establish strategic partnerships with the following bodies/organisations in 2024/25:

- Welsh Local Government Association (WLGA)
- Welsh Council for Voluntary Action (WCVA)
- Natural Resources Wales (NRW)
- Welsh Government (Chief Medical Officer and Senior Team)
- Health Boards through Directors of Public Health
- Commissioners in Wales:
  - Future Generations Commissioner
  - Welsh Language Commissioner
  - Children's Commissioner
  - Older People's Commissioner
- Partners in the other UK Public Health Agencies as appropriate
- World Health Organisation
- International Association of National Public Health Institutes
- Welsh Government Ministers
- Cabinet Secretary for Health and Social Care
- Minister for Mental Health and Early Years

3.4 Structure and size

Our core financial allocation for 2024/25 is £143.703m, which includes a recurrent COVID-19 allocation, and £2.851m strategic capital. We expanded in both our headcount and operating expenses during the Coronavirus pandemic, as a result of additional Welsh Government investment. This has largely been through capital and revenue business cases to the Welsh Government, focused on further strengthening our microbiology and health protection functions.

As part of the development of our financially balanced Strategic Plan (Integrated Medium Term Plan) for 2024 - 2027, we identified 2% efficiency savings against

total expenditure. This has been used to fund cost pressures and to reallocate resources towards strategic investment to help us deliver our strategy.

An overview of our organisational structure, as at April 2024, is provided in annex B. It sets out our current Executive Team structure and key functions. As an organisation, we have grown from 1,802 whole time equivalent (WTE) staff in 2019/20 to 1,971 (WTE) staff in March 2024 (excluding the NHS Executive as a hosted entity).

3.5 Our People

As at 30th April 2025, Excluding NHS Executive, Public Health Wales employees 2,197 staff:

- there is a higher proportion of females than males who work in our organisation (74% female vs 26% male).
- the greatest number staff are aged between 36-45 years old (28%), with the fewest number of staff being 20 years old or below (0.14%).
- out of those who disclosed their religious belief, Christianity makes up the greatest number of staff. However, staff also make up other religious beliefs such as Buddhism, Hinduism, Islam, Judaism and Sikhism.
- there are a greater number of staff who are White (80%), compared to Black, Asian Minority Ethnic staff (10%).
- there are less staff members who disclosed that they have a disability (8%) compared to those who do not have a disability (80%).

We have seven staff networks that aim to bring staff with shared characteristics (such as gender, race, cultural heritage, gender identity, sexual orientation, faith, age and disability) together in a safe space and offer a range of opportunities for their members. These include:

- **Enfys (LGBTQ+ Network)** provides a supportive, inclusive, safe and confidential space for all Lesbian, Gay, Bi, Trans, Non-Binary, Intersex, Queer, Ace, Aro and diverse people, and allies.
- **We Care (Carer's Network)** allows people to come together to get to know other carers in the organisation and share, discuss and think of ways that we can be a supportive workplace for those with caring responsibilities.
- **The Women's Network** seeks to engage with staff, and diversity networks, throughout the organisation to raise awareness, provide peer support, and champion issues which affect its members. The network has two key areas of focus, women's health (such as, period poverty and menopause) and women's safety.
- **The REACH (Race, Ethnicity and Cultural Heritage) Network** provides a safe and confidential environment for ethnic minority staff to meet other ethnic minority staff and share experiences, opinions, concerns and ideas.

- **Porffor (Disabled Staff Network and the Neurodiveristy Subgroup)** brings together staff with a visible or invisible disability, such as a physical impairment, mental ill health, developmental condition, or any other condition covered by disability legislation (either declared or undeclared) in an informal and relaxed way to share experiences to help each other reach their full potential.

- **Ymlaen (Welsh Language Network)** supports staff to learn and use their Welsh language skills, at whatever level they feel comfortable with.The network aims to promote and improve the use of the Welsh language across the organisation.

- **The Men's Network** provides a safe and trusting environment for conversations to take place, support and sign-post staff.

3.6. The NHS Executive

The NHS Wales Executive was established on 1 April 2023 and is hosted by Public Health Wales and managed and overseen by the Welsh Government. It is subject to a formal hosting agreement, which was signed by the Board. The decision to establish an executive function was first announced in A Healthier Wales in 2018, and then reconfirmed in the latest Programme for Government. This decision was based on the findings and recommendations of both the 2016 Organisation for Economic Cooperation and Delivery (OECD) Quality Review and the 2018 Parliamentary Review of the long-term future of Health and Social Care. Both reviews called for a stronger centre, additional transformation capacity and streamlining of current structures.

3.7. Covid-19 (including the UK Public Inquiry)

Public Health Wales played a key role in supporting the public, Welsh Government and multi-agency partners during Wales' response to Covid-19. We provided system leadership through the provision of specialist and expert public health advice, information, intelligence and support. This involved working with a range of partners within the UK and internationally, along with providing information to the public through a range of communication channels.

Our key responsibilities included:

- Providing public health advice to the Welsh Government to support the development of policy (e.g. Public Health Protection Response Plan and behavioural insights)

- Developing and disseminating surveillance and intelligence to the wider system (e.g. Covid-19 surveillance reports)

- Delivering key public health functions and services (e.g. health protection and microbiology outbreak response and management)

- Undertaking research, evaluation and international evidence analysis to inform policy and support the Wales's ongoing response in relation to the direct effects of the infection itself and the wider direct and indirect population harms as a result of the pandemic.

We also established internal management and governance arrangements to ensure that we were able to effectively respond to any requests from the UK Covid-19 Public Inquiry. This involved securing legal representation, establishing the processes and procedures for the development and response to any requests, the development of an archive for key documentation and ensuring arrangements were in place to support staff (both directly and indirectly impacted).

The Public Inquiry is ongoing and to-date we have been involved in providing documentary and witness evidence for the following modules:

- **Module 1** – Resilience and Preparedness
- **Module 2b** – Core UK Government Decision-making and Political Governance - Wales
- **Module 3** – Impact of Covid-19 Pandemic on Healthcare Systems in the Four Nations of the UK
- **Module 4** – Vaccines and Therapeutics
- **Module 5** – Procurement
- **Module 6** – Care Sector
- **Module 7** – Test, Trace and Isolate

Module 8 – Children and Young People. In 2022, a Board sub-group was established to provide advice and assurance to the Board on the arrangements and resources in place to ensure the appropriate organisational response to the UK COVID-19 Public Inquiry.

The group, which is chaired by the Board Chair, also makes decisions on whether an application should be made for Core Participant Status for each of the Inquiry modules. Meetings are held in private session and reported to the Board at the next formal meeting.

3.8. Emergency Planning

We are a Category 1 responder, as defined by the Civil Contingencies Act (2004), and therefore play a key role in relation to the preparation for, and response to, any emergency and major incident.

This requires us to meet a range of civil protection duties as set out by the Act (see section 8), including:

- assessment of risk to inform planning
- developing a Public Health Wales Emergency Response Plan
- putting in place business continuity management arrangements for Public Health Wales

- putting in place arrangements to make information available to the public about civil protection matters and maintaining arrangements to warn, inform and advise the public in the event of an emergency
- sharing information and co-operating with other local responders to enhance co-ordination.

Our most recent version of our Emergency Response Plan was approved by the Board in May 2023. The plan describes the organisation's roles and responsibilities in response to an emergency or major incident, as well as providing a framework for its activation and deactivation arrangements, command and control structures, and recovery arrangements. The Plan was tested (Exercise CYHYRAETH) was on 30 January 2024.

4. Strategy and priorities

4.1. Working Together for a Healthier Wales

Our strategy, 'Working Together for a Healthier Wales', was published in May 2023. It sets out our vision for achieving a healthier future for Wales by 2035. This was informed by significant public, stakeholder and staff engagement, along with the key public health challenges and opportunities facing Wales.

Our strategy sets out our response to these challenges through the delivery of our six strategic priorities (see below). It is essential to understand our progress towards our vision for a future where people live longer and healthier lives. As a result, we have identified the overarching health outcomes that we see to influence and support. This is:

- **To increase the healthy life expectancy and narrow the gap in healthy life expectancy between the least and most deprived.**

We work closely with a range of national and international partners, including networks, such as the International Association of National Public Health Institutes (IANPHI), to deliver our strategy. During 2023/24, the Board agreed a series of strategic partners that will be essential for us to work together on key collective issues and challenges. We will be formalising these arrangements in 2024/25.

4.2. Strategic priorities

Our six strategic priorities are:

- ***Influencing the wider determinants of health***

The wider determinants of health drive our health experiences in Wales and contribute not only to the inequalities gap, but to a substantial proportion of early deaths and ill health of the population. Public Health Wales will work at a national level, and with partners locally and internationally, to advocate, mobilise and inform action around the wider determinants through a prioritised programme of activity.

- ***Promoting mental and social well-being***

People who enjoy high levels of mental well-being will be better able to take steps to promote their own health and well-being. Our focus will be on the commercial determinants of health, psychological well-being, emotional intelligence and the formation of healthy relationships. We will focus our work on evidence for effective action to support policy, legislation and system-wide action, along with specific work on ACES and violence prevention.

❖ *Promoting healthy behaviours*

Our focus within this priority is on undertaking action to address the leading behavioural causes of early death and disability. This is informed by the evidence and data on the health of the people of Wales, along with supporting the delivery of Ministerial priorities and Welsh Government policy. Specific areas of focus will include tobacco, obesity and physical activity.

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

The health and care system is currently under severe pressure, and Public Health Wales has a key role to play in supporting the system in both the short and longer term. We will focus on supporting the transformation and embedding of prevention in primary care, utilising data and digital solutions to provide timely information and providing specialist healthcare public health support.

❖ *Delivering excellent public health services to maximise population health and health equity*

We will focus on the effective delivery of our core public health services, including national screening programmes, health protection and microbiology. In addition, we will continue to undertake our broader horizon scanning and management of health protection and environmental threats. We will also support the wider health and social care system through the provision of specialist public health support in relation to key issues, including vaccine prevention, healthcare associated infections and antimicrobial resistance.

❖ *Tackling the public health effects of climate change*

In 2021, the World Health Organisation declared climate change to be the single biggest threat facing humanity. Public Health Wales has a key role to play in relation to tackling the impacts of climate change on public health. We will do this through the provision of technical advice and support to partners, including behavioural science, surveillance, communications and policy.

4.3. Focus in 2025/26

Our Strategic Plan (otherwise known as our Integrated Medium Term Plan) was approved by our Board and submitted to Welsh Government in March 2025. It sets out the actions that we will undertake over the next three years to deliver our strategy and strategic priorities, which are set out above.

It includes action around key strategic areas :

- Implementation of key public health programmes, such as: Tackling Diabetes Together, Whole School Approach to Mental and Emotional Wellbeing and the Welsh Network of Health and Well-being Promoting Schools.
- Delivery of our core public health clinical services, including screening, microbiology and health protection
- Implementation of key strategic developments (subject to funding), including lung cancer screening and Digital Health Protection System Establish a climate change surveillance system to monitor climate risks and health impacts .
- Implementation of our Digital and Data transformation agenda, , including data migration, systems developments, and automation/Artificial Intelligence.
- Implementation of the Duty of Quality, our refreshed People Strategy and continued focus on service improvement.

As part of the development of our plans for 2025/26, we updated our strategic risks (see Annex C).

5. Directorates and key functions

5.1. Health Protection and Screening Services

- We deliver seven national screening programmes, and manage the Antenatal Screening Wales Clinical Network, to assist the early detection, prevention and treatment of disease. our focus includes ensuring that the programmes are delivered safely and to agreed quality standards, recovering programmes which were paused during Covid-19. In addition, we are focused on ensuring that key improvements are taken forward in line with UK NSC recommendations, such as continued optimisation of the bowel screening programme, and exploring methods to improve uptake and reduce the inequity of uptake.

- We protect the public from harm by providing information, advice and taking action to protect people from infection and environmental hazards. We do this through our Health Protection Division that provides both proactive and reactive specialist services in response to infectious disease and environmental threats on an all-Wales basis. Key teams include Environmental Public Health, Communicable Disease Surveillance Centre, Vaccine Preventable Disease Programme and Inclusion Health.

- The Emergency Preparedness Resilience and Response (EPRR) team supports and co-ordinates the organisation's business continuity arrangements and response to major incidents and emergencies by developing plans that are continually tested and exercised both within the organisation and with external response partners.

- We provide a Microbiology Network, including Specialist and Reference Microbiology Services, to support diagnostics, surveillance, and outbreak

identification and management. Our network delivers a comprehensive accredited diagnostic infection service for Wales focused on rapid near patient testing, where appropriate, supported by routine testing using modern technologies (approx. 1.7 million non-covid specimens per year).

- We are focused on innovation and delivering improved outcomes for the people of Wales, particularly through the delivery of our Public Health Genomics Programme.

- The Office of the Medical Director (OMD) supports doctors, dentists, and multidisciplinary specialists and practitioners in public health and infection, with respect to professional appraisal, revalidation and job-planning. The OMD facilitates and co-ordinates professional development for specialists and practitioners and support specialist trainees in public health and microbiology/infectious disease.

5.2. Health and Wellbeing

- **Health improvement:** providing information, advice and taking action across sectors to promote health, prevent disease and reduce health inequalities. This includes generating and assessing evidence, and advising and influencing policy (e.g. influencing legislation, policy and strategy affecting chronic disease prevention in key areas such as Tobacco, Obesity, Early Years, Education and Primary Care). We also develop, lead and mobilise the system, including through the design of national programmes, along with evaluating, improving and transforming key areas (e.g. Help Me Quit). In addition, we lead the national coordination of key public health interventions (e.g. NERS).

- **Primary, community and integrated care:** working alongside key partners we work to influence improvement in population health through primary care settings. We support our partners in the delivery of national plans for the transformation of primary and community care in Wales, develop coordinated approaches to prevention in primary and community care (e.g. All Wales Diabetes Prevention Programme) and support and lead oral health and dental service improvement in Wales.

- **Wider Determinants of Health Unit:** maximises the influence of the public health system on wider determinants of health. We do this by assessing, translating and communicating the evidence base, and developing networks and relationships of influence. In addition, we provide expertise, influencing policy and practice, contributing to research and demonstrating impact by pushing boundaries on translating theory into practice. The Unit co-ordinates a national programme working with Public Service Board entitled, 'Shaping Healthy Places for Wales', which is jointly funded with the Health Foundation. It also co-ordinates and leads the Public Health Network Cymru, which is a national network of over 2,500 people interested in public health across Wales.

5.3. Policy and International Health

- **The Polisi Team** generates, synthesises, and effectively communicates action-orientated, evidence-informed insight. We use this to advocate for policy making that protects and promotes the health and well-being of everyone in Wales, now and for future generations

- **The World Health Organization (WHO) Collaborating Centre on 'Investment for Health and Well-being' (WHO CC)** was designated in March 2018 and re-designated for another four years in March 2022. The Centre develops, collects and shares information and tools on how best to invest in better health, reduce inequalities, and build stronger and more resilient communities in Wales, Europe and Worldwide.

- **The Behavioural Science Unit (BeSci)** provides specialist expertise on behavioural science, and champions and enables the increasingly routine application of it, to improve and protect health and wellbeing, and reduce health inequities in Wales. The Unit supports stakeholders in the wider

public health system, to deliver a step change in improving health and wellbeing outcomes

- **The Welsh Health Impact Assessment Support Unit (WHIASU)** supports the development and effective use of the health impact assessment (HIA) approach in Wales through building partnerships and collaborations with different sectors.

- **The Public Health Economics & Value Team** aim to highlight the need for sustainable investment and development in health and well-being, with an emphasis on equity. The team focuses on health economics, wellbeing impact, value based public health, the well-being economy and foundational economy.

- **ACE Hub Wales** supports Welsh Society to help create an Adverse Childhood Experiences (ACE) Aware Wales and make Wales a leader in tackling, preventing and mitigating ACEs.

- Established in 2019, the Wales Violence Prevention Unit is a partnership between Public Health Wales, the South Wales Police and Crime Commissioner and South Wales Police.

- **The International Health Coordination Centre (IHCC)** is a unique whole-of-Wales programme of work, bringing together all Health Boards and NHS Trusts. It promotes and facilitates international health partnerships, serving as a focal point for information sharing, knowledge exchange, collaboration and networking across the UK, Europe and the world

- **The Health and Sustainability Hub** works to support Public Health Wales to embed sustainability and respond to the climate and nature emergencies.

- **Specialist Project Team** provides academic research expertise through a unique partnership with the Public Health Collaborating Unit at Bangor University. The team develops public health knowledge through population surveys, systematic reviews, evidence syntheses and evaluations.

- **Welsh Health Equity Status Report (WHESRi)** provides an up-to-date dynamic picture of health inequities, their burden, determinants and related policies in Wales, in order to inform solutions and investment prioritisation.

5.4. Research, Data and Digital

Our Resarch, Data and Digital Directorate supports public health across Wales by bringing together data, analysis, evidence, research and evaluation to drive understanding and improvements to public health through:

- Optimising data science, evaluation, research and knowledge capacity and capability to best support the organisation;
- Effectively discharging the statutory responsibilities in relation to health intelligence and official statistics;

- Establishing mechanisms to effectively mine, exploit and integrate data within the organisation and that held by other partners;
- Supporting key stakeholders in understanding the populations they service to inform universal and targeted improvements in health and well-being through population health intelligence, research and evidence;
- Developing and providing evidence of what works in an understandable and accessible way tailored to the audience;
- Establishing effective means to generate and disseminate knowledge;
- Providing system leadership to support the building of an effective and ambitious academic public health pipeline in Wales; and
- Building capacity and capability in data science, population health intelligence, research and evaluation.

5.5. Operations and Finance

- **The Communications Division** delivers a range of solutions to help the organisation achieve agreed communications outcomes. We do this through our four teams (Internal & Corporate, News & External Affairs, Public Campaigns & Planning, and Digital Communications) who provide professional expertise across a range of communications disciplines.
- **The Digital Services Division** supports the organisation in its IT and data services needs. It has the following teams – Information Technology, Development, Informatics & Data Services, and User Experience – and works to ensure the organisation has the right infrastructure, systems and cyber security in place to deliver its work.
- **The Estates Health and Safety Division** supports the development of environments that are fit for purpose and support new ways of working that are safe, improve well-being, are environmentally sustainable and provide value for money. We do this through supporting the organisation's estate, leading on management and compliance of the Health and Safety workplan and exploring opportunities to achieve our decarbonisation goals.
- **The Finance Division's** purpose is to ensure Public Health Wales' financial behaviours encourage, incentivise and add value by leading the organisational efficient framework to ensure continuous cost improvements; developing and maximising income potential for the organisation; and ensuring the five ways of working are embedded within the finance work programme.

The Strategy, Planning and Corporate Affairs Division leads the development and oversees the implementation of Public Health Wales' Long Term Strategy by ensuring the strategy is right and our plans are robust. We identify the change needed to achieve our strategy, and deliver key programmes through our PMO, and ensure it is designed, managed and planned effectively. We provide regular planning insights to give assurance and help make the right decisions.

5.6. People and Organisational Development

Our People and Organisational Development Directorate plays a critical role in enabling Public Health Wales to create a vibrant, inclusive, and healthy culture

where all our people are supported to thrive. We are committed to creating and nurturing a positive, flexible, and sustainable work environment.

Our aspiration is to be an exemplar organisation for wellbeing, where our staff are supported to ensure their experience of work enables them to be healthier, happier in work, and able to be at their best.

Our key aim is to enhance organisational effectiveness by continually improving the context in which people work at organisation, team, and individual levels.

5.7. Nursing, Quality and Integrated Governance

The Nursing, Quality and Integrated Governance (NQIG) Directorate enables, advises, collaborates and supports as subject matter experts in a variety of different areas. The Directorate consists of three Divisions: Quality & Nursing, Integrated Governance and the National Safeguarding Service.

The Quality and Nursing Division enable the organisation to make a difference in the areas of Quality, Patient Safety, Putting Things Right and Service User Experience and Engagement. Its Improvement and Innovation Hub supports the organisation with quality improvement and innovation projects large and small, embedding a culture of continuous improvement and learning. It also provides the Corporate Quality and Clinical Audit, Safeguarding and Infection, Prevention and Control functions for the organisation. Lastly it provides professional leadership for Public Health Wales's Nurses and Allied Health Professionals.

The Integrated Governance Division support the delivery of assurance to the Board, its committees, and the Executive Team that we are doing the right things, in the right way, for the right people. It provides professional support and advice on Information Governance, Risk Management and Records Management.

The National Safeguarding Service (NSS) is a team of designated safeguarding professionals in NHS Wales who provide expertise, standardised practice, national training, and specialist guidance to colleagues, multi-agency organisations and government to ensure that children, young people and adults are protected from abuse, neglect and avoidable harm. The NSS coordinates NHS Wales Safeguarding Network– a strategic NHS Wales group including members from Trusts and Health Boards, Welsh Government and other key stakeholders. The Network provides a platform for a 'community of practice', a rich environment for collaboration, learning and creating new knowledge, horizon scanning, sharing challenges, problem solving, innovation and sharing best practice, linking local and national policy to develop a collaborative approach to improving safeguarding delivery across the NHS in Wales.

5.8. Board Business Unit

Our Board Business Unit supports the Board, Board Committees, the Executive Team and the Leadership Team to ensure organisational compliance with our corporate governance functions and responsibilities.

As well as providing a full suite of secretariat support to our full range of governance meetings, the Unit also provides administrative support, diary management support, develops workplans, tracks actions/audit responses, manages policy reviews and oversees evaluation of governance performance at all levels.

The Unit is also responsible for maintaining the Board Assurance Framework, for coordinating Declarations of Interest for all Public Health Wales staff and for overseeing the updating of Policies and Procedures to ensure staff have up to date information to allow them to discharge their duties.

6. Key achievements

We have delivered a number of major achievements over recent years aimed at supporting and enabling system-wide public health improvements. These have included:

- Publication of our strategy, '*Working Together for a Healthier Wales'* in May 2023, along with a series of underpinning enabling strategies focused on our people, digital and data, research and evaluation, and international health.
- Re-designation of the World Health Organization Collaborating Centre on Investment for Health and Well-being.
- Our Infection Service supported NHS Wales by processing over 1.6m samples in 2022/23.
- Launched the Respiratory Syncytial Virus (RSV) vaccine programme across Wales
- Our Pathogen Genomics Unit achieved 200k COVID-19 genome sequencing and UKAS 15189 accreditation in 2021/22, along with developing new services covering Mpox, Respiratory Syncytial Virus (RSV), and Antimicrobial Resistance (AMR) bacteria.
- Time to Talk Population Panel established enabling regular public engagement in a range of topics and launch of the Welsh Health Equities Platform..
- Review of the Prevalence of Disease in Wales, which has been presented to a range of ministers and partners and is now the focus of our Tackling Diabetes Together Programme.
- Launched of our Behavioural Sciences Unit focused on building behavioural science skills, capacity and resources through community of practice, developing tools, workshops and tailored support.

- Opened the first screening centre on a high street in Mountain Ash to help boost accessibility and uptake of screening, along with continuing to delivery of screening programme recovery plans following COVID-19.

- Ongoing successful responses to declared outbreak(s), along with publication of our new Emergency Response Plan, applying lessons identified from the COVID-19 response, along with establishing a 24/7 on-call service.

- Exercise CYD was held on the in March 2024 to test the Communicable Disease Outbreak Plan for Wales.

Annex A – Board Pen Pictures

	Pippa Britton OBE PLY is the Chair of Public Health Wales, a position she has held since 1st December 2024. Prior to this, Pippa was the Vice Chair of Aneurin Bevan University Health Board. Pippa is a double Paralympian who competed on the Welsh and GB archery teams for 15 years and achieved podium places at six World Championships and 24 international events. Whilst competing, she also was a coach and mentor to development squad athletes and became the first para-archery athlete committee member at World Archery, representing archers from across the world. Pippa has continued to contribute to sport in Wales, with a real passion for the contribution she can make, both to sport as well as the wider community in Wales. In 2023, Pippa was awarded an OBE for her services to sport. Pippa has served as the Chair of Disability Sport Wales, the Vice-Chair of Sport Wales, the Vice-Chair of UK Anti Doping and as a Charity Commission Wales Board Member.
 **Nick Elliott** Interim Chair and Non-Executive Director (Digital and Data)	**Special interest areas:** Data and digital Nick Elliott is currently the Chair of the Audit and Corporate Governance Committee at Public Health Wales. Nick has his own management consultancy specialising in Digital in Healthcare. Nick brings a wealth of experience from the public and private sector. As the first Board level CIO in the English NHS, he pioneered electronic observations and mobile devices by the bedside. He successfully made the transition to Chief Operating Officer in the hospital sector, transforming the performance at a number of NHS trusts by bringing people and data together. He brings over 15 years of Board level experience in the English NHS as well as previous manufacturing experience. Following his time in the NHS, he bought into an innovative clinical apps company which he grew and sold to a major UK EPR provider. Nick moved to consultancy as a partner in one of the UK's leading Digital Health consultancies where he advised the Welsh Government, health boards and trusts on strategies and operating models. Nick now operates from his own consultancy supporting healthcare innovators and providing strategic advice to NHS Boards, large transformation programmes and delivering organisational reviews. Having started his career as an analyst Nick is still passionate about using data to help drive improvements in health and care.

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 **Clare Jenkins** Non-Executive Director and Vice Chair of the Board	Clare Jenkins is the Vice-Chair of Public Health Wales, a post she has held since 1 May 2024. Clare joined Public Health Wales following five years in Welsh Government as Special Adviser for Health and Social Services. During that time, Clare supported ministers across all areas of government business and policy development that related to health and care. Clare has previously worked at a senior level in membership organisations representing the interests of staff and users of health services most recently as Chief Executive at the Board of Community Health Councils (CHCs).
 **Sian M Griffiths *CBE*** Non Executive Director	**Special interest areas:** Public health Professor Sian M Griffiths CBE, is Chair of the Knowledge, Research and Improvement Committee at Public Health Wales. Throughout her career, Sian has blended academic and service work in public health with a diversity of national and global roles. A former President of the UK Faculty of Public Health until 2005 Sian's career was as a UK based public health physician with a wide range of experience at both executive and non-executive level. She is currently Emeritus Professor of Public Health at the Chinese University of Hong Kong, Visiting Professor at Imperial College London, Associate Director of Public Health England, and Chair of GambleAware.
 **Kate Young** Non Executive Director	**Special interest areas:** Third sector Kate Young is Chair of the People and Organisational Development Committee at Public Health Wales. Kate is the Director of the All Wales Forum of Parents and Carers, the national network for family carers of people with learning disabilities, engaging with over 4,000 families across Wales. She holds the Chair for Wales Carers Alliance, is the Health and Social Care representative for the Third Sector Partnership Council and sits on the Ministerial Advisory Groups for both Carers and People with a Learning Disability. She also serves on Government policy groups covering National Frameworks for Health and Social Care, Public Health, Regional Partnerships, Inspection, Safeguarding and Disability Rights. Kate is also a Wales Committee member for the National Lottery Community Living Fund and for five years was the Wales Trustee for the Family Fund UK. Kate has a sound understanding of the devolved administration in Wales and the health, social, cultural and economic opportunities and challenges it presents. She has a strong commitment to the Third sector and the power of community engagement, believing it's unique and diverse nature, when brought together with partners, is a real force for change and innovation. She is a passionate advocate of rights and personal choice, with a particular interest in learning disability and carers. As a sibling carer to her brother who lives with severe learning disabilities and autism, she has a personal understanding and lived experience of the social model of disability and of the wider inequality issues within society in Wales.

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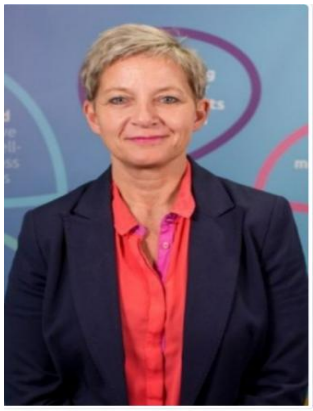
 **Tamsin Ramasut** Non Executive Director (Equality and Diversity)	**Special interest areas:** Equality and diversity Tamsin Ramasut is a partner in MELA Cymru, the Welsh arm of MELA Social Enterprise, with more than 20 years' experience spanning both the private and public sectors domestically and internationally. Tamsin worked in community development and housing on a £200 million housing regeneration scheme in Tower Hamlets, London. Prior to that she spent 4 years at University College London as a researcher and consultant focusing on a model for urban sustainable livelihoods which is now widely adopted internationally and within the UK. A fluent Welsh speaker, Tamsin returned to her native Wales in 2010, and became a restaurateur, establishing and managing two thriving restaurants in Cardiff.
 **Dr. Tracey Cooper** Chief Executive	Dr Tracey Cooper OBE is the Chief Executive of Public Health Wales. Tracey has significant experience nationally and internationally in public health, health and social care regulation and health system reform. She has extensive experience in working with partners across organisational boundaries to develop strong, effective and purposeful relationships to transform outcomes for the population. She also works closely with Cabinet Secretaries / Ministers and senior officials at a national and international level, across the breadth of Government and has been actively involved in global health for over twenty years. This has included working closely with the WHO, International Association of National Public Health Institutes (IANPHI), the Commonwealth Secretariat, the InterAction Council, as President of the International Society for Quality in Health Care and advising Governments in a range of countries. Tracey became an Executive Board member of IANPHI in January 2024.
Angela Williams – Interim Executive Director of Operations and Finance	Angela joined the organisation on a 2-year secondment to the role of Deputy Director of Finance and Head of Finance in Public Health Wales in October 2017. This opportunity was part of NHS Finance Academy Talent Pipeline programme to nurture talent and work differently to provide development opportunities. In January 2019, Angela was appointed to this role on a permanent basis. Then in September 2021, Angela took on the additional responsibility of becoming the Deputy Director of Operations and Finance Directorate. Angela is an enthusiastic, motivated and dedicated senior finance professional with over 36 years NHS experience. CPFA Qualified in 2003, and has held numerous finance positions across the range of finance functions in West Glamorgan Health Authority, Iechyd Morgannwg Health, Bro Morgannwg NHS Trust, ABM NHS Trust and ABMU Heath Board

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 **Claire Birchall** Executive Director Quality and Nursing	Claire Birchall is the Executive Director of Nursing, Quality and Integrated Governance. Claire joined from the NHS Executive where she led the Wales Cancer Network and was also the Professional Lead Nurse for the NHS Collaborative. Claire has worked in healthcare for more than 33 years and is a graduate of Nottingham and Swansea Universities. Claire has worked her entire career in Wales undertaking specialist nursing, senior nursing, leadership, general management and director positions in three of the largest Health Boards in Wales, including key leadership and Gold positions during COVID. Claire moved to Public Health Wales to support the leadership of the Long-Term Vision and Strategy for public and population health in Wales, at a time of such challenge and hardship for our population. Having spent most of her career in the secondary and tertiary end of health provision, she is keen to be able to influence the prevention, health promotion and early intervention agenda, focusing on those critical long-term changes which will influence health and well-being now, and for our future generation. Claire has a particular interest in supportive and compassionate leadership, and the opportunity that offers to our colleagues, our effectiveness, and the population we serve. A key champion for equity and justice, Claire is really excited about the opportunity to lead her own profession and valued Allied Health Professionals in this challenging agenda. Claire is a proud Registered Nurse and describes herself as being "as passionate and dedicated to person-centered care, outcomes and experience as the day I started my nursing training."
 **Dr. Fu-Meng Khaw** National Director of Health Protection and Screening Services and Executive Medical Director	Professor Meng Khaw joined Public Health Wales in 2021 and has oversight for the delivery of screening, microbiology and health protection services as well as professional oversight for doctors and public health specialists. He is a qualified surgeon and public health specialist, and has worked as a Consultant in Communicable Disease Control in the Health Protection Agency, Director of Public Health jointly appointed by North of Tyne Primary Care Trust and North Tyneside and Newcastle City Councils, and most recently, Centre Director for the East Midlands in Public Health England. Meng is Chair of the Final Membership Examiners for the Faculty of Public Health and holds an Honorary Fellowship with the Birmingham Leadership Institute and an Honorary Associate Professorship with the University of Leicester.

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 **Sumina Azam** National Director of Policy and International Health, World Health Organization Collaborating Centre	Dr. Sumina Azam provides leadership for the Policy and International Health Directorate, a World Health Organization Collaborating Centre on 'Investment for Health and Well-being'. The Directorate supports the development of, and advocates for policies to improve health and well-being and reduce inequity in Wales and globally through developing, collecting and sharing information and tools on how better to invest in better health, reduce inequity and build stronger and more resilient communities in Wales and worldwide. The Policy and International Health Directorate has a broad portfolio of work including international health, public health policy, public health economics and value, behavioural science, health and sustainability, health impact assessment, public health research, adverse childhood experiences and violence prevention. Prior to her current role, Sumina was the Policy Lead and Deputy Director in the Policy and International Health Directorate, Public Health Wales. Previously, she has worked as a Consultant in Public Health and Interim Director of Public Health in the Powys Local Public Health Team, Specialist Registrar in Public Health in the East Midlands and has trained in general medicine. Sumina's areas of interest are tackling health inequity through policy levers, sustainable development, and the determinants of health such as housing and working in partnership across sectors. She is currently a Board member and Vice-President of EuroHealthNet.
 **Neil Lewis** Director - People and Organisational Development	Neil Lewis is a Chartered Fellow of the Chartered Institute of Personnel and Development (FCIPD), who has worked in the public sector for over 25 years including in policing and Local Government. He cares passionately about making a difference for the communities we serve. Neil gained a degree in Business Studies and MSc in Human Resource Management at the University of Glamorgan and has significant experience in all areas of Human Resources and Development practice. Neil joined Public Health Wales in September 2019 as the Deputy Director of People and Organisational Development, prior to this he spent the previous four years with Gwent Police. In April 2021, Neil was appointed as the Director of People and Organisational Development.

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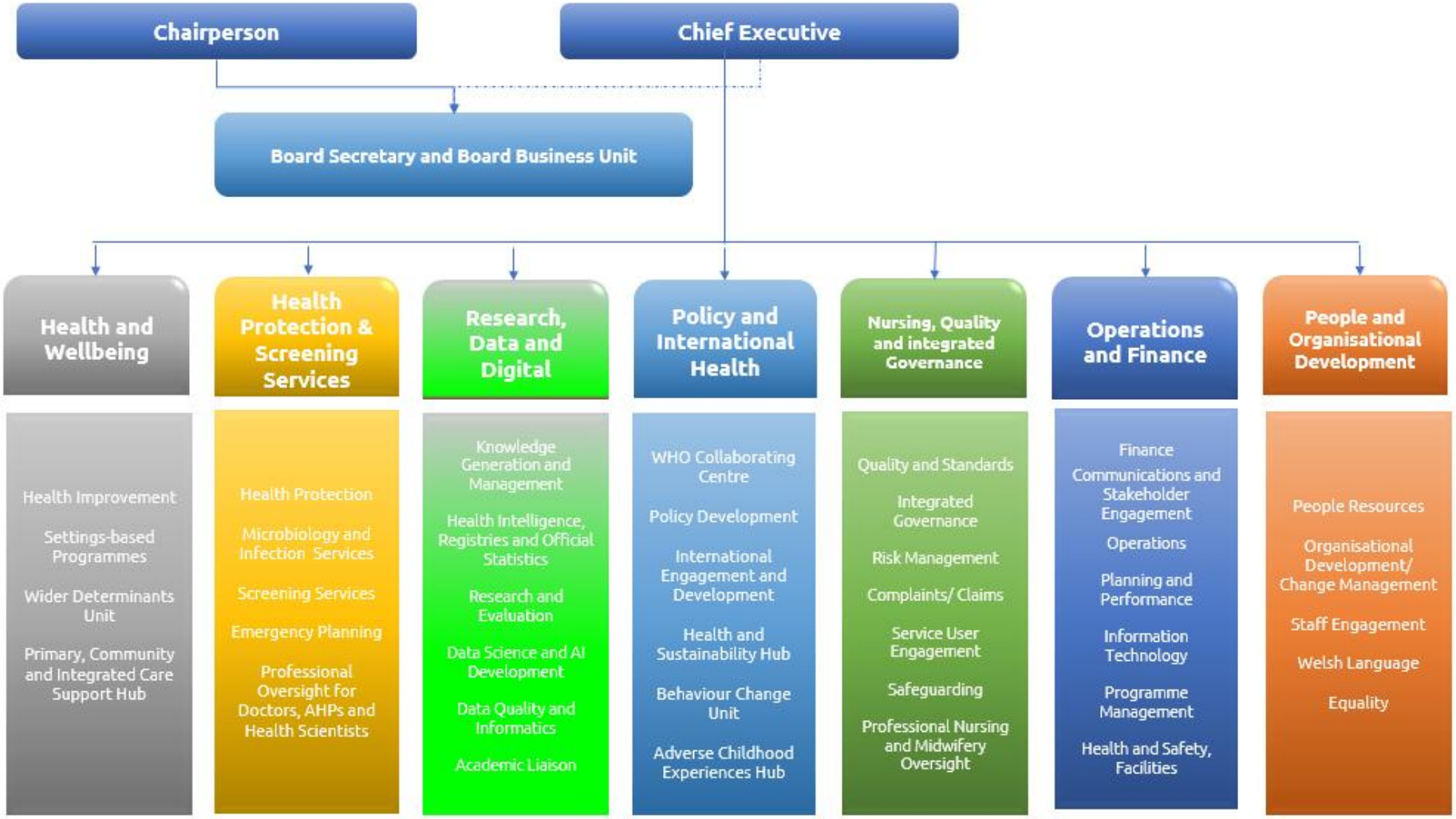
 **Iain Bell** National Director for Public Health Knowledge and Research	Iain Bell joined the organisation in July 2021 from the Office for National Statistics where, as Deputy National Statistician for Population and Public Policy, he was responsible for delivering the 2021 Census in England and Wales. Having spent most of his career working on the wider determinants of health he says he feels at home here at Public Health Wales. Iain's role encompasses data, knowledge and research and he brings his experience working through the pandemic at the ONS to this post and here will further develop the public's appetite for innovative data sources, real-time information and awareness of public health.
 **Jim McManus** National Director Health and Wellbeing	Professor Jim McManus joined Public Health Wales in 2023 and has oversight of programmes across Wider Determinants, partnership working, Primary Care, Health Improvement, Dental Public Health, Mental Health and Wellbeing, Diabetes and Healthcare Public Health. Jim is a Chartered Psychologist, Chartered Scientist and Fellow of the British Psychological Society in addition to being a registered Public Health specialist and Fellow of the Faculty of Public Health. He held a Health Foundation Generation Q Fellowship and undertook a postgraduate leadership qualification at Ashridge Hult Business School. Before joining Public Health Wales Jim was Executive Director of Public Health for Hertfordshire and President of the UK Association of Directors of Public Health and before that was Joint Director of Public Health for Birmingham. He has worked on primary care, cardiac and stroke care, public mental health, drugs and alcohol, HIV and sexual health. He was national lead for ADPH on drugs and alcohol, mental health and suicide for over five years and has served as Deputy Chair of the National Institute of Health Research Public Health Programme Advisory Board.
 **Paul Veysey** Board Secretary and Head of the Board Business Unit	Paul Veysey joined Public Health Wales in April 2023 as the Board Secretary and Head of the Board Business Unit. Having trained in his home city of Cardiff, Paul Veysey qualified as a solicitor in 2004 and worked in private practice, progressing to salaried partner in 2011, before joining Legal and Risk Services in 2019. As a solicitor, Paul has significant experience of public sector / NHS litigation, governance and regulatory disputes, having provided a range of legal services to public bodies in England and Wales over a number of years.

ANNEX 1

Annex B – Structure and functions



Annex C –Strategic Risks

Risk of: Widening gap in healthy life expectancy of population of Wales **Due to:** Cumulative effects of socio-economic, environmental and wider public health challenges Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 1) Influencing the wider determinants of health **[Keen]** 3) Promoting Healthy Behaviours **[Willing]** 5) Delivering excellent public health services to protect the public and maximize population health outcomes . **[Accepting]**
Risk of: Worsening health outcomes for the population of Wales **Due to**: misaligned system-wide efforts and leadership and weaknesses in partnership working Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 1) Influencing the wider determinants of health [**keen**] 2) Promoting Mental and Social Well-being [**willing**] 3) Promoting Healthy Behaviours [**willing**]
Risk of: The organisation failing to effectively engage with the public in relation to their health and wellbeing. **Due to**: Failure to build relationships with stakeholders, communities, and our service users; not having or utilising tools and resources to support engagement; a lack of workforce commitment, skills and capacity; and failure to monitor and evaluate the impact of engagement. Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 1)Influencing the wider determinants of health (**Keen)** 2) Promoting mental and social well-being **(Willing)** 3) Promoting healthy behaviours **(Willing)** 4)Supporting the development of a sustainable health and care system focused on prevention and early intervention (**Willing)** 5)Delivering excellent public health services to protect the public and maximise population health outcomes (**Accepting)**
Risk of: Worsening organisational health **Due to**: Lack of effective organisational leadership and governance, progress towards ideal culture, ability to engage employees. **Impact:** Inability to recruit and retain high calibre staff, performance manage accountable officers in pursuit of strategic priorities, low staff morale and wellbeing. Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 3) Promoting healthy behaviours **[Willing]**
Risk of: Failure to deliver excellent public health services on screening, infection, health protection and Emergency Preparedness Resilience and Response (EPRR) and comply with the Duty of Quality **Due to**: Weakness in systems and processes, specialist workforce capacity and capabilities and innovative practice. Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 4) Supporting the development of a sustainable health and care system focused on prevention and early intervention (**Willing)** 5) Delivering excellent public health services to protect the public and maximise population health outcomes (**Accepting)**

Risk of: Disruption to services and/or loss of confidential data in conjunction with a failure to exploit appropriate data to inform relevant public health actions.
Due to: Cyber incident, other external factors, weaknesses in systems and processes, silo working and lack of strategic oversight of data outputs.

Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level:
4) Supporting the development of a sustainable health and care system focussed on prevention and early intervention. **[willing]**
5) Delivering excellent public health services to protect the public and maximise public health outcomes. **[accepting]**

Risk Reference (new)	New Risk Descriptor
SRR1	**There is a risk that**: We fail to deliver our role to influence a system shift to prevention, reduce health inequalities and address determinants of health. **Caused by:** • Poor alignment of PHW specialist resources, capabilities and programmes with our long-term strategy • Failure to generate the quality of evidence and supporting data to shape our influencing and delivery • Insufficient/Ineffective public health advice, evidence and action *within our remit* • Ineffective engagement with and communication to partners, the public and policymakers • Insufficient system leadership and co-ordination with stakeholders and partners • Programmes which do not support our population in achieving healthier lives **Resulting in:** We fail to have the impact required to reverse the worsening healthy life expectancy of the population of Wales. Wales fails to close widening gaps in health outcomes between our most and least deprived populations.
SRR2	**There is a risk that:** The organisation could experience poor organisational health. **Caused by:** • Failure to develop our people • Ineffective organisational leadership • Poor governance, lack of strategic workforce planning to achieve the required capability and capacity of our people • Lack of a clear and consistent vision of our inclusive organisational culture • Capability and complexity in relation to significant programmes of change to meet IMTP deliverables. **Resulting in:** a poor organisational culture with

	insufficient capability and capacity to perform and deliver.
SRR3	**There is a risk that**: We fail to deliver our contribution to excellent public health services in population health screening, infection, health protection and emergency response. **Caused by**: • Weakness in clinical governance, clinical and administrative systems and processes, service planning and operational delivery. • Inability to maintain capacity and capability of the specialist workforce. • Absence of innovation and continuous quality improvement. • Exceedance in unplanned activities arising from unexpected acute threats to health. **Resulting in:** Poor quality and unsafe services, sub-optimal population health outcomes for population screening and health threats, and a breach of legal duties on Civil Contingencies and Duty of Quality.
NEW RISK **SRR4**	**There is a risk that**: we fail to effectively mitigate the public health impacts of climate change on the Welsh population **Caused by**: • Failure to identify and monitor climate change threats to health • Failure to effectively inform actions of partner organisations and policymakers so that health is considered as part of their climate action • Failure to effectively engage with our population, partner organisations and policymakers • Failure to prioritise resources to actions that make a measurable difference to the health of our population • Insufficient leadership in Wales to achieve a joined up and aligned system response to climate change. • Failure to take co-ordinated actions with partner organisations across the UK 4 Nations and advocate for UK climate policies that protect and promote health **Resulting in:** Failure to prevent harm to the health of our population as a result of climate change, resulting in worse health outcomes and widening of health inequalities.
SRR5	**There is a risk that:** The organisation suffers loss of sensitive information and/or disruption to services.

	Caused by: • Cyber incidents • other external factors, • weaknesses in systems and processes, • silo working and lack of strategic oversight of data outputs. **Resulting in**: Poorer Public Health Outcomes, disrupted services and loss of trust in Public Health Wales.
NEW RISK **SRR6**	**There is a risk that:** we fail to fully exploit digital and data fully to improve public health in Wales. **Caused by:** • dependencies on other partners for delivery of systems and providing access to the data we need • capacity and capability within PHW and external partners. • lack of digital and data literacy within PHW as a whole **Resulting in:** poorer public health outcomes for the population of Wales