

# Section 2

# Accountability Report

# Section 2: Accountability Report

## Contents

### Accountability Report Introduction

#### Part A: Corporate Governance Report

- ❖ Director's Report
- ❖ Statement of Chief Executive's Responsibilities as Accountable Officer
- ❖ Statement of Director's Responsibilities in Respect of the Accounts
- ❖ Annual Governance Statement

#### Part B: Remuneration and Staff Report

#### Part C: Parliamentary Accountability and Audit Report

- ❖ The Certificate and Independent Auditor's report of the Auditor General for Wales to the Welsh Parliament

## Introduction

The Accountability Report is part of a collection of reports, which form the Public Health Wales's Annual Report and Accounts.

The Accountability Report is intended to demonstrate how we have met the key accountability requirements to the Welsh Government.

The requirements of the accountability report are based on the matters required to be dealt with in a Directors' Report, as set out in Chapter 5 of Part 15 of the Companies Act 2006 and Schedule 7 of SI 2008 No 410, and in a Remuneration Report, as set out in Chapter 6 of the Companies Act 2006 and Schedule 8 of SI 2008 No 410.

The Accountability Report consists of the following main parts:

### **Part A: The Corporate Governance Report:**

This Corporate Governance Report explains the composition and organisation of our governance structures and how they support the achievement of Public Health Wales objectives.

### **Part B: The Remuneration and Staff Report:**

The Remuneration and Staff Report contains information about senior managers' remuneration. It details salaries and other payments, our policy on senior managers' remuneration and whether there were any exit payments or other significant awards to current or former senior managers. In addition, it also contains staff information with regards to numbers, composition, and sickness absence, together with expenditure on consultancy and off payroll expenditure.

### **Part C: Parliamentary Accountability and Audit Report:**

The Parliamentary Accountability and Audit Report provides information on such matters as regularity of expenditure, fees and charges, and the Certificate and Independent Auditor's report of the Auditor General for Wales to the Welsh Parliament.

# Part A: Corporate Governance Report

## Public Health Wales Directors' Report 2023/24

In accordance with the Financial Reporting Manual (FRM), the Directors' Report must include the following, unless disclosed elsewhere in the Annual Report and Accounts (ARA) in which case a cross-reference is provided:

Requirement	Cross-Reference
The names of the Chair and Chief Executive, and the names of any individuals who were directors of the entity at any point in the financial year and up to the date the ARA was approved.	See Appendix 1 in the Annual Governance Statement.
The composition of the management board (including advisory and non-Executive members) having authority or responsibility for directing or controlling the major activities of the entity during the year.	See Appendix 1 in the Annual Governance Statement.
The names of the directors forming an audit committee or committees.	See Appendix 1 in the Annual Governance Statement.
Details of company directorships and other significant interests held by members of the management board, which may conflict with their management responsibilities. Where a Register of Interests is available online, a web link may be provided instead of a detailed disclosure in the annual report.	See the <a href="#">Register of Interests 2023/24</a>
Information on personal data related incidents where these have been formally reported to the Information Commissioner's Office. Reporting of personal data related incidents including "serious untoward incidents" involving data loss or confidentiality breaches and details of how the risks to information are managed and controlled.	See <a href="#">Section 9.9</a> of the Annual Governance Statement.
Information on environmental, social and community issues.	See <a href="#">Section 11.6</a> of this the Annual Governance Statement.
As a public sector information holder, Public Health Wales has complied with the cost allocation and charging requirements set out in HM Treasury guidance.	

## Statement of Chief Executive's Responsibilities as Accountable Officer

The Welsh Ministers have directed that the Chief Executive should be the Accountable Officer of Public Health Wales.

The relevant responsibilities of Accountable Officers, including their responsibility for the propriety and regularity of the public finances for which they are answerable, and for the keeping of proper records, are set out in the Accountable Officer's Memorandum issued by the Welsh Government.

The Accountable Officer is required to confirm that, as far as he or she is aware, there is no relevant audit information of which the entity's auditors are unaware, and the Accountable Officer has taken all the steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the entity's auditors are aware of that information.

The Accountable Officer is required to confirm that the annual report and accounts as a whole is fair, balanced, and understandable and that they take personal responsibility for the annual report and accounts and the judgments required for determining that it is fair, balanced and understandable.

The Accountable Officer is responsible for authorising the issue of the financial statements on the date they were certified by the Auditor General for Wales.

To the best of my knowledge and belief, I have properly discharged the responsibilities set out in my letter of appointment as an Accountable Officer.

**Signed:**

Chief Executive

Date: xx/xx/xxxx

## Statement of Directors' Responsibilities in Respect of the Accounts

The Directors are required under the National Health Service Act (Wales) 2006, to prepare accounts for each financial year. The Welsh Ministers, with the approval of the Treasury, direct that these accounts give a true and fair view of the state of affairs of the Public Health Wales and of the income and expenditure of Public Health Wales for that period.

In preparing those accounts, the Directors are required to:

- ❖ Apply on a consistent basis accounting principles laid down by the Welsh Ministers with the approval of the Treasury.
- ❖ Make judgements and estimates which are responsible and prudent.
- ❖ State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the account.

The Directors confirm that they have complied with the above requirements in preparing the accounts.

The Directors are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the authority and to enable them to ensure that the accounts comply with the requirements outlined in the above-mentioned direction by the Welsh Ministers.

### By Order of the Board

#### Signed:

Chair:	(Add signature once approved)	Xx/xx/xxxx
Chief Executive:	(Add signature once approved)	Xx/xx/xxxx
Director of Finance:	(Add signature once approved)	Xx/xx/xxxx

*\*Nick Elliott signs in his capacity as Interim Chair of the Board following the departure of Jan Williams as Chair on 31st May 2024*

# Annual Governance Statement

## Contents

❖ 1.	Introduction.....	76
❖ 2.	Scope of Responsibility .....	76
❖ 3.	Governance Framework .....	77
3.1	The Board .....	80
	Variations to the Standing Orders .....	81
3.2	Board Activity .....	83
3.1.3	Board Development and Briefing Sessions .....	90
3.2	Committees of the Board.....	93
3.2.1	Audit and Corporate Governance Committee.....	96
3.2.2	Quality, Safety and Improvement Committee .....	99
3.2.3	People and Organisational Development Committee	103
3.2.4	Knowledge, Research and Information Board Committee	106
3.2.5	Remuneration and Terms of Service Committee .....	109
3.2.6	UK COVID-19 Public Inquiry Preparedness Sub-Group	109
3.2.6	Young Ambassadors Board Partnership Forum .....	113
3.3	Executive Governance.....	114
3.3.1	Business Executive Team .....	114
3.5	Board and Executive Team Membership .....	117
3.5.1	Departure and appointment of Non-Executive Directors	117
3.5.2	Board Succession Planning .....	118
3.5.3	Senior Staff Appointments and Departures .....	118
3.5.4	Staff Representation at Board and Committee Meetings	120
3.5.5	Board Diversity and Inclusion .....	120
❖ 4.	Improvements to the Governance Framework.....	121
4.1	Review of the Board Committee Terms of Reference	121
4.2	Performance and Effectiveness Cycle .....	121
4.3	Protocol for Reserving Matters to Private Session ...	124
4.3	Development of the Board Assurance Framework ...	124
❖ 5.	The Purpose of the System of Internal Control.....	127
5.1	Capacity to Handle Risk.....	127
❖ 6.	Quality Governance Arrangements.....	133
6.1	Quality Governance .....	133
6.2	Duty of Quality.....	134
6.3	Duty of Candour.....	135
6.4	Information Governance.....	136

6.5	Health and Care Standards .....	138
6.6	Health and Safety .....	139
7.	Long Term Strategy: Working to Achieve a Healthier Future for Wales (2030) .....	141
❖ 8.	Our Strategic Plan (Integrated Medium Term Plan) .....	143
❖ 9.	Mandatory Disclosures .....	144
9.1	Equality, Diversity and Human Rights .....	144
9.2	Welsh Language .....	145
9.3	Handling Complaints and Concerns .....	145
9.4	Freedom of Information Requests .....	146
9.5	Subject Access Requests .....	146
9.6	Sustainability and Carbon Reduction Delivery Plan .....	146
9.7	Emergency Planning/Civil Contingencies and Business Continuity 149	
9.9	Data Breaches .....	153
9.10	UK Corporate Governance Code .....	154
9.11	NHS Pensions Scheme .....	154
9.12	Ministerial Directions .....	155
❖ 10.	Hosted Bodies – NHS Executive .....	167
❖ 11.	Staff and Staff Engagement .....	169
❖ 12.	Review of Effectiveness .....	170
12.1	Internal Audit .....	170
12.2	Counter Fraud .....	172
12.3	External Audit – Audit Wales .....	173
13.	Conclusion .....	174

## 1. Introduction

Public Health Wales is required to provide an Annual Governance Statement as part of the Accountability Report, which forms part of the Annual Report and Accounts for 2023/24.

This Annual Governance Statement is intended to demonstrate to the Welsh Government how we managed and controlled resources in 2023/24 and the extent to which we complied with our own governance requirements.

The information provided in this Statement has been compiled using assurance information and documentation collated throughout the financial year. The Welsh Government issued guidance in the Manual for Accounts. The Financial Reporting Manual (FRoM), issued by His Majesty's Treasury, has also been used to help shape the final Statement.

The Audit and Corporate Governance Committee (ACGC) considered the draft for submission at its meeting on the 9 May 2024. This final version was presented to the Committee on the 10 July 2024 for recommendation to the Board for approval on the 11 July 2024. The Board approved this Statement for submission to Welsh Government at a Board meeting on the 12 July 2024.

## 2. Scope of Responsibility

As Chief Executive of Public Health Wales, I have responsibility for ensuring that effective and robust governance arrangements are in place, a sound system of internal control that supports the achievement of the organisation's Long Term Strategy exists and the safeguarding of public funds and the organisation's assets. These are carried out in accordance with my Accountable Officer responsibilities allocated by the Director General for Health and Social Services in the Welsh Government.

I have personal overall responsibility for the management and staffing of the organisation and I am required to assure myself, and therefore the Board, that the organisation's Executive management arrangements are fit for purpose and enable effective leadership.

This Annual Governance Statement demonstrates the mechanisms and arrangements in place to ensure the effective governance systems in place during this time, in the context of challenges we face as an organisation.

### 3. Governance Framework

The Public Health Wales Board is accountable for setting the strategic direction of the organisation and assurance in relation to governance, risk management, and internal controls in the organisation. The Chief Executive (and Accountable Officer) of the organisation has responsibility for maintaining appropriate governance structures and procedures.

In particular, 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
- ❖ The successful delivery of Public Health Wales' aims and objectives.

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

Other Directors within the Executive team are also in attendance at Board meetings, as is the Board Secretary and Head of the Board Business Unit who supports the Board, and other staff as required.

In accordance with regulation 12 of the Regulations, Public Health Wales must agree Standing Orders (SOs) for the regulation of proceedings and business. We have adopted the model Standing Orders and Reservation and Delegation of Powers for the regulation of proceedings and business.<sup>1</sup> They are designed to translate the statutory requirements set out in the *Public Health Wales NHS Trust (Membership and Procedures) Regulations 2009* (as amended) into day-to-day operating practice. Together with the adoption of a scheme of decisions reserved for the Board, a scheme of delegations to officers and others, and Standing Financial Instructions, they provide the regulatory framework for the business conduct of the organisation. These documents, together with the range of corporate policies set by the Board, contribute to the Governance Framework.

The Board has adopted a [Board Etiquette](#), which sets out the behaviours and conduct expected of all Board members and attendees; as the Board/Committees enact their stewardship role and takes the lead in promoting the values and standards of conduct for the organisation and its staff.

---

<sup>1</sup> Public Health Wales has fully adopted the model Standing Orders, with one amendment to Section 7.4.3: changing the circulation of agenda and supporting papers to Board/Committee members from 10 to 7 calendar days before a meeting.

The Board is committed to operating in as transparent, open, and accountable way as is possible. The [Protocol for Reserving Matters to a Private Board \(or Committee\)](#)<sup>2</sup>, identifies the different rationales that apply to material to be considered in private sessions. (See [Section 4.3](#) for further details).

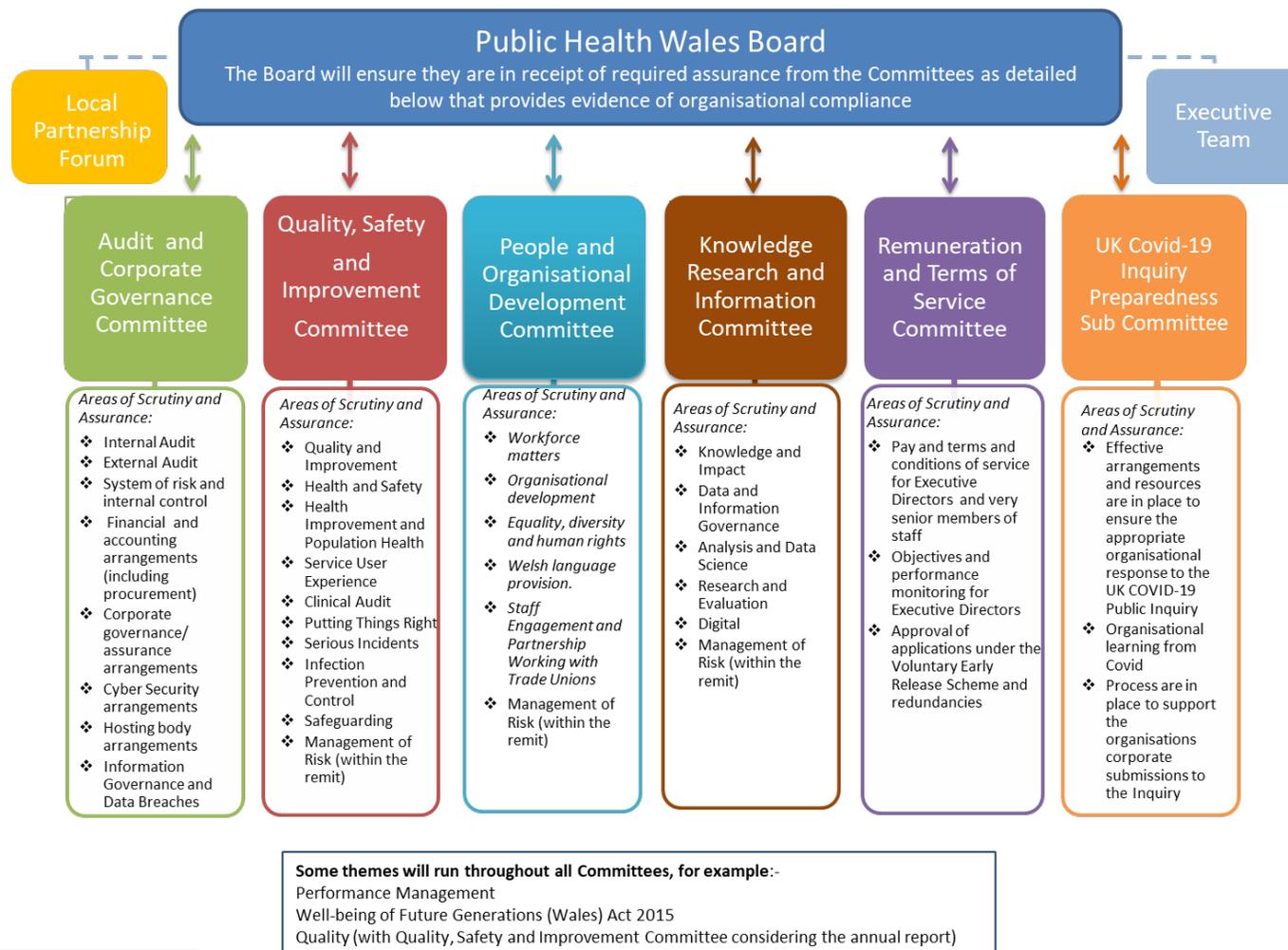
This year we have maintained and demonstrated robust governance through the assurance role of our Board and Committees and the leadership of the Executive Team and other senior professionals across the organisation. **Figure 1** below outlines the Board and Committee structure in place this year.

We have also developed a Board Assurance Framework to summarise how Public Health Wales delivers and sustains good corporate governance to ensure the delivery of its strategic objectives outlined within our [Long-Term Strategy](#) to improve population health and address health inequalities, while delivering safe, effective and high quality public health services. (See [Section 4.3](#) for further details).

---

<sup>2</sup> Approved by the Board in May 2021, and further updated in September 2022 and September 2023.

**Figure 1: Board and Committee structure approved by Board in July 2018 and operational from 1 April 2019 (with some changes during the period of COVID-19<sup>3</sup>):**



<sup>3</sup> Between March 2020 to April 2021, the People and Organisational Committee did not operate due to COVID-19. Between March 2020 to November 2021 the Knowledge, Research and Information Committee did not operate due to COVID-19

## 3.1 The Board

The key business and risk matters considered by the Board during 2023/24 are outlined in this statement and further information can be obtained from the published meeting papers on our [website pages](#).

**Figure 2** outlines the dates of Board and Committee meetings held during 2023/24.

All the meetings of the Board in 2023/24 were appropriately constituted and quorate. Escalation arrangements are in place to ensure that, in the event of a Committee not being quorate, any matters of significant concern are brought to the attention of the Chair of the Board.

The Board held its Annual General Meeting on Thursday 28 September 2023. This was held in person and livestreamed on our website providing members of the public with the opportunity to access and engage in the meeting as it happened.

Meetings of the Board and its Committees are compliant with the Public Bodies (Admissions to Meetings) Act 1960.

Meetings of the Board and Committees are accessible to the public:

- ❖ Notification of Board meetings are published on the website in advance of the meetings.
- ❖ Agendas and reports are published 7 calendar days before the meeting on the website.
- ❖ Public Health Wales has continued to livestream all Board meetings during 2023/24. The video recording of the meeting is uploaded to the website as soon as possible following the meeting. A link to join the livestream of the meeting is included on the website. *(Note: Committee meetings are not livestreamed, only Board)*
- ❖ Minutes of the meeting are published in draft form as soon as possible following the meetings.
- ❖ Meetings in private are kept to a minimum, in line with the Protocol for meetings in private, and are reviewed annually.
- ❖ A summary of the private meeting is published at each meeting via the Board Private Session Chairs Report.

**Board meetings** were a blend of in person attendance and virtual attendance (hybrid meetings) during 2023/24;

**Meetings of the Committees** of the Board have met during 2023/24 and are not currently livestreamed. In line with Board meetings, agendas and reports for these meetings are published on the website 7 days prior to the meeting, and draft minutes are published as soon as possible following the meeting.

The Board Work Plan ensures that the Board discharges its responsibilities in a planned manner. It assists with agenda planning and is updated during the year to ensure that the Board considers any additional items arising during the year.

In order to monitor progress and any necessary follow up action, the Board has an action log that captures all agreed actions. This provides an essential element of assurance to the Board that agreed actions are progressed, implemented and closed.

## Variations to the Standing Orders

Public Health Wales has fully adopted the model Standing Orders, with one amendment to Section 7.4.3: changing the circulation of agenda and supporting papers to Board/Committee members from 10 to 7 calendar days before a meeting.

**Figure 2: Board and Committee Meetings 2023/24**

<b>Board meetings:</b>						
25 May	27 July	28 Sept	30 Nov	26 Oct	25 Jan	28 Mar
<b>Quality, Safety and Improvement:</b>						
16 May	18 July	12 Oct	13 Dec	21 Feb		
<b>Audit and Corporate Governance**:</b>						
4 May	12 July	19 Sept	16 Jan	19 Mar		
<b>People and Organisational Development</b>						
18 Apr	19 July	8 Nov	6 Feb			
<b>Remuneration and Terms of Service:</b>						
25 May*	6 Jun*	28 Nov*	18 Jan*	5 Mar*	26 Mar*	
<b>Knowledge, Research and Information</b>						
13 Jun	13 Sept	6 Dec	5 Mar			
<b>COVID-19 Public Inquiry Preparedness Sub Group</b>						
29 Jun*	14 Sep*	15 Nov*	20 Dec*			

\*Private only session

\*\* During 2023/24, Audit and Corporate Governance Committee did not meet in public. Agendas and reports were published following the meeting. From May 2024, this has changed and meetings are in public.

## 3.2 Board Activity

During the year, the Board has considered a number of key issues and taken action where appropriate, these are summarised below:

Board Assurance Framework	
Chief Executive's Report	<p>The Board received regular reports from the Chief Executive at each Board meeting, providing a summary of key organisational activity to update the Board. This included:</p> <ul style="list-style-type: none"> <li>❖ Changes to the Executive Team and organisational changes.</li> <li>❖ Summary of meetings such as Joint Executive Team (JET), meetings with Welsh Government Ministers, Commissioners, submissions to the Senedd (Welsh Parliament) Committees, meetings with partner organisations such as Llais.</li> <li>❖ Summary of visits such as from other organisations, such as the Chief Executive of Northern Ireland Public Health Agency, the Chief Executive of the UK Public Health Agency, and visits from Public Health Scotland.</li> <li>❖ Regular updates on the UK COVID-19 Public Inquiry, including preparation within the organisation.</li> <li>❖ Directorate reports, summarising the key areas of work undertaken in each directorate on a bi-monthly basis.</li> <li>❖ Updates on key Organisational work such as launching of the nationwide Act FAST stroke campaign, Exercise Cyhyraeth to test our Emergency Response Plan, development of the Memorandum of Understanding Between the World Health Organization (WHO) and the Welsh Government, and the review of the prevalence of disease in Wales.</li> <li>❖ The establishment of Behavioural Research UK (BR-UK).</li> <li>❖ The Health Foundation Shaping Places programme securing funding in partnership with Executive Directors of Public Health across Wales.</li> <li>❖ Updates on the establishment of the NHS Executive on 1 April 2023, and an outline of the reporting arrangements to Public Health Wales.</li> </ul>

	<ul style="list-style-type: none"> <li>❖ Our genomics services moving from the University Hospital Wales to a new facility - Canolfan Iechyd Genomig Cymru (CIGC - Wales Genomic Health Centre).</li> <li>❖ Update on events hosted and attended, including Staff Conference Events, Staff Network Conference, Four Nations Climate and Health meeting, and the UK Four Nations Global Health Forum</li> <li>❖ Update on Awards received, such as Health Experiences of Asylum Seekers and Refugees Team Win Health and Care Research Wales Research Impact Award.</li> </ul>
Integrated Performance Report and Financial Report	<ul style="list-style-type: none"> <li>❖ The Board received the Integrated Performance Report at each Board meeting, providing a summary of key information including performance highlights, trends, and issues. This was read in conjunction with the Performance and Assurance Dashboard, which highlighted the latest available performance in an interactive format.</li> <li>❖ The presentation at Board meetings included updates from each of the Executive Leads to highlight any specific issues including Workforce, Finance, Operational Plan, Service Delivery and Quality.</li> <li>❖ The Financial Report outlined the revenue and capital position for Public Health Wales on a monthly basis together with year-end forecasts where appropriate.</li> </ul>
Public Health Dashboard	The Board considered the Public Health Dashboard at each meeting, which shared a range of public health information to inform the management of inequalities and the wider determinants of health, with particular focus on diabetes
Board Assurance Framework	❖ Approved a Board Assurance Framework, providing an assurance map at Board and Committee Level.
Risk	<p>The Board:</p> <ul style="list-style-type: none"> <li>❖ Regularly considered the Strategic and Corporate Risk Registers and received assurance as part of the Committee's in depth consideration of the Risk register.</li> <li>❖ As part of the Long Term Planning progress, the Board also undertook a review of the Strategic Risks, and approved a revised Strategic Risk Register in March 2024.</li> </ul> <p>(See Section 5 for further details)</p>

	❖ Considered and approved the revised risk appetite descriptors for the Integrated Medium Term Plan (IMTP) Strategic Priorities.
Corporate Policies	The Board considered an <u>annual update</u> on the current status of Policies within the organisations, including plans in progress to review and update those past their review date.
Partnership Working	Approved a paper Partnership Working at Board level.
<b>Board and Committee Governance</b>	
Chair's Action and Affixing of the Common Seal	Where applicable, the Board received reports advising of any agreements that have required the affixing of the Public Health Wales seal, and also identifying any Chair's Actions that had been taken by the Chair of the Board, for ratification.
Protocol – Private Session	The Board considered a review that had been undertaken to review the matters taken in private session the previous year, and suggested changes to the Private Meeting Protocol. The Board approved an update to the <u>Protocol for Reserving Matters to a Private Board (or Committee)</u> (See <u>Section 4.3</u> for further details).
Committees of the Board: Report from Committee Chairs	At each meeting, the Board received a report from the Chairs of the Board Committees for assurance, summarising the activity of the Committees within that period. (See <u>Section 3.2</u> for further details)
Committees of the Board Annual Reports 2022/23	The Board considered Annual Reports from the Committee's for 2022/23, and took assurance that the Committees were fulfilling their terms of reference. <i>(Note: the Annual Reports for 2023/24 will be presented to the Board for assurance in May 2024)</i> (See <u>Section 3.2</u> for further details)
Committee Terms of Reference Annual Review	The Board considered a review of the Committee terms of reference and approved the proposed revisions. (See <u>Section 9</u> for further details)
Standing Orders and Standing Financial Instructions	The Board reviewed and approved updates to the Standing Orders and the Standing Financial Instructions, in line with the model versions issued by Welsh Government.
<b>Plans and Strategies</b>	

Strategic Plan (Integrated Medium Term Plan)	The Board considered and approved the Strategic Plan (Integrated Medium Term Plan) 2024 to 2027. (See Section 9 for further details)
Financial Plan /Budgetary Control Framework	The Board considered and approved the <u>Financial Plan /Budgetary Control Framework</u> .
Infrastructure Plan / Capital Programme 2023/24	The Board approved the planned <u>capital expenditure</u> for 2023/24, including a proposed plan for Public Health Wales' discretionary capital funding.
Decarbonisation Plan	The Board approved the revised Decarbonisation Plan containing high level actions to meet the carbon negative objectives by 2035 as set out in the long term strategy.
Wellbeing Statement	The Board approved a revised wellbeing statement and took assurance that the Long-term Strategy incorporated the requirements of the Well-being statement.
International Health Strategy	The Board approved an updated International Health Strategy, which supported the delivery of the Long Term Plan and reflected on the changing global position and how Wales connected with other nations.
Strategic Equality Objectives	The Board considered revised Strategic Equality Objectives following an extensive engagement exercise.
<b>Topical / emerging issues</b>	
Approval of Annual Report and Accounts	The Board approved the Annual Report and Accounts for 2022/23 for submission to the Welsh Government, following review by the Audit and Corporate Governance Committee and auditing by Audit Wales.
Improvement Cymru Review	To reflect on the work improvement Cymru have undertaken within Public Health Wales prior to their transition to the NHS Executive from 1 April 2024. The report also provided assurance of the process to support the team moving to the NHS Executive.
Digital Inclusion and Older people	Considered an assurance report on our position against the recommendations made by the Older People's Commissioner for all Health Boards on Digital Inclusion.
NHS Hosting Agreement	Approved an addendum to the NHS Executive hosting agreement, effective from 1 April 2024.
Speaking Up Safely	Approved the Speaking up Safely Protocol to support effective implementation of the Speaking Up Safely Framework issued by Welsh Government.

<b>Strategic Partnerships and Joint working</b>	
Children's Commissioner	The Children's Commissioner joined a Board meeting and provided the Board with a presentation sharing her strategic priorities for her term in office. The Board discussed the synergies between her priorities and those of Public Health Wales and the opportunity for both organisations to work together and deliver enhanced benefit for Children and Young People in Wales.
Future Generations Commissioner for Wales	The Future Generations Commissioner for Wales and the Deputy Commissioner joined a Board meeting and shared work to date to share the Cymru Can Strategy, and the Board discussed areas of shared interest and focus to promote the prevention agenda and reduce health inequalities.
Staff Networks	<p>The following staff networks attended the Board this year:</p> <ul style="list-style-type: none"> <li>• We Care Network</li> <li>• Porffor Network</li> <li>• Enfys Network</li> <li>• REACH (Race, Equality and Cultural Heritage) Network</li> <li>• Ymlaen Network</li> </ul> <p>Each network provided a summary presentation of their work to date, which included any asks of the Board. The resulting actions would be monitored through updates to the People and Organisational Development Committee.</p> <p>The Women's Network will present to the Board in July 2024.</p>
Young Ambassadors	The Young Ambassadors joined a Board session to feedback to the Board on their priority issues: Mental Health and wellbeing; substance misuse and, sexual health and healthy relationships. The Board discussion focused on opportunities for the Young Ambassadors to continue to help share the public health agenda in Wales.

## Private Board Sessions

The Board held a Private Board session alongside every public session in 2023/24 to consider business of a confidential nature, considering aspects of significant issues including:

Topic	Purpose
Review of Emergency Response Plan	To approve the Public Health Wales Emergency Response Plan and take assurance in relation to the organisation's compliance with the requirements of the Civil Contingencies Act [2024] and NHS Wales Emergency Planning Core Guidance [2015]
Procurement	To approve the awarding of procurement contracts in line with Standing Financial Instruction and the Scheme of Delegation.
Current Issues	To update the Board on sensitive information on any emerging issues, such as regarding health protection matters.
Strategic risk Seven (Cyber Security)	To provide updates and allow for consideration of the Strategic risk seven (Cyber Security) in private session due to the sensitive nature of the risk.
Learning from Covid-19	To review the learning from the Public Health Wales' Board response to Covid-19, for assurance that any recommendations had been taken forward as part of the Public Health Wales' Emergency Planning and Business Continuity lessons learnt register.
Accountable Officer Role – Module 2b Public Hearings	To update the Board on the decisions taken by the Remuneration and Terms of Service Committee regarding the cover arrangements for the Chief Executive whilst she gave evidence as part of the Public Inquiry. (Refer <a href="#">section 3.5.3</a> for further information)
NHS Finance Updates	To provide the Board with up to date information on the current financial position across NHS Wales in year, including discussion on 2024/25 Financial Settlements and saving proposal requirements from Welsh Government. This was considered in Private session whilst in draft form, and information on the financial position was published in the IMTP 2024-27, for consideration in the public session.

NHS Executive	Updates on the hosting arrangements in the NHS Executive, including the review of the Hosting agreement as it was being developed. The addendum to the Hosting Agreement was approved in public session on 28 March 2024.
Public Inquiry	To supplement the update provided to the Board in open session by providing sensitive information relating to the public inquiry including, summary of decisions undertaken by the Covid -19 Public Inquiry Preparedness Subgroup in relation to the application for core participants status and other confidential matters governed by confidentiality undertakings to the Inquiry.
Local Partnership Forum Update	To update the Board on current Trade Union matters.
Post Office Horizon IT Scandal Implications	Consideration of lessons learned to date from the Post Office IT scandal.

A summary of all matters reported in private session is reported in the public session of the next meeting through the Chair’s Report as a standing agenda item, for the purposes of transparency and accountability.

### 3.1.3 Board Development and Briefing Sessions

The Public Health Wales Board has a Board Development Programme in place and meets at least five times a year as part of this programme.

The Board has considered its effectiveness and ongoing development throughout 2023/24.

During the year, the Board undertook a number of development sessions, topics included the following.

#### ❖ **Behavioural Science**

The Board undertook a session focusing on exploring the headline considerations in using behavioural science to improve and protect health and wellbeing, and seeking a strategic steer on future activity to support delivery of our Long Term Strategy, through the application of behavioural science.

#### ❖ **High Performing Board**

The Board held several sessions to support the development of a High Performing Board Model. These included:

- ❖ Review of a high performing Board model.
- ❖ Review and assessment of our current position, and how we develop our approach.
- ❖ Discussion on how this could be used to inform our Board Development Programme.
- ❖ Discussion on how optimal assurance is received by the Board and Board Committees.

#### ❖ **Screening**

The Board held a session on Screening focusing on:

- ❖ Discussion on the evidence based policy decision making process for screening programme.
- ❖ Outline of the key research and development areas at UK level.
- ❖ Engagement with the Board in enabling the implementation of Public Health Wales's Long Term Strategy through the delivery and development of excellent screening services for Wales.

#### ❖ **Clinical Partnerships**

The Board undertook a session on Clinical Partnerships to gain a better understanding of the range of existing clinical partnerships and how they help us achieve excellence. This included explore the potential barriers to nurturing clinical partnerships in the current NHS climate, discussion on Public Health Wales's Public Health Wales's system leadership role on key public health priorities.

Using examples of work in the Health Protection and Screening Services directorate, the session explored our existing interactions with clinicians and discuss opportunities to nurture our clinical partnerships to achieve excellence in service.

#### ❖ **Our Strategic Plan (IMTP)**

The Board held several sessions on the development of the IMTP, including update on the approach to strategic and financial planning for 2024/25, and consideration of the milestones between December 2023 and March 2024.

The Board considered an update on the development of our Strategic Plan and Budget Strategy for 2024/25, which included work to refresh our strategic risks, progress to-date and key next steps prior to formal adoption at the Board meeting in March.

#### ❖ **Strategic Partnerships**

The first session on strategic partnerships sought input from the Committee on establishing the key strategic partnerships for Public Health Wales to successfully deliver our vision for a healthier future for Wales by 2035.

The Board then considered draft proposals for our future strategic partnerships, which had been informed by the previous session, suggested strategic partners and how the arrangements will be implemented in 2024/25.

#### ❖ **Health Protection**

The Board held a session on Public Health Wales' role and contribution to strategic developments in health protection in Wales and globally. They also considered the outcome of the Welsh Government independent review of Health Protection arrangements in Wales and its impact on Public Health Wales.

The session also sought to engage with the Board in enabling the implementation of Public Health Wales's Long Term Strategy through the development of excellent health protection services.

#### ❖ **Strategic Equality Plan (SEP)**

The Board held a session on the development of the Strategic Equality Objectives, including a summary of the progress made during the period of the current SEP, and share the draft objectives to seek the Boards input onto these objectives.

#### ❖ **Building Public Health Wales' global health offer and community:**

The Board held a session on building Public Health Wales's global health offer which included how we capitalise on our assets, share learning, and enable opportunities.

This highlighted the strategic importance of international health partnerships and global health work across the organisation (and NHS Wales). The Board considered and discussed how to utilise our assets and maximise impact to Wales

and globally, enabling our Long Term Strategy and Wales' outward and forward looking ambition.

❖ **Diabetes Deep Dive**

This session followed on from a discussion at a public Board meeting in January 2023, on the Public Health Dashboard; the development session considered diabetes trends showing the latest data and trends, projections and evidence on what works and a discussion on our role and what we can do to tackle this.

❖ **Audit Wales - Betsi Cadwaladr University Health Board Report**

The Board invited Audit Wales to join a session to provide an overview of findings of the Audit Wales Board Effectiveness report at Betsi Cadwaladr University Health Board, and then held a discussion on the impact of this report and its finding on Public Health Wales, including learning to influence its Board development planning.

❖ **Culture and Development**

The Board considered an overview of the findings of the culture assessment, focusing the model: the ideal culture, current culture, outcomes, staff views on benefits of ideal culture.

## Board Briefings

The Board held two Briefings this year to consider and provide comment on the proposals being considered following the Minister requirement for all NHS organisations to develop proposals to reduce spending, in view of the overall NHS Wales' financial position in 2023/24.

Board Briefings were held on 27 July, and 10 August 2023.

On 27 July, the Board provided feedback and comments on the proposals, and support for the actions that Tracey Cooper had outlined. The further Board Briefing session held on 10 August, considered the worked-up proposals, prior to submission to Welsh Government on 11 August.

## 3.2 Committees of the Board

Public Health Wales has a range of Board Committees, which have key roles in the system of governance and assurance. The Board has five Board Committees established, whose purpose is to support the Board in the delivery of its role, the points below summarise the role of Committees:

- ❖ The organisation's activities are vast and complex: the Committees support the Board in covering the depth and breadth of the organisation's activities.
- ❖ Committees have a defined role which allows for a higher / deeper degree of scrutiny on behalf of the Board.
- ❖ Committees help ensure that the organisation operates effectively and meets its strategic objectives.
- ❖ Provides the Board with assurance that this is the case, obtaining assurance that systems and controls are working as they were designed to do.

During 2023/24 all five of the standing Board Committees were in operation, chaired by Non-Executive Directors. The Committees have key roles in relation to the system of governance and assurance, decision-making, scrutiny, development discussions, assessment of current risks, and performance monitoring.

In May 2022, the Board agreed to establish a COVID-19 Public Inquiry Preparedness Sub Group. The Sub-group's role is to provide independent assurance to the Board, that there are the appropriate and effective systems in place for areas within its remit, including delegation of decisions relevant to the participation of Public Health Wales in the UK Covid-19 Public Inquiry as well as ensuring that the appropriate development and quality improvements are captured. The Sub-group is anticipated to be time limited in line with the Inquiry lifespan.

With the exception of the Remuneration and Terms of Service Committee and the COVID-19 Public Inquiry Preparedness Sub-Group, papers and minutes for each meeting are published on our [website](#). Private Sessions of the Committees are held as required to receive and discuss sensitive or protected information. Business taken in private session is kept to a minimum.

The Committee Chairs report to the Board through a composite Chair's report, providing an overview of items considered by the Committee and highlighting any cross-committee issues / themes or items needing to be brought to the Board's attention. The Composite Chair's report and confirmed minutes are published with the Board papers. Committees operate in accordance to the [Protocol for Reserving Matters to a Private Board \(or Committee\)](#).

Each Committee produces an annual report, which provides a summary of business undertaken during the year. The Committee Annual Reports provide the Board with assurance that they are working effectively and contribute to the overall assessment of Board effectiveness. They also provide an additional opportunity to raise any areas or issues that require the Board's attention.

The Committee Work Plans ensure that the Committee discharges its responsibilities in a planned manner. It assists with agenda planning and is updated during the year to ensure that the Committee considers any additional items arising during the year.

In order to monitor progress and any necessary follow up action, the Committees have action logs that capture all agreed actions. This provides an essential element of assurance to the Committees and from the Committees to the Board.

Each Board Committee has an Executive Director lead or leads who work closely with the Chair of each Committee and Board Secretary in agenda setting, business cycle planning and management of the Committee.

We have not established a Charitable Funds Committee, given that we do not have our own charity. We do have access to a fund administered by Velindre NHS Trust and the Deputy Chief Executive/Executive Director of Operations and Finance has delegated authority to manage this fund.

The following sections provide highlights of reports received by Committees throughout the year. These highlights provide evidence of the governance framework working in practice.

Public Health Wales has the following Committees in operation during 2023/24

<b>Committee</b>	<b>Chairperson</b>	<b>Committee Members</b>
<b>Audit and Corporate Governance Committee</b>	Nick Elliott, Non-Executive Director	Mohammed Mehmet, Non-Executive Director Kate Young, Non-Executive Director Tamsin Ramasut, Non-Executive Director (For 19 March 2024 meeting only)
<b>Quality, Safety and Improvement Committee</b>	Diane Crone, Non-Executive Director	Kate Eden, Non-Executive Director (until 29 February 2024) Sian Griffiths, Non-Executive Director
<b>Knowledge Research and Information Committee</b>	Sian Griffiths, Non-Executive Director	Diane Crone, Non-Executive Director Nick Elliott, Non-Executive Director
<b>People and Organisational Development Committee</b>	Mohammed Mehmet, Non-Executive Director	Kate Young, Non-Executive Director Jan Williams, Board Chair
<b>Remuneration and Terms of Service Committee</b>	Jan Williams, Board Chair	All Non-Executive Directors Tracey Cooper, Chief Executive (Huw George, Acting Chief Executive from 22 January 2024 – 17 March 2024)
<b>Covid Inquiry Preparedness Sub Group</b>	Jan Williams, Board Chair	Nick Elliott, Non-Executive Director, Chair of Audit and Corporate Governance Committee Kate Eden, Vice Chair and Non-Executive Director (until 29 February 2024, currently a vacant position pending recruitment of Vice Chair) Tracey Cooper, Chief Executive Huw George, Deputy Chief Executive and Executive Director of Operations and Finance

*(Information on the attendances of Committee Members and Executives for the Committees this year is contained within the summary of Board Attendances in Appendix 1)*

### 3.2.1 Audit and Corporate Governance Committee

During 2023/24, the Committee met five times and was quorate on all occasions.

The Committee's remit covers the following areas:

- ❖ Internal Audit Function
- ❖ External Audit Function
- ❖ System of risk and internal control
- ❖ Financial and accounting arrangements (including procurement)
- ❖ Corporate governance and assurance arrangements
- ❖ Cyber Security arrangements
- ❖ Hosting body arrangements
- ❖ Information Governance and Data Breaches

The Committee provides advice and assurance to the Board on the systems of internal control, governance, and efficient and effective use of resources by overseeing and monitoring a programme of internal and external audit. The Committee provides an essential element of the overall governance framework for the organisation and has operated within its Terms of Reference and in accordance with the Standing Orders.

The Committee considered the following items:

#### Internal Audit Function

- ❖ Took assurance from the Head of Internal Audit Opinion for 2022/23 and Annual Report for 2022/23, noting the Organisation had received an overall reasonable assurance.
- ❖ Considered regular **internal audit progress** reports and the workplan for 2023/24 and subsequently 2024/25.
- ❖ Considered **9 completed Internal Audit Reports** and subsequently followed up any areas that had received a limited assurance.
- ❖ Regularly took assurance on the effective management of the **Audit Recommendations tracker** and report by the Leadership Team. This report highlighted the current position and progress made to implement the management actions arising from internal and external audit recommendations.  
(For Further information on the internal audits received this year, refer [section 12.1](#))

#### External Audit Function (Audit Wales)

- ❖ Considered the Audit Wales Audit of Accounts report for 2022/23 and financial statements, noting the unqualified audit opinion.
- ❖ Considered the Audit Plan for 2023 which outlined areas of audit investigation, and considered regular progress reports during the year.
- ❖ Considered the Annual Audit Report for 2021-2022 and the Structured Assessment Report for 2022.

- ❖ Considered the Annual Audit Report for 2022-23 and Structured Assessment Report for 2023.
- ❖ Considered 2 external audit reports into: the Recovery of Screening Services, and Workforce Planning Arrangements.

### **Financial and Accounting Arrangements (including procurement)**

- ❖ Considered a presentation on the draft 2022/23 accounts which outlined key performance targets, statutory and administrative duties and went on to recommend the financial accounts, Audit Wales Annual Opinion (ISA 260) and Accountability Report to the Board for approval.
- ❖ Took assurance that the Trust had an appropriate plan in place for the production of the Financial Statements and Accountability Report for 2023/24 in line with the statutory deadlines.
- ❖ Took assurance that procurement activity, losses and special payments, the writing-off of bad debts and claims abandoned had been made in accordance with the requirements of the Standing Financial Instructions.
- ❖ Took assurance that the write off of obsolete stock had been approved in accordance with the Financial Scheme of Delegation.

### **Counter Fraud**

- ❖ Took assurance on the management of Counter Fraud arrangements for the Organisation via regular progress reports, the Annual Report for 2022-23 and the workplan and priorities for 2023/24.

### **Information Governance and Data Breaches**

- ❖ Took regular assurance on the Information Governance Performance Report which outlined key information related to Information Governance performance such as Freedom of Information requests, Subject Access requests, staff training, records management updates and data breaches.
- ❖ Considered the Organisations response and management of data breaches and took assurance that thematic learning from data breaches has been identified and was being implemented.

### **Systems of Risk and Internal Control**

- ❖ Considered the Strategic Risk Register and Corporate Risk Register.
- ❖ Took assurance on the development of the Risk Management Development Plan.
- ❖ Approved the revised Risk Protocol, which included a revised timetable for updating and reporting of the Strategic Risk Register.

### **Corporate Governance and Assurance Arrangements**

- ❖ Recommended the adoption of the latest model of Standing Financial Instructions to the Board.
- ❖ Took assurance on Public Health Wales' compliance with Corporate Governance in Central Government Departments: Code of Practice 2017.
- ❖ Considered bi-annual Governance updates, taking assurance on:
  - ❖ The implementation of Standards of Behaviour Policy (Board and Staff Declarations of Interests and Gifts and Hospitality);

- ❖ The management of the process for ensuring the Organisation's compliance with Welsh Health Circulars;
- ❖ Prioritisation and progress being made to review corporate policies and procedures within the remit of the Committee.

### **Hosting Body Arrangements**

- ❖ Took assurance that the NHS Wales Finance Delivery Unit (Now part of the NHS Executive) had complied with standing orders and financial instructions, policies and procedures during 2022/23.
- ❖ Took assurance on the preparation for finalising the Hosting arrangement for 2024/25.

### **Cyber Security Arrangements**

- ❖ Regularly took assurance on the management of the Cyber Security related Strategic Risk within the organisation, considering updates at each meeting.
- ❖ Considered the Cyber Security Assurance report, Cyber Security Assessment and reported findings from Digital Health Care Wales.

### 3.2.2 Quality, Safety and Improvement Committee

The Quality, Safety, and Improvement Committee met five times during 2023/24 and was quorate on all five occasions. The Committee assists the Board in discharging its functions in meeting its responsibilities with regard to quality and safety. The Committee is responsible for seeking assurances on all aspects of quality of services and clinical care, governance systems including risk for clinical, corporate, and regulatory standards for quality and safety.

In May 2020, the Committee increased the frequency of meetings during this period to one meeting approximately every eight weeks (where it was possible to do so) to allow for appropriate and timely activity. An increased frequency has continued since then to ensure appropriate time allocated to consider quality and safety matters.

The Committee's remit covers the following areas:

- ❖ Quality and Improvement
- ❖ Health and Safety
- ❖ Health Improvement and Population Health
- ❖ Service User Experience
- ❖ Clinical Audit
- ❖ Putting Things Right
- ❖ Serious Incidents
- ❖ Infection Prevention and Control
- ❖ Safeguarding
- ❖ Management of Risk (within the remit)

The Committee undertook further scrutiny of the following areas during 2023/24:

#### Quality and Improvement

- ❖ Took assurance on the development of the Clinical Governance Framework in support of the Health and Social Care Act (Quality and Engagement).
- ❖ Regularly took assurance on the progress to implement the Duty of Quality and Duty of Candour within the Organisation.
- ❖ Regularly took assurance on the management of alerts and safety notices.
- ❖ Regularly took assurance on the Organisation's effective management of Putting Things Right, via the Putting Things Right Annual Report for 2022-23 and quarterly updates. The Committee also considered a related case study on improving Datix reporting in Microbiology.
- ❖ Noted updates from the NHS Executive on Public Health Wales' Nationally Reported Incident (NRI) overview and learning reports.
- ❖ Noted the revised arrangements for Health and Care Standards process.
- ❖ Took assurance on the Organisation's effective management of Claims and Redress (taken in private session), and considered the Internal Audit report into Welsh Risk Pool Claims.
- ❖ Considered a report into the Health Protection and Screening Services Procurement Approach and plan, which focused on improvements to

the procurement process, timeliness, and quality of information (taken in private session).

From February 2024, the Committee considered a revised Quality and Clinical Governance Performance Report which combined and streamlined the reporting on the following areas into one report:



### Safeguarding

- ❖ Considered a deep dive into **Safeguarding**, including a service user experience story, the **National Safeguarding Network** Update
- ❖ Took assurance on the management of Safeguarding through the:
  - Public Health Wales Safeguarding Report 2022-23
  - National Safeguarding Service Annual Report 2022-23
  - Safeguarding Maturity Matrix Improvement Plan for 2023 and mid-year progress review

### Infection Prevention and Control (IPC)

- ❖ Took assurance on the arrangements in place for the Organisation to meet its **Infection Prevention and Control** requirements via the Annual Report for 2022-23 and a mid-year update.
- ❖ Took assurance on the **Staff Influenza Vaccination Campaign Annual Report** for 2022-23 and the delivery plan for 2023-24.

### Service User Experience (Engagement)

- ❖ Took assurance on the progress made to deliver the '**Our Approach to Engagement**' plan and took note of the new approach to service user experience.

### Clinical Audit

- ❖ Took assurance on the **Quality and Clinical Audit Annual Report** for 2022-23 and the plan for 2023-24.
- ❖ The Committee went on to consider a **mid-year update** on progress against the plan for 2023-24.

### High Quality and Safe Public Health Services and Functions

- ❖ Took assurance on the progress to recover **Screening Services** impacted by the pandemic.
- ❖ Considered the findings of the Audit Wales report into the Recovery of **Screening Service Arrangements** and the management response, and subsequently participated in a workshop to consider the development of future Screening Service reports.
- ❖ The Committee went on to consider an update on the work to address the recommendations of the audit report and the approach taken to revise the **performance data within the Screening Services report**.
- ❖ Took assurance on the 2022-23 and 2023-24 **winter planning approach** for Health Protection and Infection Services.
- ❖ Took regular assurance on the Organisation's arrangements for the management of **medical devices** and noted the workplan priorities for 2023-24.
- ❖ Took assurance on the progress of actions contained within the approved Public Health Wales **Tuberculosis (TB) Action Plan** following the external review of the management of the TB outbreak in Llwynhendy, Carmarthenshire.
- ❖ Took assurance in relation to the organisation's compliance with the requirements of the **Civil Contingencies Act [2004]** and the **NHS Wales Emergency Planning Core Guidance [2015]**.

### Health and Safety

- ❖ Considered quarterly **Health and Safety progress reports**, taking assurance that measures were in place to monitor compliance with Health and Safety requirements, and that areas identified for improvement were addressed.
- ❖ Took assurance on the Health and Safety Annual Report for 2022-23 and the workplan for 2023-24.
- ❖ Considered a presentation on the **management of incident reporting** within the Organisation, and a case study on improving laboratory staff safety.

### Job Families

- ❖ Took assurance on the processes in place to manage and support the revalidation of medically qualified colleagues across the organisation.
- ❖ Took assurance that processes were in place within Public Health Wales to ensure all Nursing and Midwifery Council, Health and Care Professions Council and General Medical Council Registrants were registered with the appropriate

statutory regulating body, and that a similar system was in place for all Consultant Public Health Practitioners.

### Risk

- ❖ Regularly considered and took assurance on the management of both **strategic** and **corporate risks** within remit of the Committee.
- ❖ Noted that the Board had approved the transfer of **Strategic Risks 1 and 2** from the Quality, Safety and Improvement Committee to the Knowledge, Research and Information Committee from January 2024.

### Policies

- ❖ Considered bi-annual reports on the status of **policies, procedures and other written control documents** within its remit, and took assurance on the management of the review of Policies within its remit.
- ❖ **Approved 16 policies** within its remit during 2023-24

### 3.2.3 People and Organisational Development Committee

The People and Organisational Development Committee met four times during 2023/24 and was quorate on all four occasions. The Committee assists the Board in discharging its functions in meeting its responsibilities with regard to overseeing the People and Organisational Development strategies and plans ensuring they are consistent with the Boards overall strategic direction; with particular reference to Equality, diversity and human rights; and Welsh language provision.

The Committee's remit covers the following areas:

- ❖ Workforce matters
- ❖ Organisational development
- ❖ Equality, diversity and human rights
- ❖ Welsh language provision.
- ❖ Staff Engagement and Partnership Working with Trade Unions

The Committee undertook further scrutiny of the following areas during 2023/24:

#### Workforce Matters

- ❖ Took assurance on the workforce planning updates, including the workforce planning dashboard, which set out the challenges the Organisation faced, particularly in relation to workforce recruitment, and implementation of the People Strategy and People Promise.
- ❖ Took assurance on the deep dive into Managing Change, which focused on the support provided to facilitate effective Organisational Change within the Organisation. This aimed to realise the goal of the People and Organisational Development Directorate to develop a flexible, sustainable and thriving workforce with the capacity to deliver the proposed Long-Term Strategy.
- ❖ Considered the Audit Wales Report into the review of Workforce Planning Arrangements, noting the effectiveness to address current and future challenges and the management response.
- ❖ Took assurance on the Cost of Living Action Plan to support staff through the cost of living crisis.
- ❖ Approved the Workforce Annual Report 2022-23.

#### Organisational Development

- ❖ Considered a presentation of the 'Big 3' overarching People and Organisational Development Strategic Priorities: Culture and Experience, Organisation Effectiveness and Resources and Processes.
- ❖ Took assurance on the progress to realise the vision within the People Strategy.
- ❖ Took assurance on the development and implementation of the People Promise, which set out the Organisation's offer to its people in return for their hard work, commitment to the vision and embodiment of the Organisations values.

- ❖ Took assurance on the development and implementation of Work How It Works Best throughout the Organisation. Work how it works best is an evolving agile working policy employed by Public Health Wales and designed to utilise the best of the Organisation's experiences and enhance them for the current workforce.
- ❖ Regularly considered a live presentation of data from the Performance Assurance Dashboard, focusing on sickness absence, staff vaccinations, recruitment and turnover, and equality, diversity and inclusion data.
- ❖ Considered an overview of Statutory and Mandatory Training compliance and My Contribution appraisal data across the Organisation, and the work underway to address compliance such as impact workshops and toolkits. The Committee went on to consider a comprehensive review of appraisal compliance within the Health Protection and Screening Services directorate.

### **Workforce Equality, Diversity and Human Rights**

- ❖ Took assurance on the work undertaken to progress the Equality, Diversity and Inclusion agenda in Public Health Wales through regular progress updates, which highlighted the introduction of two new Staff Networks (Ymlaen and Chaps Chat) and improvements in declaration rates., which indicated the level of trust staff had.
- ❖ Took assurance on the Organisation's progress towards the Anti-racist Wales Action Plan and Workforce Race Equality Standard.
- ❖ Considered the findings and approved the Annual Equalities Report 2023-23.
- ❖ Considered the findings and approved the Gender Pay Gap Annual Report 2022-23 and considered.

### **Welsh Language Provision**

- ❖ Took assurance on the Organisation's efforts to embed the requirement for the provision of Welsh Language in its work throughout the Organisation via regular Welsh Language compliance updates. These included a focus on areas of progress such as the work underway to transform the Web Estate, the work to embed a bilingual culture within the Organisation, and the identification and plan to address areas of weakness.
- ❖ Took assurance on the Welsh Language Annual Report and the position in regard to Welsh Language complaints.

### **Staff Engagement and Partnership Working with Trade Unions**

- ❖ Took assurance on a deep dive into Culture, experience and operational effectiveness within the Organisation, which highlighted the Organisations commitment to the development of a positive culture at all levels of the Organisation.
- ❖ Considered a comprehensive update on staff engagement and took assurance on the level of engagement with Staff.

- ❖ Considered regular updates from the Local Partnership Forum.
- ❖ Took assurance on the annual report from the Local Partnership Forum, which had focused on strategic issues, and had been crucial in driving the Organisation's work into culture and employee value proposition.
- ❖ Considered an update on the Staff Networks and took assurance on the progress with requests made to the Board by the Staff Diversity Networks to date.

### **Speaking Up Safely and Raising Concerns**

- ❖ Considered an update on grievances received by the Organisation, taking assurance that all grievances were treated confidentially and managed in accordance with the policies and protocols in place.
- ❖ Approved the Speaking Up Annual Report (previously Raising Concerns Annual Report) and took assurance on the progress with the implementation of the actions within the Speaking Up Safely Action Plan.
- ❖ Approved the Speaking Up Safely Framework and Protocol
- ❖ Approved the adoption of the All Wales Raising Concerns Procedure

### 3.2.4 Knowledge, Research and Information Board Committee

The Knowledge, Research, and Information Board Committee met four times during 2023/24 and was quorate on all occasions. The Committee assists the Board in discharging its functions in meeting its responsibilities with regard to overseeing quality and impact of our knowledge, health intelligence and research activities and also the data quality and information governance arrangements in the organisation and cross sector where applicable.

The Committee's remit covers the following areas:

- ❖ Knowledge and Impact
- ❖ Data and Information Governance
- ❖ Analysis and Data Science
- ❖ Research and Evaluation
- ❖ Digital

The Committee undertook further scrutiny of the following areas during 2023/24:

#### Research and Evaluation

- ❖ Approved the **Research and Evaluation Strategy**, which aimed to make measurable improvements to the health of the population in Wales by leading and supporting population-level health research and evaluation.
- ❖ Took regular assurance on the **monitoring and implementation** of the Research and Evaluation Strategy and the approach taken towards areas of research and evaluation interest for Public Health Wales during 2023/ 2024 which documented areas of research which would be crucial to the Organisations role to deliver on its Long-Term Strategy.
- ❖ The regular updates included exploring the following areas:
  - **Academic Public Health research:** the vision and subsequent identification of relevant strategic partners,
  - **Genomics:** progress against the development of the Programme, future plans, and endorsement of the aim to develop a research plan for Public Health Genomics,
  - **Welsh Health Equity Solutions Platform** progress, and underway /planned monitoring and evaluation,
  - **Academic Institutions:** including efforts to develop strong strategic partnerships including the Open University and other Universities.

#### Knowledge and Impact

- ❖ Regularly considered updates on the monitoring and assurance of delivering against the Organisation's strategic priorities and took assurance that a system was also under development to help facilitate this.

### Analysis and Data Science

- ❖ Took assurance on the progress made in the **Diabetic Eye Screening Wales (DESW) Discovery and Alpha** programmes.
- ❖ Took assurance on the progress of the **Breast Test Cohort Selection tool** and Diabetic Eye Screening Wales automation work, including GP referrals.
- ❖ Considered the findings of the annual **survey of Knowledge, Data Analysis and Research** products, noting the areas identified for improvement and the plans to engage with all Directorates to formulate detailed actions plans to take forward the findings.

### Digital

- ❖ Approved the **Digital and Data Strategy**, which was designed to support an All-Wales approach to digital and data, to fulfil the Organisations needs and deliver the Public Health Service for Wales in managing IT services efficiently.
- ❖ Regularly monitored the **implementation of the Digital and Data strategy**, and the deliverables from the Discovery and Alpha phases, taking assurance that the Digital and Data services teams were delivering steadily on the core elements of the Strategy and the projects it had committed to, to improve the use of digital, data and technology to deliver excellent public health services.
- ❖ Considered an update on **Public Health Wales led research into digital health inequality** and collaboration with the World Health Organisation in this field of research and took assurance on the progress being made in the digital inequalities and future use in health care setting work.
- ❖ In private session, the Committee considered an overview of the Organisations assurance framework /processes on the Organisations digital developments following on from the **Post Office Horizon IT scandal**. This was considered in private due to the confidential, cyber security nature of the item.

### Risk

- ❖ Regularly considered and took assurance on the management of both **strategic and corporate risks** within remit of the Committee.
- ❖ Noted that the Board had approved the transfer of **Strategic Risks 1 and 2** from the Quality, Safety and Improvement Committee to the Knowledge, Research and Information Committee from January 2024.

### Policies

- ❖ Considered bi-annual reports on the status of policies, procedures and other written control documents within its remit, and took assurance on the management of the review of Policies within its remit.
- ❖ **Approved 2 policies** within its remit during 2023-24.

### Deep dives

- ❖ **Mental Health:** A deep dive focused on the role of the Organisation in addressing mental health issues in Wales and the work underway in areas of mental health research and services.

- ❖ **Healthy Behaviours:** A deep dive into the promotion of healthy behaviours, focused on the extent to which the Organisation had the appropriate data, research and evaluation systems in place to monitor the Organisations impact.
- ❖ **Addictive Behaviours:** A deep dive focused on the public health approach to preventing health harming behaviours, particularly drug misuse and gambling.
- ❖ **Climate Change:** A deep dive relating to data analysis and research in support of the public health impacts of the climate change strategic priority.

### 3.2.5 Remuneration and Terms of Service Committee

The Remuneration and Terms of Service Committee met six times during 2023/24 and was quorate on all occasions.

The role of the Committee is to approve and provide assurance to the Board on matters relating to the appointment, termination, remuneration, and terms of service for the Chief Executive, Executive Directors, and other senior staff within the framework set by the Welsh Government in accordance with the scheme of delegation.

The Committee also approved proposals regarding termination arrangements, including those under the Voluntary Early Release Scheme, ensuring the proper calculation and scrutiny of termination payments in accordance with the relevant Welsh Government guidance.

In order to monitor progress and any necessary follow up action, the Committee has an Action Log that captures all agreed actions.

The Remuneration Report provides relevant information regarding the matters considered by the Committee during 2023/24.

### 3.2.6 UK COVID-19 Public Inquiry Preparedness Sub-Group

In May 2022, the Board agreed to set up the UK COVID-19 Public Inquiry Preparedness Sub-Group (the Sub-Group) to;

- ❖ Advise and assure the Board on whether effective arrangements and resources are in place to ensure the appropriate organisational response to the UK COVID-19 Public Inquiry (the Inquiry)
- ❖ Approve, on behalf of the Board, if the organisation should apply for Core Participant Status for each of the UK COVID-19 Inquiry modules/sub modules.
- ❖ Seek assurances that appropriate processes are in place to support the organisations corporate submissions to the Inquiry, including the instructions for opening and closing addresses by Counsel.
- ❖ Seek assurance that organisational learning is being identified and actioned where appropriate, both in regard to the Inquiry preparedness and the pandemic response itself.

The Board approved the terms of reference in September 2022 and the Sub-Group core Membership was agreed as:

- ❖ Chair of the Board
- ❖ Vice Chair of the Board (Non-Executive Director)
- ❖ Chair of the Audit and Corporate Governance Committee (Non-Executive Director)

- ❖ Chief Executive
- ❖ Deputy Chief Executive and Executive Director of Operations and Finance

The Sub-Group met on four occasions during 2023/24 to consider whether Public Health Wales should apply to be a core participant in Modules 4, 5 and 6 (as set out below).

In September 2023, the Sub-Group undertook a detailed review of the organisational response to the Inquiry to date and took assurance from operational changes put in place to ensure the organisation was in the best position to support the work of the Public Inquiry.

The Board has been provided with an update on progress at each Board meeting throughout the year but was in particular provided with detailed updates and assurance on finance, resource and the overall response in September 2023.

## **The Inquiry**

In December 2021, Rt Hon Baroness Heather Hallett DBE, was appointed as the Chair of the UK Covid-19 Public Inquiry. Following the approval of the Inquiry's Terms of Reference by the Prime Minister in June 2022, the Inquiry was formally opened.

### **Module 1**

Module 1 opened on 21 July 2022, with the focus of the module being to examine the resilience and preparedness of the United Kingdom for a Coronavirus pandemic.

An application for Core Participant Status was made and was granted by the Inquiry Chair.

The public hearings for Module 1 took place between 13 June and 21 July 2023, where Dr Quentin Sandifer provided oral witness evidence in support of the Corporate Witness Statement of the Organisation.

The findings of the Inquiry are awaited.

### **Module 2**

Module 2 opened on 31 August 2022, to investigate the core political and administrative governance and decision-making for the UK and devolved administrations during the pandemic response, from January 2020 until restrictions were lifted in May 2022.

This module was divided into sub modules (2, 2A, 2B and 2C) to address the pandemic response across the 4 nations of the UK.

Module 2B, seeks to assess the Welsh Government's core political and administrative decision-making / response to the pandemic.

The Sub-Group considered the role of the organisation against the scope of Module 2B, and an application was made for Core Participant status. This application was granted by the Chair of the Inquiry.

Following the submission of extensive witness and documentary evidence from across the organisation, Dr Chris Williams, Dr Quentin Sandifer and Dr Tracey Cooper were each selected to give oral witness evidence at the public hearings, which ran from 26<sup>th</sup> February 2024 to 15<sup>th</sup> March 2024.

The findings of the Inquiry are awaited.

### **Module 3**

Module 3 opened on 8 November 2022, and will look at the governmental and societal response to COVID-19 as well as dissecting the impact the pandemic had on healthcare systems, patients and health care workers. This will include healthcare governance, primary care, NHS backlogs, the effects on healthcare provision by vaccination programmes as well as long COVID-19 diagnosis and support.

Following a comprehensive review of the provisional outline scope for Module 3, the Subgroup agreed that Public Health Wales did not have sufficient involvement in the areas covered by the module to require Core Participant status for Module 3. No application was therefore made.

Public Health Wales did however commit to support the Inquiry Team with any assistance it may require with this Module and has submitted detailed witness and documentary evidence to date.

The Public Hearings for Module 3 are scheduled to take place for 10 weeks between 9 September 2024 and 28 November 2024.

### **Module 4**

Module 4 opened on 5 June 2023, and will examine vaccines, therapeutics and anti-viral treatment across the UK in response to the pandemic.

Given the role of the organisation, an application for Core Participant Status was made upon the approval the Subgroup and has now been granted by the Inquiry Chair.

We are working with the Inquiry Team to ensure effective witness evidence is provided to support the Inquiry, together with appropriate documentary disclosure.

The Public Hearings for Module 4 are currently scheduled to take place from 14 January 2025 to 30 January 2025.

## **Module 5**

Module 5 opened on 24 October 2023 and will examine Government Procurement and the distribution of key equipment and supplies across the UK in response to the pandemic.

Following a comprehensive review of the provisional outline scope for Module 5, the Subgroup agreed that Public Health Wales did not have sufficient involvement in the areas covered by the module to require Core Participant status. Consequently, an application for Core Participant Status was not made.

The Public Hearings for Module 5 are currently scheduled to take place in March 2025.

## **Module 6**

Module 6 opened on 12 December 2023, and will investigate the impact of the pandemic on the publicly and privately funded adult social care sectors in the UK.

Following a comprehensive review of the provisional outline scope for Module 6 and the role played by the organisation, the Subgroup has approved an application for Core Participant status to be made. This application has been granted by the Inquiry Chair and we will now work with the Inquiry Team to ensure the organisation provides the evidence and assistance required.

Public Hearings for Module 6 are currently scheduled to take place in the Summer of 2025.

## **Module 7**

Module 7 opened on 19 March 2024, and will investigate the approach to testing, tracing and isolation adopted during the pandemic in England, Wales, Scotland and Northern Ireland from January 2020 until February 2022.

Following a comprehensive review of the provisional outline scope for Module 7 and the role played by the organisation, the Subgroup has approved an application for Core Participant status to be made.

The Public Hearings for Module 7 are currently scheduled for Spring 2025.

### 3.2.6 Young Ambassadors Board Partnership Forum

The Young Ambassadors (YA) programme was approved by the Public Health Wales Board in July 2018. The programme was developed in collaboration with young people and with consideration of several local and national youth engagement initiatives including Sports Wales, UK and Welsh Government youth engagement, Children's Commissioner for Wales Children's Steering Group and engagement models used across Welsh Health Boards and Local Authorities to inform the programme approach.

In April 2022, following discussions with the Young Ambassadors, further ways were suggested that would support better facilitated Board engagement with young people. A scoping exercise was undertaken to help inform the organisational approach and ensure that we work towards the principles of co-production as set out by the Children's Commissioners 'The Right Way'. This included a fact-finding exercise which included engaging with the Children's Commissioner's Office, Welsh Youth Parliament, Children in Wales and Health Boards. The findings identify that for Board level participation to be fully realised the young people would need robust structures in place to support them to do this. Also, the information presented to the YAs would need to be accessible.

Following this, in July 2022, the Board approved the establishment of a Young Ambassadors Board Partnership Forum. It is intended that this forum will allow Board members and Young Ambassadors to come together with an equal voice to discuss issues of shared interest. These discussions will then influence Public Health Wales decision-making by being fed back to the Business Executive Team and the Public Health Wales Board.

The Forum has met once this year, following which the Young Ambassadors presented to the Board in July, summarising their work this year and highlighting their key priority areas:

- ❖ Mental Health and Wellbeing
- ❖ Substance Misuse
- ❖ Sexual Health and healthy relationships.

The Young Ambassadors are in the process of developing their work plan and aims for next year and the programme itself is being reviewed during 2024/25 to review and strengthen the arrangements.

### 3.3 Executive Governance

With the exception of powers reserved for the Board and its Committees (as outlined in the Scheme of Delegation) the Board delegates authority for operational delivery and operational decisions to its Chief Executive.

The Chief Executive has established and recognises the Executive Team as the key executive leadership team for the *collective* execution of the delegated responsibility in addition to the delegated individual accountabilities and responsibilities that each Director in the Executive Team has with their respective portfolios.

The Executive Team comprises the Chief Executive, Directors (some of whom are Executive Directors) and the Board Secretary and has responsibility for the leadership and operational management of the organisation. The Executive Team meets weekly. Twice a month these meetings are Business Executive Team meetings, as the main corporate assurance and delivery meeting, and the remaining weeks as a Strategic Executive Team to discuss strategic and pan-organisational items.

**Figure 3** shows the Executive Team and Directorate Structure in operation during 2023/24.

#### 3.3.1 Business Executive Team

The Business Executive Team meeting is the main collective corporate assurance and delivery meeting. The Business Executive Team (BET) meeting is chaired by the Chief Executive and its role includes:

- ❖ Ensuring the correct balance of strategic and operational time is invested to effectively and collectively lead (Executive) and oversee the management of the organisation.
- ❖ Overseeing, receiving assurance from Directors, and identifying remedial actions as appropriate in relation to the successful implementation of the Long Term Strategy (through the three-year Strategic Plan and annual plans) and the effective performance and delivery of the associated measurement and outcomes framework.
- ❖ Embedding a culture of openness and transparency, equality and diversity and innovation and curiosity across the breadth of the organisation.
- ❖ Receiving assurance from Directors in relation to the compliance with statutory requirements and relevant legislation.
- ❖ Ensuring the appropriate collective management and utilisation of all resources across the organisation.
- ❖ Looking forward and horizon scanning for future developments, innovation and technologies relevant to the organisation and public health more broadly

- ❖ Identifying and managing corporate and strategic risks within the Board's risk appetite
- ❖ Establishing relevant operational decision-making groups and delegating responsibilities to them as appropriate

In addition, the Chief Executive has established a Strategic Executive Team meeting. This is chaired by the Deputy Chief Executive and is dedicated specifically to strategic and pan-organisational items.

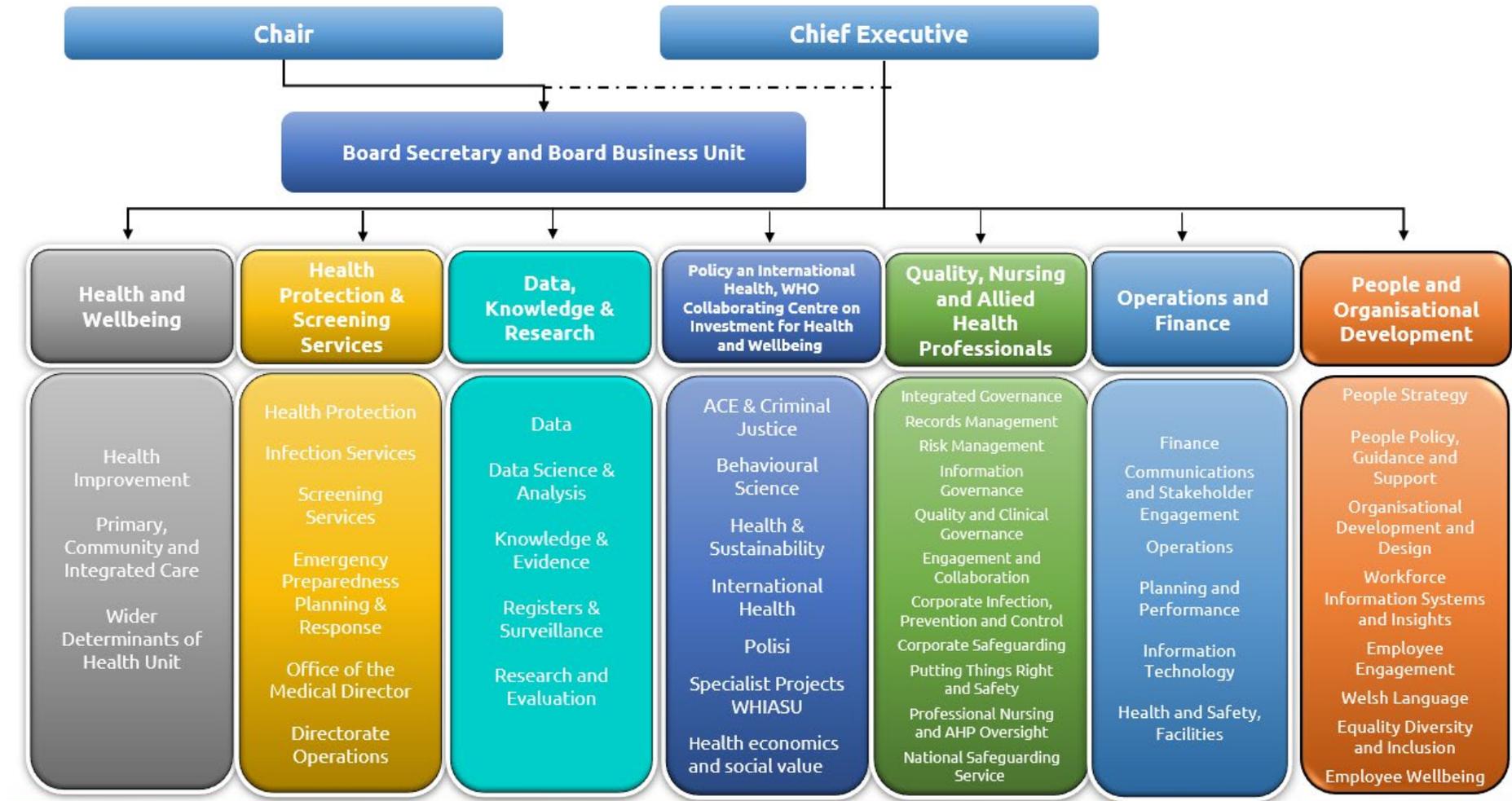
### **Transition of Improvement Cymru**

Improvement Cymru became a directorate of Public Health Wales in 2013. Since then, Improvement Cymru has supported a range of national priorities as the improvement service for NHS Wales. The team have also been an integral part of Public Health Wales, contributing to the delivery of strategic priorities and developing the improvement capability of the organisation.

The NHS Executive was established on 1 April 2023. As part of Phase 2 of the establishment, Improvement Cymru will transition from Public Health Wales to the Quality, Safety and Improvement Directorate in the NHS Executive from 1 April 2024

A 12-month plan was developed to support staff through the transition. This included an engagement period from 18 January 2024 to 16 February 2024 where staff were invited to ask questions and feedback to Judith Paget (SRO), Chief Executive of NHS Wales and Director General for Health and Social Services, as part of the process.

**Figure 3: Executive Team and Directorate Structure in operation during 2023/24:**



## 3.5 Board and Executive Team Membership

- ❖ The Board is constituted to comply with the *Public Health Wales National Health Service Trust (Membership and Procedure) Regulations 2009 (as amended)*. In addition to responsibilities and accountabilities set out in terms and conditions of appointment, Board members also fulfil a number of Champion roles where they act as ambassadors (see appendix 1). As previously indicated the Board is constituted with Non-Executive and Executive Directors.
- ❖ In addition to the Executive Directors appointed in accordance with the *Regulations*, individuals have also been appointed to other Director positions. They, together, with Executive Directors, are members of the Executive Team. They have a standing invitation to Board meetings where they can contribute to discussions, although do not have voting rights.

### 3.5.1 Departure and appointment of Non-Executive Directors

#### Vice Chair

Kate Eden's second term of office was due to end on 31 March 2023. Following a public recruitment exercise, Dyfed Edwards was due to discharge the Public Health Wales Vice Chair role from 1 April 2023.

As of 28 February 2023, Dyfed Edwards was on secondment from Public Health Wales NHS Trust to Betsi Cadwaladr University Health Board, for one year, in the role of Interim Chair.

In the interim, Kate Eden's term as Vice Chair was extended until 29 February 2024 pending Dyfed's return to Public Health Wales.

As of 30 January 2024, Dyfed Edwards was confirmed by the Minister as the permanent Chair of Betsi Cadwaladr University Health Board, and as such would not be returning to Public Health Wales to fulfil his position as Vice Chair of the Board.

From 1 March 2024, there is a vacancy for the position of Vice Chair of the Public Health Wales Board; a recruitment exercise is underway in April 2024 to fill this vacancy.

#### Non Executive Director – Equality and Diversity

In 2023/24 there was one vacancy of the Public Health Wales Board for a Non Executive Director (post previously held by Dyfed Edwards prior to his appointment as the Public Health Wales Vice Chair in 2023).

A public recruitment process was undertaken in 2023/24 to fill the vacancy of a Non Executive with a focus on Equality and Diversity. Tamsin Ramasut was appointed by the Minister to join Public Health Wales Board on 1 December 2023 to fill this position.

### **3.5.2 Board Succession Planning**

Succession planning has been actively considered during the year and following the review of Board skills, skills required for the future and appointment terms, relevant recruitment campaigns have successfully recruited additional Board members.

We have a clear timetable of appointment terms and actively monitor this on an ongoing basis to ensure the Board has the appropriate skills and appointments in place as required to meet the needs of the strategic direction of the organisation as well as comply with our Standing Orders and Regulations.

### **3.5.3 Senior Staff Appointments and Departures**

The current Executive Team structure has been in place since the 1 April 2019. The following changes have occurred in post holders during the year:

#### **Executive Director of Quality, Nursing and Allied Health Professionals**

Rhiannon Beaumont Wood retired on the 31 July 2023 from the role of Executive Director of Quality, Nursing and Allied Health Professionals. It was agreed to recruit to the role on a fixed term basis to allow a wider review of the organisational structure over the next 12 months.

On a short term basis, Angela Cook agreed to act into this role from 01 August 2023 – 24 September 2023, whilst the recruitment for the interim appointment was conducted.

Following a recruitment exercise, Claire Birchall was appointed to the role of Interim Executive Director of Quality, Nursing and Allied Health Professionals from 25 September 2023 until 30 September 2024.

#### **Executive Director of Health and Well-being**

Angela Jones was appointed Acting Director of Health and Well-being as of 27 June 2022 for 1 year. The recruitment for a permanent Director of Health and Well-being was undertaken in May 2023.

Jim McManus was appointed to the permanent role of Director of Health and Wellbeing from 25 September 2023.

Angela Jones returned to her substantive post on 30 June 2023.

Pending Jim's arrival into post, Iain Bell was appointed temporary Director lead for the Health and Wellbeing Directorate, until Jim started in post (1 July to 24 September 2023).

### **Board Secretary and Head of Board Business Unit**

Helen Bushell left Public Health Wales on the 8 January 2023, Elizabeth Blayney was appointed as Acting Board Secretary and Head of Board Business Unit whilst the recruitment and appointment of a permanent appointment.

From 17 April 2023, Paul Veysey was appointed to the permanent role.

### **World Health Organization (WHO) Collaborating Centre on Investment for Health and Well-being**

Mark Bellis left Public Health Wales on the 5 December 2022, although he retains an Honorary Consultant contract with us.

Sumina Azam was appointed as Acting Director of the WHO Collaborating Centre on Investment for Health and Well-being from the 6 December 2022, pending the recruitment of a permanent appointment.

Following the recruitment process, Sumina Azam was appointed to the role permanently as of 22 May 2023.

### **Chief Executive Cover Arrangements for Module 2B of the COVID-19 Public Inquiry**

The Public Hearings for the UK COVID-19 Public Inquiry for Module 2B commenced on the 26 February 2024 and continued until 15 March 2024. The focus of this module's public hearing was to explore the Welsh Government's decision-making during the pandemic. On behalf of Public Health Wales, Tracey Cooper was one of those called to give oral evidence.

On 28 November 2023, the Remuneration and Terms of service Committee approved a proposal for the Chief Executive to be able to step back from the role of Chief Executive from the 22 January 2024 until such time as she has given evidence, in order to prepare for the extensive nature of the Module 2B UK COVID-19 Public Inquiry.

The cover arrangements were as follows:

- ❖ Huw George, Deputy Chief Executive and Director of Operations and Finance to become the Acting Chief Executive.
- ❖ Neil Lewis, Director of People and Organisational Development, to become the Acting Deputy Chief Executive.
- ❖ Angela Williams, Deputy Director of Finance, to become the Acting Director of Operations and Finance.

The Public Hearing concluded on Friday 15 March 2024, and these cover arrangements came to an end from 18 March 2024.

### **3.5.4 Staff Representation at Board and Committee Meetings**

Staff side representatives are invited to all Board, Board Development, and relevant Committee meetings throughout the year. They are encouraged to play a full and active role in Board discussions.

We have continued to engage with all Unions and representatives on the Staff Partnership Forum to encourage effective staff representation at Board and Board Committee meetings throughout the year.

### **3.5.5 Board Diversity and Inclusion**

The Board recognises the importance of ensuring a diverse range of backgrounds, skills, and experiences to add value to the Board discussions and decisions.

As of 31 March 2024, the Board had a gender balance of 61.5% (8) female, 38.5% (5) male, 26% (4) members were from a Black and Ethnic Minority background, 0% declared a disability.

One Board member is a fluent Welsh speaker, and one other is an advanced learner.

The Board is very committed to enhancing diversity and ensuring an appropriate range of skills and experiences to fulfil its role and has a range of initiatives in development for 2024/25.

## 4. Improvements to the Governance Framework

- ❖ During the year, work has been ongoing to further strengthen the governance framework for the organisation and test its robustness. This included the following main areas.

### 4.1 Review of the Board Committee Terms of Reference

The Committees are reviewed annually to ensure compliance with Standing Orders. A review of the Terms of Reference took place in May 2023 and suggested amendments were presented to the Board for approval for:

- ❖ Audit and Corporate Governance Committee
- ❖ Quality, Safety and Improvement Committee
- ❖ People and Organisational Development Committee
- ❖ Knowledge, Research and Information Committee
- ❖ Standard Terms of Reference and Operating Procedures
- ❖ Remuneration and Terms of Service Committee

The Board considered a review of the Terms of Reference for the Committees and approved revised versions in May 2023

### 4.2 Performance and Effectiveness Cycle

The Board has a comprehensive approach to reviewing performance and effectiveness within an annual cycle. The following elements of the cycle have been in place this year:

#### a) External and Internal Assurances to the Board

During the year we have undertaken, or engaged in, a number of assessments that provide internal and external sources of assurances to support the Board in undertaking its annual effectiveness assessment, the main reviews that relate to the Board are outlined below:

- ❖ Audit Wales has completed the **Structured Assessment Review in 2023**, focusing on corporate arrangements, including the governance arrangements, for ensuring that resources are used efficiently, effectively and economically. ([Refer Section 12.3](#))
- ❖ We have completed an assessment against the Corporate Governance in Central Governance Departments: **Code of Good Practice 2017**. We used the “Comply” or “Explain” approach in relation to the Code of Good Practice. This was presented to the Audit and Corporate Governance Committee in [March 2024](#) who took **assurance** of our compliance with the Corporate Governance

in Central Government Departments – Code of Practice 2017. (Further information is provided in [section 9](#) of this report.)

## **b) Board Committee Effectiveness**

There is a programme in place to ensure Board Committees review the following activity for each Committee:

- ❖ Terms of Reference and Operating Arrangements
- ❖ Committee Effectiveness Questionnaire
- ❖ Committee Effectiveness Workshop
- ❖ Annual Committees Report of Activity to the Board
- ❖ Feedback session at the end of each meeting.

In January 2024, an online questionnaire was completed by members of all Committees. The questions were based primarily on the Audit Committee Handbook (2012) suggested self-assessment questions and National Audit Office good practice guidance and were adapted for the Committees.

A Workshop were held in March 2024, with Committee Chairs and the Executive Leads for each of the Committees to discuss the common themes and committee wider learning from the survey results. A summary of the themes from this meeting will be provided to each Committee, and to the Board in May 2024.

Relevant learning from the overall review of effectiveness will be fed into the Board performance review in 2023/24: a summary of the Committees' considerations and outcomes of this review will be reported to the Board in quarter 1 of 2024 as part of the wider Board effectiveness review.

## **c) Board Performance and Effectiveness**

As part of the development to implement a High Performing Board model, the Board has undertaken an effectiveness survey to assess its current position to provide insights into further developments.

A full Board review of performance and effectiveness will take place in 2024/25 as part of the implementation of a high performing Board Model. And will incorporate learning from the Committee reviews outlined in b) above.

After each Board meeting, feedback is sought from Board members and attendees.

#### **d) Chair's Appraisal with the Minister for Health and Social Services**

The Minister of the Board undertakes an Annual appraisal with the Chair, including the setting of objectives, a mid-year review, and year-end appraisal of the year's performance.

#### **e) Public Health Wales Chair's review led by the Vice Chair**

An internal review was undertaken of the Chair's performance. This process was established in 2019, is repeated annually, and led by the Vice Chair. It provides an opportunity for the effective appraisal of the Chair at Board and Executive level and is in addition to the review held by the Minister for Health and Social Services. The process is based on the review format of Chairs of the Foundation Trusts and includes 360 feedbacks, and it demonstrates our commitment to a culture of openness and transparency.

#### **f) Chief Executive Appraisal**

The Chair of the Board undertakes an Annual appraisal with the Chief Executive, including setting objectives at the beginning of the year, a mid-year review, and year-end appraisal of the year's performance. The Chief Executive also has an end-of-year review with the Chair and the Director General for Health and Social Services/NHS Wales Chief Executive, in the Welsh Government, consistent with the Accountable Officer designation.

#### **g) Non-Executive Director appraisal with the Board Chair and Executive team appraisals with the Chief Executive**

The Chair of the Board undertakes a bi-annual review of the performance and personal development of Non-Executive Directors. The Chief Executive does the same with the Executive team. The process of appraisal for both groups includes objective setting, a mid-year review, and an end of year review. The Chair also meets with each Executive Director to discuss their Board member role on an annual basis.

#### **h) Board Secretary and Head of the Board Business Unit appraisal**

The Chief Executive and Board Chair undertake an appraisal with the Board Secretary and Head of the Board Business Unit and includes objective setting, a mid-year review and an end of year review.

### 4.3 Protocol for Reserving Matters to Private Session

- ❖ In accordance with the Public Health Wales Standing Orders, Public Health Wales holds its Board meetings in public, there will be occasions when some of the organisation's business is more appropriately considered in private session; to ensure that business considered is not prejudicial to the public interest - in other words that undue harm or influencing of the public unfairly does not take place.
- ❖ The Board has approved a [Protocol for the matters considered in private session](#), outlining the commitment of the Board to operate in as transparent, open and accountable a way as possible. This was reviewed by the Board during 2023/24 and an updated version was approved by the Board in July 2023.
- ❖ The document was developed to help identify the reasons that are most likely to apply to material considered by the Board in private meetings.
- ❖ From January 2022, a report was presented to each open Board session concerning the matters considered in the previous Board's private meeting. From November 2022, this report also included reference to any relevant material that had been circulated to the Board outside of the formal meetings.
- ❖ An annual review of the matters taken in private session took place for the 2022/23 period and will be repeated annually. This review was presented to the Board in July 2023, and identified suggested improvements to the protocol. These were subsequently adopted by the Board.

### 4.3 Development of the Board Assurance Framework

The annual Structured Assessment for Public Health Wales, as conducted by Audit Wales in 2022, made the following recommendation:

*'The Trust currently lacks a comprehensive Board Assurance Framework and there are currently several gaps in the Trust's sources of assurance. As part of the review of its long-term strategy, the Trust should develop a clear Board Assurance Framework.'*

*The Board Assurance Framework should:*

- ❖ address current gaps by including assurances relating to the Trust's approach to enabling better population health through preventative and sustainable measures, partnership working, and estates and other physical assets;
- ❖ include all relevant controls and sources of assurance for Board and committees;
- ❖ be regularly reviewed by the Board; and
- ❖ be used to inform Board and committee workplans.'

In our organisational Management Response to Audit Wales, we confirmed the following;

- ❖ We have all of the components of a Board Assurance Framework (BAF) which is clear in our Board agendas and our Board workplan. Each Board meeting has an agenda item dedicated to the Board Assurance Framework, including a number of components: the Chief Executive's report; the Integrated Performance Report; Managing Risk; and Reports from the Chairs of Committees of the Board.
- ❖ The Board assurance is summarised in the Board Workplan, which is reviewed by the Board at each meeting, and used as the basis for the Board and Committee work. The Terms of reference for the each of the Committee clearly outline the assurance that each are providing, and this is the basis for the workplans.
- ❖ We agreed that bringing all of this information and components that make up the BAF into a summary document would be helpful.

At its meeting on 30 November 2023, the Board approved a Board Assurance Framework.

For the 2023 Structured Assessment, Audit Wales identified the following audit criteria:

There is an up-to-date and publicly available Board Assurance Framework (BAF) in place, which brings together all the relevant information on the risks to achieving strategic priorities / objectives.

The BAF is a "live tool" which is actively owned, reviewed, updated, and used by the Board to oversee, scrutinise, and address strategic risks.

In accordance with the recommendations made and the assurances given, the draft Board Assurance Framework sought to codify existing processes and methods of assurance into one working document which the Board will review on an annual basis, from May 2024.

The BAF is structured as follows:

1. **Our Governance Framework** – setting out the governance arrangements for the organisation, the structure and role of the Board, the Business Executive Team and the Committees of the Board.
2. **Our Strategic Objectives** – setting out with reference to our Strategic Plan (our Integrated Medium Term Plan – IMTP) our clear strategic objectives.
3. **Our Strategic Risks** – Providing a link to our live and evolving Strategic Risk Register which informs the risks and controls to achievement of our Strategic Objectives.

4. **Our Model of Good Governance** – Having adopted a high performing board model based upon the McKinsey 7s Model, the BAF sets out in detail;
  - a. The functions of the Board,
  - b. Our Enablers,
  - c. How we deliver via an integrated governance model, a detailed assurance framework and clear policies and governance documents,
  - d. How we evaluate our performance as a Board, our Committees and the key individuals responsible for effective board governance within the organisation.
5. **Quality as an Organisational Strategy**
6. **Review and future development of the BAF** – we will review the BAF every 6 months but as the governance documents the BAF links to evolve over time, so will the BAF as a living and pivotal governance document for the organisation.

In summary, the BAF represents an opportunity to set out clearly the robust governance and assurance arrangement our Board has in place to achieve excellent governance standards but also to track and monitor how the Board and its Committees seek assurance through its workplans, strategic risk monitoring and the provision of high quality data and information.

*In the 2023 Structured Assessment, Audit Wales commented:*

The Trust has made good progress in consolidating its Board Assurance Framework (BAF) into a single document, with the draft agreed at the November 2023 Board meeting. The BAF is comprehensive, which the Trust intends to maintain as a live document, reviewed by the Board twice a year. However, the BAF in its current form just describes the Trust’s corporate governance arrangements.

## 5. The Purpose of the System of Internal Control

The system of internal control is designed to manage risk to a reasonable level rather than eliminate all risks. It can therefore only provide reasonable and not absolute assurances of effectiveness.

The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of the policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically. The system of internal control has been in place for the year ending 31 March 2024 and up to the date of approval of the annual report and accounts.

We use a Strategic Risk Register (SRR) system and process to monitor, seek assurance, and ensure shortfalls are addressed through the scrutiny of the Board and its committees.

Key controls are defined as those controls and systems in place to assist in securing the delivery of the Board's strategic objectives. Examples of key controls include:

- ❖ Schemes of delegation
- ❖ Policies and procedures
- ❖ Performance data
- ❖ Financial management information
- ❖ Quality and Safety processes.

The effectiveness of the system of internal control is assessed by our internal and external auditors and recommendations are routinely monitored through the tracking of internal and external recommendations.

### 5.1 Capacity to Handle Risk

As part of the planning process and development of our Strategic Plan (our Integrated Medium Term Plan – IMTP) and Long-Term Strategy, which included full engagement with stakeholders, the Board approved seven Strategic Risk descriptors on 31 March 2023. In February 2024 the Business Executive Team refocused and approved seven strategic risks.

Public Health Wales Leadership Team now owns and assesses the Corporate Risk Register. Leadership Team is a group reporting to the Business Executive Team consisting of Deputy Director level membership. This is a key development and will allow for clear interaction between corporate and strategic level risks and the operational Risk Management Framework across the organisation. Further development of the role and function of the Leadership Team in relation to

proactive risk management and in providing recommendations to the Business Executive Team in respect of specific risk escalations to a strategic level will continue.

External stakeholders are regularly invited to attend, and in some cases, take part in Board and Committee meetings. Feedback is invited and incorporated into overall Board development and risk planning.

In addition to the Risk Registers, significant work was completed to reframe the system of risk management and introduce a Risk Management Development Plan. The plan is predicated on recommendations received from Internal Audit and seeks to consolidate the good work that has been done previously and to learn lessons from the way risk has been managed throughout the pandemic. The plan includes development on risk appetite, training at all levels, and the introduction of the Risk module from the Once for Wales Concerns Management System.

A further benefits realisation roadmap has been developed to underpin and support the implementation of the objectives captured within the Risk Management Development Plan. This will be presented for formal approval from the Board in May 2024. Ongoing monitoring arrangements for the benefits realisation roadmap will mirror the arrangements that are already in place for the Risk Management Development Plan which is via the Audit and Corporate Governance Committee and reporting, by exception, to the Board.

The Board approved the Risk Management Policy and the supporting Risk Management Procedure in November 2020, which includes the requirement for an Annual Statement of Risk Appetite. As part of the Risk Management Development Plan, a review of the Risk Management Policy will be undertaken during the year to coincide with the refresh of the Risk Management Approach and Risk Appetite throughout the organisation.

In line with best practice, the statement for risk appetite was annually reviewed by the Board in June 2023, to ensure a collective understanding of risk appetite in Public Health Wales. Following the development of our Intermediate Medium-Term Plan for 2022-25, the Board did a full review of the risk appetite for all strategic themes in April 2022, this was formally approved at the Board on the 26 May 2022. Risk Management reporting processes within Public Health Wales has been iterative over the last year and continues to develop as the level of maturity in relation to Risk Management increases. Leadership Team, Business Executive Team, Committees and the Board have received various iterations of the Strategic and Corporate risk reports (in line with Terms of Reference) and a deep dive on Strategic Risk was undertaken by the Board in January 2024.

Strategic Risks are the highest-level risks that could threaten the organisation's ability to deliver on one or more of the strategic priorities, as laid out in the Strategic Plan. Strategic Risks are identified at Board level during the annual planning process. All strategic risks are assigned an Executive lead, and this person will review their

strategic risks and associated action plans on a regular basis and provide updates to both the Executive Team and Board.

The Corporate Risks are all of the operational risks that pose a direct risk to the day-to-day business of the organisation or could lead to Directorates or Divisions failing to meet their objectives. This can include:

- Operational Risk
- Health and Safety Risk
- Project / Programme Risk
- Clinical Risk
- Financial Risk
- Quality Risk
- Workforce Risk

### Risk Appetite

The strategic themes have been assessed with a risk appetite being approved for each. All strategic and corporate risks have been assessed against the risk appetite. The table below demonstrates the risk appetite by strategic theme.

Strategic Theme	Appetite Descriptor
1 Influencing the wider determinants of health	Keen
2 Promoting Mental and Social Wellbeing	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
6 Tackling the public health effects of climate change	Keen

**Figure 4** outlines the key strategic risks together with the assessed risk scores (once existing risk control measures have been taken into account) as of 31 March 2024

**Figure 4: Public Health Wales Key Strategic Risks 2023/24**

Strategic Risk	Risk Score* Max Score 20
<b>Risk of:</b> Widening gap in healthy life expectancy of population of Wales <b>Due to:</b> Cumulative effects of socio-economic, environmental and wider public health challenges	20
<b>Risk of:</b> Worsening health outcomes for the population of Wales <b>Due to:</b> misaligned system-wide efforts and leadership and weaknesses in partnership working	16

<p><b>Risk of:</b> The organisation failing to effectively engage with the public in relation to their health and wellbeing.</p> <p><b>Due to:</b> Lack of a cohesive approach between partner organisations and key stakeholders to protect the public’s health and a lack of workforce commitment, skills and capacity; failure to build relationships with stakeholders, communities and our service users; not having or utilising tools and resources to support engagement; and failure to monitor and evaluate the impact of engagement.</p>	16
<p><b>Risk of:</b> Worsening organisational health leading to an inability to recruit and retain high calibre staff, performance manage accountable officers in pursuit of strategic priorities, low staff morale and wellbeing.</p> <p><b>Due to:</b> Lack of effective organisational leadership and governance, progress towards ideal culture, ability to engage employees.</p>	16
<p><b>Risk of:</b> A sub-optimal organisational response to a public health emergency or incident and longer-term risks to public health</p> <p><b>Due to:</b> insufficient horizon scanning, forecasting, use of data/digital tools and planning/training/exercising for response.</p>	12
<p><b>Risk of:</b> Failure to deliver excellent public health services on screening, infection and health protection and compliance with the Duty of Quality</p> <p><b>Due to:</b> Weakness in systems and processes, specialist workforce capacity and capabilities, and lack of innovation.</p>	9
<p><b>Risk of:</b> Disruption to services and/or loss of confidential data in conjunction with a failure to exploit appropriate data to inform relevant public health actions.</p> <p><b>Due to:</b> Cyber incident, other external factors, weaknesses in systems and processes, silo working and lack of strategic oversight of data outputs.</p>	20

\*Note: these risks were revised and updated end of 2023/24 following appointment of the Head of Risk Management in early February 2024 and advice from specialist risk management consultancies (approved by the Board on 27 March 23).

**Figure 5:** Outlines the key corporate risks together with the assessed risk scores (once existing risk control measures have been taken into account) as of 31 March 2024.

**Figure 5: Public Health Wales Key Corporate Risks 2023/24**

Corporate risk	Risk Score* Max Score 20
Failure to effectively implement the HIA statutory regulations that form part of the Public Health (Wales) Act which requires	16

the Public Health Wales to give assistance to other public bodies carrying out health impact assessments	
Failure of organizational DBS checks to prevent unsuitable people from working with vulnerable groups, including children, therefore placing them at risk of harm, abuse and neglect.	6
Changes to alerting processes will mean that Public Health Wales stop receiving emergency and major incident alerts (risk resulting from an issue).	16
Failure to demonstrate that the quality standards and the Duty of Quality are embedded in all aspects of Public Health Wales business.	12
Public Health Wales may not have the capacity or resources necessary to effectively deliver the long-term strategic plan	12
Failure of Public Health Wales to take assurance that NHS Executive are carrying out its functions in accordance with legal and statutory obligations.	9
Failure to exploit data to inform and direct public health action and interventions.	20

\*Public Health Wales utilises a five x five matrix to calculate the risk score. This method is widely used within the NHS. Likelihood and Impact of the risk occurring are assessed on a scale of one to five, and then the two scores are multiplied to arrive at the final risk score (between one and 25 with one being the lowest). Further information can be found in the Public Health Wales [Risk Management Procedure](#).

The Executive Team approved a protocol for the reporting and oversight of risk within Public Health Wales in October 2022. The protocol confirmed the Executive Team's responsibility for reviewing the Strategic Risk Register (SRR) and the Corporate Risk Register (CRR) at its regular business meeting. It approves any amendments to the SRR and CRR, including the extension of individual action due dates.

The Board approves the Strategic Risks for the organisation and sets the risk appetite, to be reviewed on an annual basis. The Board receives the SRR three times a year and the CRR twice a year. The Board has delegated receiving assurance on the system of risk management to the Audit and Corporate Governance Committee (ACGC). Board Committees have a key role in seeking assurance against the management of risks within their remit. Each Committee considers an extract of the SRR at each meeting and an extract of the CRR bi-annually. These papers are published on our website with the relevant Committee papers. Board and Committees receive an [Executive Sponsor Insights Report](#) alongside the [Strategic Risk Register](#) and [Corporate Risk Register](#). This provides the Board and Committees with an assessment of each of the risks along with a Delivery Confidence

Assessment. Where weaknesses in assurance are identified, a full assessment is provided for consideration by the Board and Committees.

The Strategic Risk Register and Corporate Risk Register are published on our website.

There are now in excess of 100 Risk Handlers trained across the organisation whose role is to support directors and other Risk Owners, and training is offered to all senior managers who are expected to take on the responsibilities of risk owners. Guidance documents nominated Risk Handlers, and a submission form available on the web-based incident reporting and risk management software, Datix, all provide staff with support for reporting risks across the organisation. This makes the identification, reporting, and management of risks more streamlined and effective. At an operational level, Executive/Divisional directors are responsible for regularly reviewing their Directorate/Divisional Risk Registers, and for ensuring that effective controls and action plans are in place and monitoring progress.

## 6. Quality Governance Arrangements

The following arrangements are in place for assessing the quality of Public Health Wales' work.

### 6.1 Quality Governance

The Executive Director for Quality, Nursing, and Allied Health Professionals (QNAHPS) has the responsibility to ensure there are quality assurance arrangements in place, and in 2023-24 ensured alignment by working with the lead Director for Quality and Quality improvement. The Executive Director for QNAHPS is also accountable for the professional oversight arrangements for Nurses and Midwives, Health Care Scientists, Allied Health Professionals and Health Care Support Workers. The Executive Director for QNAHPS has shared responsibility with the National Director of Screening and Health Protection Services / Medical Director, for the delivery of the clinical governance framework.

The following organisational arrangements are in place for assessing the quality of Public Health Wales' work:

- ❖ Quality and Clinical Governance including Quality and Clinical Audit
- ❖ Health and Care Quality Standards – Key Lines of Enquiry are currently in development, to be introduced to the organisation in 2024/25.
- ❖ Duty of Candour and Quality
- ❖ Integrated Governance
- ❖ Putting Things Right (incidents, complaints and claims)
- ❖ 'Our Approach to Engagement' including Service User Engagement
- ❖ Infection, Prevention and Control (corporate)
- ❖ Safeguarding (corporate)
- ❖ Professional standards and oversight for Nursing/Midwifery, Health Care Scientists, AHP's and Healthcare support workers
- ❖ Improvement and Innovation.

There are a number of existing corporate groups which support the work of the Business Executive and the Board and its Committees in discharging its functions in meeting its responsibilities with regard to quality, safety and the arrangements above.

These include:

- ❖ Safeguarding Group
- ❖ Infection, Prevention and Control Group
- ❖ Information Governance Group
- ❖ Nursing and Midwifery Senedd
- ❖ Internal Flu vaccination campaign
- ❖ Medical Devices Steering Group
- ❖ Engagement and Experience Network

*(Further information on the Committees can be found in [section 3.2](#) of this report.)*

In previous years, an Annual Quality Statement (AQS) has been produced for the public and provides information about the work, function, and progress of Public Health Wales. From 2023/24 onwards, a new Annual Quality Report will be published to report on the steps Public Health Wales has taken to comply with the Duty of Quality and to show how the organisation has ensured improvement in the quality of its services. The report will include an assessment of the extent of any improvement in outcomes, and further work which needs to happen across the next stage of our Long Term Strategy delivery.

It is important to acknowledge that the quality agenda is interdependent with Public Health Wales' corporate governance, information governance and risk management arrangements and so the organisation is continuing to mature its integrated governance systems, processes, and culture within the organisation.

## 6.2 Duty of Quality

The Duty of Quality is part of the Health and Social Care (Quality Engagement) Act (Wales) 2020 and came into force in Wales on 1 April 2023 and arrangements to implement the duty in Public Health Wales are on-going.

The Duty of Quality means NHS organisations and Welsh Ministers have a duty to create a culture of quality within organisations, with a focus on improving the quality of health services and outcomes for the population on an ongoing basis.

During 2023/24, accountability for compliance with the Duty in Public Health Wales sits with the Chief Executive. Prof John Boulton, National Director of NHS Quality Improvement and Patient Safety/Director of Improvement Cymru was the identified Executive lead responsible for supporting and driving implementation of the Duty. From 1 April 2024, accountability for the Duty of Quality will be transferred to the Executive Director Quality, Nursing and Allied Health Professionals following the transition of Improvement Cymru to the NHS Executive.

Claire Birchall, Interim Executive Director of Quality, Nursing and Allied Health Professionals, represents Public Health Wales for both the Duty of Quality and Candour at the All Wales Duties of Quality and Candour Implementation Board. Members of the Improvement Cymru directorate, represent the organisation at the All Wales Duty of Quality Implementation Group.

There is regular reporting on the progress with our implementation of the Act on a monthly basis to the Business Executive Team, and quarterly reporting to the Quality, Safety and Improvement Group. In addition, the Duty of Quality and all key actions are noted on the Corporate Risk Register which is monitored through the Business Executive Team and the Quality, Safety and Improvement Committee. ([See section 3.2.2](#))

## Quality as an organisational Strategy

Quality as an Organisational Strategy (QOS) provides Public Health Wales with the methodology to operate as a system designed for managing quality, focused on continuous improvement and innovation and driven by the needs of the population we serve. This in turn creates a culture and environment that supports our staff and provides a great place for staff to work and thrive. Developing a quality management system is also a key expectation of organisations within the Duty of Quality.

The QOS programme commenced in October 2022, and a programme of workshops is underway, which explore the theory behind the five Leadership Activities in QOS now established. The membership of these workshops is pan organisation and includes those at Assistant Director level along with members of the Executive Team and the Leadership Team.

The Improvement and Innovation Hub is supporting the concurrent Improvement Efforts workstream as part of QOS and three strategic improvement priorities are being identified by the group for intensive, just-in-time improvement coaching from the hub.

### Arrangements in 2024/25

From April 2024, Improvement Cymru will move to the NHS Executive. Claire Birchall, Interim Executive Director of Nursing and Allied Health Professionals, will take over as lead within Public Health Wales for Quality. Further Information on our approach to ensure compliance with the duty of Quality can be found in the Duty of Quality Annual Report for 2023/25 (link to be added when available).

## 6.3 Duty of Candour

The Duty of Candour came into force in Wales on 1 April 2023, and arrangements to implement the Duty in Public Health Wales are continuing to be refined, building on and strengthening the fundamental principles of established 'Putting Things Right' frameworks. This provides a robust process to support 'Being Open' and includes ongoing development of policies and procedures and audit, as well as raising awareness and understanding of how the Duty applies to Public Health Wales as an NHS body.

The fundamental principle of the Duty is to promote openness, learning and improvement, which must be owned at an organisational level. The Duty of Candour procedure and reporting framework encourages reflective learning and to prevent future recurrence of adverse incidents. The Duty applies when a person to whom healthcare has been offered, received, or is receiving suffers an adverse outcome (a person suffers an adverse outcome if they experience, or could experience, any

unintended or unexpected harm that is more than minimal), and when the health care provided was or may have been a factor.

The key points within the Duty of Candour are that:

- ❖ It builds on the non-statutory duties of candour that apply to a range of healthcare professionals as part of their professional regulations.
- ❖ Organisations with an open and transparent culture are more likely to have processes and systems in place to support staff when incidents occur and promote learning and improvement.
- ❖ It requires NHS bodies, including primary care providers, to follow a procedure when a service user suffers an adverse outcome during the course of care or treatment/ has failed to be offered healthcare and suffers harm that is “more than minimal”.
- ❖ There is no element of fault or blame.
- ❖ Candour incidents and all documentation relating to the investigation are reported and stored via the Datix Cymru System
- ❖ Each organisation publishes an annual Duty of Candour report - building on existing reporting structures (Putting Things Right).

## Training

A level one e-learning package was assigned to relevant Public Health Wales staff through the Electronic Staff Record (ESR), as a role specific competency. In addition, a bespoke Level 2 training programme was developed and made available for those colleagues with clinical responsibilities, and those colleagues who investigate clinical incidents and may have Duty of Candour discussions or meetings with service users and their families.

## 6.4 Information Governance

- ❖ Public Health Wales has well established arrangements to support good Information Governance to ensure that information is managed in line with relevant information governance law, regulations and Information Commissioner’s Office guidance. The Audit and Corporate Governance Committee is responsible on behalf of the Board for receiving assurances that the Information Governance system is operating effectively and having appropriate oversight of information governance issues.
- ❖ The Senior Information Risk Owner (SIRO) is responsible for Information Governance management arrangements within the organisation, with the aim of having a consistent and comprehensive approach to information risk management. In Public Health Wales, the role of SIRO is filled by Iain Bell, National Director of Public Health Knowledge, Data and Research.

- ❖ The Caldicott Guardian (CG) is the responsible person for arrangements to protect the confidentiality of patient and service-user personal information and arrangements for appropriate information sharing. In Public Health Wales, Meng Khaw, National Director of Screening and Health Protection Services / Medical Director, performs this role. However, due to the All-Wales remit of Public Health Wales, along with the diverse services it provides, it is acknowledged that the CG requires the support of appropriate delegates to enable the duties of the role, as set out above, to be fulfilled. Deputy CGs have been identified and are required, along with the CG, to have undertaken the agreed externally provided training on an annual basis, as a requirement of the role.
- ❖ The development of the NHS Executive, which is now a hosted body within Public Health Wales, has presented a number of challenges in terms of information governance which the team has worked collaboratively across the year to mitigate. A Joint Data Controller Agreement has been signed between Public Health Wales and Welsh Government to provide structure and assurance for the data protection requirements of the Executive and the need has been identified to establish both deputy SIRO and deputy CG positions within the NHS Executive. These positions have not yet been established however and so those functions continue to still be provided by Public Health Wales until they are confirmed.
- ❖ The Head of Information Governance also holds the formal position of Data Protection Officer as required by the UK General Data Protection Regulation (UK-GDPR). This role has responsibility for supporting the SIRO in implementing the management system that delivers Public Health Wales Information Governance requirements, and for advising and informing on compliance with all relevant legislation and regulation.

An Electronic Document Records Management System (EDRMS) is in the process of being introduced to the organisation, with around 30% of staff having received training and system implementation. This is a three year delivery plan which will be complete by March 2025, where, by this time SharePoint Online will be the main EDRMS for Public Health Wales. Training is being provided by the Records Management Team, with support from an external provider and we are also utilising additional applications, such as Power BI and Power Automate to enhance user experience.

The new EDRMS will make it much easier to locate documents and records and will assist with Freedom of Information Requests, as well as preserving records that are required to be retained for longer periods of time. The system will ensure that records are deleted, destroyed or archived in line with retention requirements.

Collaborative working is also much improved with the EDRMS, supporting better version control and reducing the time it takes to finalise shared documents.

## 6.5 Health and Care Standards

As part of the implementation of the Health and Social Care (Quality and Engagement) (Wales) Act 2020, the Health and Care Standards have been reviewed to support the Duty of Quality implementation. The review process has identified the need to strengthen the approach in NHS Wales to better align to outcome/performance measures and assurance mechanisms. Welsh Government has replaced the Health and Care Standards with a new quality reporting framework, based on the Health and Care Quality Standards. The Quality Standards are framed around the six domains of quality and the six quality enablers.



The new reporting framework and the Duty of Quality sets out a clear framework for quality management that will strengthen the connection between the Duty of Quality, Quality Standards, and the wider quality management process in NHS organisations in Wales.

For this reporting year, Public Health Wales have developed Key Lines of Enquiry for each Standard. It is the intention that this will be socialised, fully implemented and assessed across 2024/25. This will be in the form of an interactive self-assessment tool for Directorates and Divisions to capture their current performance against the Standards, identify areas for improvement and capture improvement activity for next year and forthcoming years.

## 6.6 Health and Safety

The Health and Safety Group is a sub-group of the Business Executive Team, and an assurance group to the Quality, Safety and Improvement Committee.

The Health and Safety Group provides advice and assurance to the Business Executive Team, the Quality, Safety and Improvement Committee, the Board and the Accountable Officer. This assurance includes whether effective arrangements are in place to ensure organisational wide compliance with the Public Health Wales Health and Safety Policy, approving and monitoring delivery against the Health and Safety action plan and ensuring compliance with the relevant legislation and Health and Care Standards for Wales.

The Health and Safety Group receives a single Health and Safety report covering compliance, risks, incidents and health and safety issues. This enables the group to concentrate on key issues or challenges and to identify any organisational risks that require escalating to the Corporate Risk Register.

In order for the Health and Safety Group to discharge its responsibilities, it needs to receive assurance that the organisation is effectively managing health and safety. This includes details of any concerns, areas of non-compliance, outstanding actions from relevant health and safety action plans and controls and mitigations are in place.

The Health and Safety Group leads meet on a monthly basis in between each formal meeting. The terms of reference were reviewed in March 2024, and approved by the Business Executive Team.

The organisation has a number of processes in place for maintaining and monitoring health and safety compliances so that assurance can be provided, and any gaps identified with the appropriate actions required.

During 2023/24, these included:

- ❖ Undertaking and reviewing risk assessments for our premises and addressing actions to ensure our workplaces remained safe and undertaking regular compliance audits to ensure adherence with regulations.
- ❖ Actively reviewing and managing incidents and Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR's), identifying lessons learned and sharing across the organisation.
- ❖ Undertaking audits, ensuring schedules are in place, and results acted upon to ensure gaps in processes are resolved.
- ❖ Continual reviewing and updating of risk registers including the identification of issues and actions to mitigate risks.
- ❖ Reviewing and monitoring existing policies and procedures and development of new processes and procedures where required.

- ❖ Taking action to implement alerts and notifications as appropriate for the organisation. All health and safety alerts and notifications received within the reporting period have been reviewed and addressed, with appropriate actions taken where required.

The Health and Safety Group receives this assurance via the quarterly Health and Safety Report and exception reports received from the various Directorates/Divisions through the respective Health and Safety leads.

Executive oversight is the responsibility of the Deputy Chief Executive/Executive Director Operations and Finance. At an operational level, the Head of Estates (Facilities) and the Health and Safety Team continues to build a positive health and safety framework and culture.

## 7. Long Term Strategy: Working to Achieve a Healthier Future for Wales (2030)

Our new [Long Term Strategy for 2023- 2035](#) was approved by the Board on the 30 March 2023.

This revised Strategy sets out our vision for achieving a healthier future for Wales by 2035 through focusing on the delivery of our six strategic priorities that will drive our work over the long term. The Strategy has been developed through significant engagement with our staff, stakeholders and the public. We have used the Well-being of Future Generations (Wales) Act, particularly the five ways of working, as key drivers to shape the approach to reviewing our Strategy.

We have adopted a cross-organisational and multidisciplinary approach to the development of our priorities, which has seen colleagues from across the organisation lead and contribute to each of them. For each, we set out the rationale for why it is a priority, the scope, our ambitions for what Wales will look like by 2035 and a small number of system-level population outcomes.

Our strategic priorities are:

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

We have focused on ensuring that we articulate within our strategy where we, as Public Health Wales, can add the most value for the people of Wales and our partners, including our role as a system leader, where appropriate.

For each strategic priority, we have set out system-level outcomes that will help us understand our progress in delivering the strategy.

Our focus will be on clearly articulating our specific role in relation to how we:

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

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

## 8. Our Strategic Plan (Integrated Medium Term Plan)

On the 31 March 2023, the Board approved the [Strategic Plan 2023-2026](#) that was subsequently submitted to the Minister for Health and Social Services in April 2023 for approval.

The purpose of this Strategic Plan is to set out the key actions that Public Health Wales will deliver over the next three years in implementing the Long Term Strategy. In delivering our strategic priorities, we will provide system leadership to support others where appropriate, work collaboratively to mobilise the collective efforts of partners, and aim to influence policy and legislation to achieve measurable improvements to population health.

Our financially balanced Strategic Plan for 2023 – 2026 sets out the actions that we will deliver over the first three years of our new strategy. In particular, the first year of our plan will be a year of change as we transition into the delivery of our six strategic priorities. The Plan has been developed in line with Welsh Government planning requirements and is underpinned by a more detailed minimum data set. Our refreshed strategic risks will be included within the Plan once finalised.

Significant work was undertaken during early 2023 around this and the Plan has been refined, including the profiling of milestones, accordingly.

As part of our implementation, we will put in place key controls to manage and oversee the delivery of the Plan, including regularly reporting progress to the Executive Team and Board.

## 9. Mandatory Disclosures

### 9.1 Equality, Diversity and Human Rights

We are fully committed to meeting the general and specific duties set out in the Public Sector Equality Duties (2011). Control measures are in place to ensure that all the organisation's obligations under equality, diversity, and human rights legislation are complied with.

- ❖ We launched our Strategic Equality Plan for 2020–2024 in July 2020, following a consultation with members of staff and the public, and continue to work towards achieving the targets and objectives we set out in the plan. During the past year, we have been developing the next set of objectives for 2024-2028 in partnership with internal and external stakeholders. This included a Public Consultation between August – November. The new [Strategic Equality Plan](#) has now been published.

In order to support the revised Strategic Equality Plan, an implementation plan is being developed and will be published by June 2024. Corporately, the governance arrangements for equality are managed through the People and Organisation Development Committee. Progress against the actions in the Strategic Equality Plan will be reported to the People and Organisational Development Committee regularly.

In line with the Public Sector Equality Duties, we have recently published our [Annual Equality Report for 2022-23](#) highlighting progress so far. We have also published a separate report on our [Gender Pay Gap](#), which has also been reported on the Government portal. We have also reported on our employment, training, and equality data.

We recognise that we need to continue to ensure that the services we deliver are inclusive and that the workforce we have is diverse. As equality is integral to every part of our business, services areas, departments and teams are being encouraged to consider the impacts of what they are doing in relation to equality. Work must also continue, to reduce inequalities. We are engaging more with people from protected communities to inform our work. In adopting this practice, we will develop strong partnerships with people from protected communities and learn from them and with them. We were awarded Gold status in the Diverse Cymru Cultural Competence Certification Scheme, which builds on our success of achieving Silver level in 2021 and Silver Plus in 2022.

By implementing our actions in line with the Strategic Equality Plan, this work will make a significant contribution to delivering our vision for Wales.

## 9.2 Welsh Language

Responsibility for the Welsh language within Public Health Wales rests with the Director of People and Organisational Development, and oversight of operational activity is delegated to the Welsh Language Manger within the People and Organisational Development Directorate. Responsibility for Welsh language is also embedded in the responsibilities of every team across each Directorate. Each Directorate sends a representative to the Welsh Language Group, and this is the vehicle by which information is disseminated and exception reports received in order to inform statutory and organisational reporting. While all Board members demonstrate leadership and commitment towards the language, there is a Board-level Welsh-language champion, Kate Eden (from 1 March 2023 to 1 February 2024) and Neil Lewis (Director of People and Organisational Development).

Public Health Wales has statutory obligations towards the Welsh language under the Welsh Language Standards (No. 7) Regulations 2018. As a public body in Wales, we are also expected to demonstrate its contribution towards the Welsh-language goals included in the Well-being of Future Generations Act (2015), the More Than Just Words plan, the Health and Social Care Standards and the Welsh Government's Cymraeg 2050 strategy.

The People and Organisational Development Team provide regular reports for the People and Organisational Development Committee, via the Executive Team. This includes reporting against the Welsh Language Standards, as informed by exception reports from members of the Welsh Language Group as well as proactive monitoring carried out by People and Organisational Development staff. In addition, the team provides annual reports to Welsh Government against the More Than Just Words initiative and the Health and Social Care Standards and produces an Annual Welsh Language Report to be published on the Public Health Wales website by the end of September each year, in accordance with Standard 120 of the Regulations.

Our Welsh Language Network called Ymlaen, was set up in March 2023. So far, over 60 people have joined the network which looks at promoting the Welsh Language, culture and heritage, as well as supporting staff to learn and enjoy the language. The network recently organised "Welsh Language week", which involved a range of activities and speakers to celebrate the language and encourage more people to use it.

## 9.3 Handling Complaints and Concerns

We have arrangements in place to enable us to manage and respond to complaints and concerns in order to meet the requirements of the [\*NHS \(Concerns, Complaints and Redress Arrangements\) \(Wales\) Regulations 2011\*](#) and the [\*All Wales Policy Guidance for Putting Things Right\*](#). The Quality, Safety and Improvement Committee has oversight of complaints and concerns.

In 2023/24, 31 formal complaints were received. 90% (28) were acknowledged within the target five working days and 85% (27) were responded to within the 30-working day timeframe. In addition, 120 early resolution (Informal) complaints were received during the reporting period.

In 2023/24 1,842 incidents were reported. Of these incidents, two were Nationally Reportable Incidents reported to the NHS Wales Executive and one Early Warning (No Surprises) reported to the Welsh Government.

## 9.4 Freedom of Information Requests

The Freedom of Information Act (FOIA) 2000 gives the public right of access to a variety of records and information held by public bodies and provides commitment to greater openness and transparency in the public sector. In 2023/24, we received 253 requests for information which were handled under the FOIA.

186 of the total number received (74%) were answered within the 20-day target, with 67 being responded to outside of the deadline. 11 requests were received in quarter four and are still being processed.

## 9.5 Subject Access Requests

“A Subject Access Request (SAR) is a request that can be made in writing, by email or verbally asking for access to the personal information a company or organisation holds on you. This is a legal right that any individual in the UK is entitled to exercise at any point for free.”<sup>4</sup>

In 2023/24, 49 subject access requests were received. 41 of these were answered within the target of one calendar month. Four of the requests that were received in quarter four are still being processed.

## 9.6 Sustainability and Carbon Reduction Delivery Plan

We are committed to embedding sustainable development as the central organising principle of public sector bodies in Wales by ensuring a clear focus on outcomes and that strategic decisions are informed by consideration of the wider determinants of health and well-being. We recognise that sustainable development and public health are intrinsically linked and that complementary and coordinated actions are necessary to address the key challenges facing Wales in relation to both.

---

<sup>4</sup> NHS Wales: The Practice of Health (2024)  
<https://thepracticeofhealth.nhs.wales/patient-information/subject-access-request-sar-poh/>

Following the declaration of a Climate Emergency by Welsh Government in 2019, Public Health Wales has been working to reduce our carbon footprint year on year and following the launch of the NHS Wales Decarbonisation Strategic Delivery Plan, commits to working towards achieving a carbon net zero position by 2030.

During 2021/2022, Public Health Wales commissioned external resource to support the development of the organisation’s first Decarbonisation Action Plan. The Health and Sustainability Hub engaged with staff across the organisation to inform the plan development and this was approved in March 2022.

Building on learning from the development of the first plan, a revised version of the Decarbonisation and Sustainability Action Plan 2024-26 was developed internally, led by a Decarbonisation Action Working Group. Our Decarbonisation and Sustainability Plan for 2024-2026 was approved by the Board on 28 March 2024.

Our Decarbonisation and Sustainability Plan enables us to achieve our Long Term Strategy and details the action we will take over the next two years to be a carbon-negative organisation (removing more carbon dioxide from the atmosphere than we release).

This plan includes actions we are taking across the organisation to support the foundational and circular economy agendas and contribute to the goals outlined in the [Well-being of Future Generations \(Wales\) Act 2015](#). We have integrated these agendas within the plan due to the significant overlaps between them and to ensure that we have one plan that demonstrates our commitment to reducing our carbon footprint.

Our plan is split into five different activity streams and sets out the action that will be taken to reduce our carbon footprint and also work that is being undertaken to support our foundational and economy agendas.

❖ Carbon Management
❖ Buildings and our estate
❖ Transport and travel
❖ Procurement
❖ Approaches to delivering our services

### Managing our Plan

A Climate Change Programme Board was established in 2022 to oversee all action related to climate change and decarbonisation, as well as manage the new strategic priority on climate change in our Long Term Strategy 2023-2035.

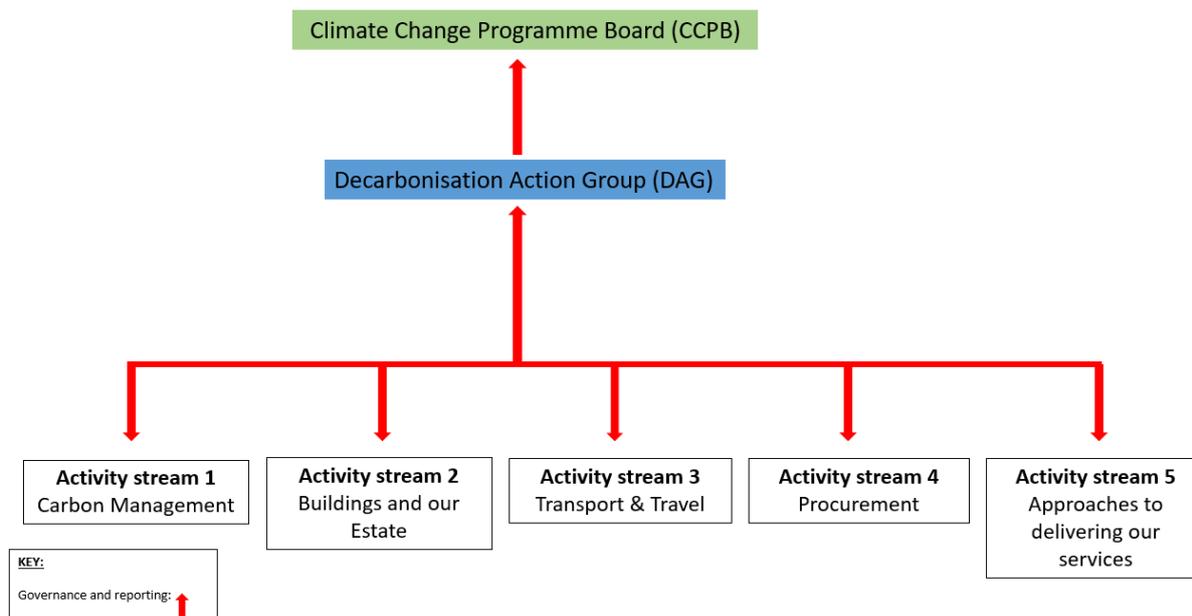
This Board reports to the Deputy Chief Executive, Executive Director Operations and Finance and aims to bring people together from across the organisation with the following aims:

- ❖ Agree a strategic direction on Public Health Wales' role in tackling the impact of climate change on public health.
- ❖ Agree a co-ordinated approach to responding to requests for evidence, information or support.
- ❖ Become an exemplar organisation in our approach to decarbonisation.

The decarbonisation work stream has been formed and, over the course of 2023/24, Public Health Wales has invested in a Programme Manager to review and develop a proposal for improved governance arrangements which will come into effect on 1 April 2024. This includes identifying a lead for each of the five activity streams set out in the plan and development of the Public Health Wales Climate Change Community of Practice that launched on 22 January 2024 to enable staff across the organisation involved in the delivery of our climate change agenda to come together and share learning and best practice.

The Climate Change Programme Board is also underpinned by the Public Health Wales Decarbonisation, Environmental Sustainability and Climate Change Collaborative (DESCCC) which aims to provide a mechanism for teams to come together to share knowledge and work collaboratively to take forward our decarbonisation, environmental sustainability and climate change agendas. It is also supported by the Green Advocates Group - an informal staff network with over 100 members, who meet every three months to discuss a range of sustainability issues, share knowledge and inspire positive change.

The diagram below outlines the governance structure for decarbonisation within Public Health Wales.



## Monitoring Implementation

Progress against the plan is monitored through the Climate Change Programme Board and progress reported to Welsh Government biannually as part of the qualitative reporting requirements. We also contribute on an annual basis to the public sector reporting quantitative reporting which involves data gathering and reporting of our greenhouse gas emissions and are members of the Welsh Government Climate Change Programme Board.

## 9.7 Emergency Planning/Civil Contingencies and Business Continuity

The Emergency Preparedness Resilience and Response (EPRR) Team are responsible for providing public health EPRR leadership at all levels across the organisation. The Civil Contingencies Act (2004) places a number of legal duties on Public Health Wales as a Category One responder, in respect of risk assessment, emergency planning, business continuity, warning and informing, sharing information and cooperating with local responders.

As a Category One responder under the Civil Contingencies Act, Public Health Wales collaborates with partners, local resilience fora, national and international health institutes in planning for, responding to and recovering from emergencies and major incidents.

Working with the four local resilience fora across Wales in 2023/2024, Public Health Wales attended Strategic and Tactical meetings, and provided further support to key risk specific subgroups such as the Risk, Chemical, Biological, Radiological and Nuclear (CBRN), Infectious Disease & Health via the EPRR Team supported by subject matter experts in areas such as environmental public health and communicable disease control to provide special advice and support.

This has led to the continued development/maintenance of effective, flexible multi-agency arrangements for use in the response to and recovery from an emergency or major incident.

The Executive Lead for Emergency Planning (or nominated deputy) has attended and remains fully engaged in the Wales Resilience Forum, chaired by the First Minister; whilst the Head of EPRR represents the organisation at Wales Resilience Partnership Team meetings to ensure that Public Health Wales remain central in terms of resilience across Wales.

In January 2024, the EPRR Team obtained organisational approval for the Health Emergency Planning Annual Report to Welsh Government, providing assurance that the organisation is fulfilling its civil protection duties as well as requirements set out in the NHS Wales Emergency Planning Core Guidance [2015].

NB. Welsh Government have delayed the 2023/24 request to submit this report due to changes in governance with the introduction of the NHS Executive in Wales. The request to submit is anticipated during Q1 2024/25.

Throughout 2023/2024 Public Health Wales has provided representation on other national groups including Wales Learning and Development Group, PREPARE Delivery Group, Emergency Planning Advisory Group and the Wales Risk Group.

The NHS landscape has changed considerably in the last twelve months with the introduction of the NHS Executive. Public Health Wales continues to support and influence the EPRR system in Wales; and the EPRR team contribute by actively leading on and collaborate with other NHS organisations on a number of the initiatives including the core standards, lessons management and the Health Prepared Wales Conference.

Public Health Wales continues to be a key contributor to the review of Civil Contingencies in Wales, providing comprehensive feedback to support the development process, ensuring arrangements such as the Pan Wales Response Plan remain fit for purpose and new products such as the Wales Resilience Outlook provide appropriate and timely advice to the system across Wales.

The organisation has also continued to Chair and lead the Four Nations Public Health EPRR Group which provides further opportunity to maintain strategic oversight of arrangements relating to the planning for and response to emergencies across the 4 Nations.

## **Emergency Planning and Business Continuity Group**

Public Health Wales has a cross organisational Emergency Planning and Business Continuity (EPBC) Group who are responsible for the coordination and delivery of EPRR activity across the organisation via a work plan. Progress is reported to the Business Executive Team via the Directorate Management Team for Health Protection and Screening Services.

The EPBC Group met quarterly throughout 2023/24 for core EPRR business, with a series of subgroups established to take forward projects focussing on issues including surge planning, inequalities and COVID-19 organisation-wide facilitated learning events.

A separate subgroup led by the EPRR Team has also continued to coordinate organisational preparedness and business continuity in response to the ongoing industrial action.

## **Emergency Response Plans and Procedures**

After a comprehensive review in 2022/23, the new Public Health Wales Emergency Response Plan (V.3) was formally approved by the Public Health Wales Board in May 2023. It details the organisation's response arrangements to any emergency or major incident that requires the mobilisation of public health resources and capabilities beyond normal operations.

As part of the workplan for 2023/24, the EPRR Team delivered an exercise to validate the arrangements. Exercise CYHYRAETH was held on 30 January 2024, using a scenario which was divided into five stages and plenary sessions, fostering engagement with good cross-organisation representation at a strategic, tactical and operational level.

The exercise evaluated well (rating of 4.8 out of 5.0) with many participants commenting positively on the credible scenario, engagement and interaction between the three levels of response. Lessons identified will be incorporated into future updates to the Public Health Wales Emergency Response Plan.

Further developments have included the introduction of a new 24/7 EPRR On-Call Service. Partners across Wales and the UK are modifying their processes for alerting - moving away from manual calls in favour of swifter digital/automated systems (automated calls, text alerts & emails) which address the recommendations from the Manchester Arena Inquiry and meet new response time standards set out by Welsh Government.

The new dedicated 24/7 EPRR On-Call Service provides a 24-hour single point of contact (SPOC), capability to receive and respond to automated calls, text alerts and emails and support from a Public Health Wales EPRR Duty Officer in response. It

ensures that Public Health Wales meets its statutory obligations under the Civil Contingencies Act 2004 and continues to receive emergency and major Incident notifications in a timely manner.

In July 2023, Welsh Government commissioned Public Health Wales (PHW) to lead a full review of the Communicable Disease Outbreak Plan for Wales. The organisation worked in collaboration with all partners to produce a revised document.

Welsh Government approved the revised version of Communicable Disease Outbreak Plan for Wales in December 2023. Post approval, EPRR has supported Public Health Wales to provide a series of multi-agency awareness sessions, hosted training events and a multi-agency exercise to validate the revised arrangements.

Public Health Wales will continue to review its emergency plans and procedures following the identification of learning through participation in exercises and in response to emergencies and major incidents. Identified learning and recommendations will be captured and monitored via the Emergency Planning and Business Continuity Lessons Management System. Progress will be reported through the Emergency Planning and Business Continuity Group.

### **Business Continuity Management**

Public Health Wales has a Business Continuity Management System (BCMS) which aims to build organisational resilience with the capability for an effective response to safeguard its critical activities, staff, stakeholders and reputation.

In 2022/23, NHS Wales Audit and Assurance Services (NWSSP) objectively considered whether continuity and recovery management plans which meet the business requirements have been established and are regularly tested and assessed for effectiveness. In reporting its findings, NWSSP 'consider (ed) that the Trust's continuity and recovery process to be well developed and used, and subject to regular test and review', and provided substantial assurance.

The EPRR Team conducted a review of BCMS documentation including the Business Continuity Strategy. The BCMS is underpinned by individual Directorate and Divisional plans which take direction from risk assessments that identify hazards and threats which the organisation needs to plan for within the context of its critical activities.

To support Directorates/Divisions to the development and maintenance of Business Continuity Plans, Public Health Wales has guidance, template business impact analyses and plans as well as an 'off the shelf exercise' which aims to form the basis for a facilitated discussion on Business Continuity preparedness.

In light of the ongoing industrial action throughout 2023, Directorates and Divisions (via the EPBC Group) were tasked with maintaining up-to-date business impact

analyses and plans to provide organisational assurance regarding the continued delivery of critical activities.

### **Training and Exercising**

Public Health Wales continues to engage in training and exercises both internally and externally. The organisation continues to conduct a live exercise every three years, a table-top exercise and a test of communications cascades every six months as required by the NHS Wales Emergency Planning Public Core Guidance.

Over the course of 2023; Public Health Wales has facilitated learning in relation to Emergency Preparedness Resilience and Response for a total of 263 staff. This included attendance at Wales Gold, Wales Silver, Debrief Training, internal Strategic, Tactical and Operational Training and the Health Prepared Wales Conference in December 2023.

The organisation has also participated in ten communication exercises and six table-top exercises coordinated by the EPRR Team. Within the last three years the organisation has also conducted seven major live/simulated exercises with multi-agency partners across Wales.

In March 2023, the EPRR Team delivered an exercise to validate the Communicable Disease Outbreak Plan for Wales. Exercise CYD was held on 19 March 2024 using a scenario which was divided into four stages and plenary sessions. The exercise evaluated well (rating of 4.6 out of 5.0) based on the evaluation returns.

### **Workforce**

Since November 2021, there has been a significant change in organisational expectation from the EPRR function in addition to the discharge of its statutory functions under the Civil Contingencies Act [2004].

In order for the EPRR function to begin meeting the extended ongoing organisational business need; Public Health Wales increased the established staff resource with the successful appointment of one EPRR Officer and one EPRR Support Officer in September 2023.

Recognising the benefit of this investment, Public Health Wales are considering options to further strengthen the EPRR establishment with a specific focus on business continuity preparedness.

## **9.9 Data Breaches**

Information Governance incidents and 'near misses' are reported through the organisation's incident management system. Since May 2018, personal data breaches (as defined in General Data Protection Regulation (GDPR)) are required to

be risk assessed and in the most serious cases reported to the Information Commissioner's Office (ICO). All data breaches are reported quarterly to the Audit and Corporate Governance Committee and where appropriate they are reported to the Welsh Government, with full incident investigations undertaken.

During 2023/24, seven reportable data breaches were recorded. All seven data breaches were reported to the Information Commissioner's Office (ICO). For six of the seven reported, the ICO response stated that they were satisfied with the action taken by Public Health Wales and that no further action was required on their part. The response for one of the incidents is yet to be received from the ICO.

## 9.10 UK Corporate Governance Code

We are required to comply with the *UK Corporate Governance Code: Corporate Governance in Central Government Departments: Code of Good Practice 2017*.

The information provided in this governance statement provides an assessment of how we comply with the main principles of the Code as they relate to an NHS public sector organisation in Wales. This assessment has been informed by the organisation's self-assessment against the Governance, Leadership and Accountability Standard (as part of the Health and Care Standards) and supported by evidence from internal and external audits.

Public Health Wales is following the spirit of the Code to good effect and is conducting its business openly and in line with the Code. The Board recognises that not all reporting elements of the Code are outlined in this governance statement but are reported more fully in the organisation's wider Annual Report.

A report was provided to the Audit and Corporate Governance Committee at its meeting on 19 March 2024 outlining how the organisation has complied with the code, the report noted that there have been no reported departures from the Corporate Governance Code.

## 9.11 NHS Pensions Scheme

As an employer with staff entitled to membership of the NHS Pension Scheme, control measures are in place to ensure the organisation complies with all employer obligations contained within the Scheme regulations. This includes ensuring that deductions from salary, employer's contributions, and payments in to the Scheme are in accordance with the Scheme rules, and that member Pension Scheme records are accurately updated in accordance with the timescales detailed in the Regulations.

## 9.12 Ministerial Directions

Whilst Ministerial Directions are received by NHS Wales organisations, these are not always applicable to Public Health Wales. Ministerial Directions issued throughout the year are listed on the Welsh Government [website](#). The Ministerial Directions (Non-Statutory Instruments) issued by the Welsh Government were reviewed, 2 required action from Public Health Wales during 2023/24 as shown in the table below.

<b>Ministerial Directions (MDs)</b>	<b>Date</b>	<b>Compliance</b>
<a href="#">The Duty of Candour statutory guidance 2023</a>	1 April 2023	Assessed and is applicable to Public Health Wales. The Act came into force on 1 April 2023. This statutory guidance is aimed at helping the NHS Bodies to deliver the requirements of the duty of candour. Public Health Wales is compliant with the act and reports quarterly to the Quality, Safety and Improvement Committee for assurance.
<a href="#">The NHS (General Medical Services Contracts) (Wales) Regulations 2023: integrated impact assessment</a>	9 May 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Primary Care (E-Prescribing Pilot Scheme) Directions 2023</a>	1 June 2023	Assessed and not applicable to Public Health Wales
<a href="#">NHS (General Medical Services contracts) (Wales) Regulations 2023</a>	17 July 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Primary Medical Services (Influenza and Pneumococcal Immunisation Scheme) (Directed Enhanced Service) Wales) (No. 2) (Amendment) Directions 2023</a>	28 July 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Nursery Milk Scheme (Wales) (Amendment) Directions 2023</a>	31 July 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2023</a>	7 August 2023	Assessed and not applicable to Public Health Wales
<a href="#">Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2023</a>	30 August 2023	Assessed and not applicable to Public Health Wales

<a href="#">Amendments to Model Standing Orders and Model Standing Financial Instructions – NHS Wales (WHC/2023/032)</a>	24 October 2023	Assessed and is applicable to Public Health Wales and has been enacted. Standing Orders were approved by the Board in 2023.
<a href="#">The National Health Service (Wales Eye Care Services) (Wales) Directions 2023</a>	26 October 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Low Vision Service Committee (Wales) Directions 2016 (with consolidated amendments)</a>	26 October 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Eye Health Examination Service Committee (Wales) Directions 2016 (with consolidated amendments)</a>	26 October 2023	Assessed and not applicable to Public Health Wales
<a href="#">Statement of general ophthalmic services remuneration and fee Directions</a>	24 November 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Medical Examiners (Wales) Regulations 2024</a>	14 December 2023	Assessed and not applicable to Public Health Wales
<a href="#">Death certification reform</a>	5 January 2023	Assessed and not applicable to Public Health Wales
<a href="#">The Eye Health Examination Service Committee (Wales) Directions 2016 (with consolidated amendments)</a>	15 December 2024	Assessed and not applicable to Public Health Wales
<a href="#">The Low Vision Service Committee (Wales) Directions 2016 (with consolidated amendments)</a>	5 January 2024	Assessed and not applicable to Public Health Wales
<a href="#">Wales Eye Care Services (Administrative List) (Wales) Directions 2024</a>	5 January 2024	Assessed and not applicable to Public Health Wales
<a href="#">Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2024</a>	14 February 2024	Assessed and not applicable to Public Health Wales

<a href="#">The National Health Service Joint Commissioning Committee (Wales) Directions 2024</a>	29 February 2024	Assessed and not applicable to Public Health Wales
<a href="#">The National Health Service (Wales Eye Care Services) (Wales) Directions 2024</a>	22 March 2024	Assessed and not applicable to Public Health Wales
<a href="#">The Wales Infected Blood Support Scheme (amendment) Directions 2024</a>	27 March 2024	Assessed and not applicable to Public Health Wales
<a href="#">The National Health Service (Wales Eye Care Services) (Wales) (No. 2) Directions 2024</a>	28 March 2024	Assessed and not applicable to Public Health Wales

Welsh Health Circulars (WHC's) issued by Welsh Government are logged by the Board Business Unit and the organisations compliance with these are reported to the Audit and Corporate Governance Committee on a bi-annual basis.

A list of WHC's issued by Welsh Government during 2023/24 is available at:  
<https://gov.wales/health-circulars>

We have acted upon, and responded to, all Welsh Health Circulars (WHCs) issued during 2023/24 which were applicable to Public Health Wales.

Of the 48 issued

- 29 of these were applicable to Public Health Wales
  - 23 were for action.
  - 1 was for information and
  - 5 were for compliance.
- 19 were not applicable to Public Health Wales

The following 29 WHCs were applicable to Public Health Wales:

WHC No.	Title	Status	Compliance
WHC 2023/6	Commencement of the Health and Social Care (Quality and Engagement) (Wales) Act 2020	Action	This WHC has been enacted: the Act came in to operation on 1 April 2023. The implementation of the requirements of this Act are monitored at both Business Executive Team and Board level on an ongoing basis.
WHC 2023/7	Patient Testing Framework – Updated guidance	Action	This WHC has been enacted: The Organisation provided advice to inform the revised testing strategy. It is not directly applicable, but will be used to inform the advice sought from the Organisation and testing is undertaken in the Organisation's laboratories.
WHC 2023/9	COVID-19 vaccination of children aged 6 months to 4 years in a clinical risk group	Action/ Information	This WHC has been enacted: The WHC sets out the operationalisation of the recent JCVI advice on COVID-19 vaccination for infants in clinical risk groups. Public Health Wales VPDP have built the requirement to provide surveillance for this cohort into its processes for routine surveillance. We are also providing training and Patient Group Directions to allow Local Health Boards to safely and legally administer the vaccine and developed the appropriate public information resources to support vaccination.
WHC 2023/12	2023/24 LHB, SHA & Trust Monthly Financial Monitoring Return Guidance	Compliance	This WHC has been enacted, and we are complying with the guidance and requirements within the WHC for monthly financial monitoring returns for 2023/24
WHC 2023/13	Health and Care Quality Standards 2023 (replacing Health and	Action	This WHC has been enacted. Relevant action was incorporated into the planning for the Duty of Quality for Public Health Wales and in the introduction of a new Clinical Governance Framework launched in August 2023.

WHC No.	Title	Status	Compliance
	Care Standards 2015 - (WHC 2015/015)		A new Clinical Governance Framework was implemented in August 2023 to support Health and Care Quality Standards 2023
WHC 2023/15	COVID-19 Vaccination Observation Periods/ Vaccination following recovery from COVID-19	Action/ Information	This WHC has been enacted: The Organisation has ensured that the policy outlined in the Welsh Health Circular has been included in all appropriate training and professional facing advice.
WHC 2023/16	Implementing the move to one dose of the HPV vaccine in Wales	Action/ Information	This WHC has been enacted: HPV vaccination is delivered by Local Health Boards in schools (normally in the spring term of Years 8 and 9). These changes which reduce the number of doses. The Organisation's Vaccine Preventable Disease Programme provide supporting materials and public information for the programme. All materials require revision ahead of the change.
WHC 2023/17	NHS Wales Executive National Policy on Patient Safety Incident Reporting and Management	Action	This WHC has been enacted: The Patient safety incident policy is operational in the Organisation and referenced in our training and on our SharePoint page. The WHC has therefore been actioned.
WHC 2023/18	Introduction of HL7 FHIR as a foundational standard in all NHS Wales Bodies.	Compliance	This WHC has been enacted. The Design Authority adopted this Policy for new projects and procurements from 9 October 2023.
WHC 2023/21	Consent to Examination or Treatment - update	Action	This WHC has been enacted: the national competency has been assigned on ESR to relevant roles and reporting commenced from 31 December 2023.
WHC 2023/22	Armed Forces Covenant – Healthcare Priority / Special Consideration for	Action	This WHC has been enacted: The Armed Forces Covenant is operational within the Organisation and is overseen by an Armed Forces Group chaired

WHC No.	Title	Status	Compliance
	Veterans / Ex-Armed Forces Personnel		by the Executive Director of Quality, Nursing and Allied Health Professionals.
WHC 2023/23	The National Influenza Immunisation Programme 2023-24	Action/Information	This WHC has been enacted: Public Health Wales commenced the planning and implementation of the internal staff Influenza Immunisation Programme in line with this WHC. The Internal Influenza Vaccination Delivery Plan 2023-24 was provided to QSIC 18 July 2023, and the Committee was asked to consider and take assurance from the plan.
WHC 2023/24	Change of vaccine and cohort expansion for shingles vaccination programme (from September 2023)	Compliance / Action/ Information	This WHC has been enacted: We have ensured that the policy outlined in the Welsh Health Circular has been included in all appropriate training, public and professional facing advice. Public Health Wales have supported changes to recording and are developing updated surveillance products to support monitoring of the uptake of shingles vaccination.
WHC 2023/25	Guidelines for managing patients on the suspected cancer pathway	Information /Governance/Performance/Delivery	This WHC has been enacted: This WHC is relevant to Public Health Wales as the three cancer screening programmes are included in the single cancer pathway as they identify a person who is suspected to have a cancer. The points of suspicion are confirmed in Annex 1 of the WHC for referral from Breast Test Wales, Bowel Screening and Cervical Screening. All of the cancer screening programmes are in line with the WHC around referral from point of suspicion and work closely with health boards for prompt referral.
WHC 2023/26	NHS Framework for research and development – Research Matters – What excellence looks like in NHS Wales	Compliance /Action/ Information	This WHC has been enacted. Relevant actions and activities described in the NHS R&D framework have been incorporated into our new Research and Evaluation Strategy for Public Health Wales. During the course of developing the strategy, we aligned our strategy to the NHS R&D Framework. We are developing an implementation plan for our strategy and have set up an oversight group to oversee this. The implementation of the Public Health Wales Strategy will be closely monitored. Within the

WHC No.	Title	Status	Compliance
			Public Health Wales strategy there is a commitment to work more closely with a wide range of research partners.
WHC 2023/29	Winter Respiratory Vaccination Programme: Autumn and Winter 2023 to 2024	Action	This WHC has been enacted: This Welsh Health Circular published Welsh Government Policy vaccine cohorts and programme ambitions for flu and COVID-19 in Autumn/Winter 2023. Public Health Wales VPDP support all partners with enabling materials to facilitate vaccination. The eligibility criteria outlined in the WHC have been put into all appropriate materials published.
WHC 2023/32	Amendments to Model Standing Orders and Model Standing Financial Instructions – NHS Wales	Compliance	The WHC has been enacted. The revised SO and SFI were considered and approved by the Board on 28 September, and the updated versions have been published on the website.
WHC 2023/33	Vaccine Products to be used in the Autumn 2023 COVID-19 Vaccination programme	Compliance /Action/ Information	This Welsh Health Circular published Welsh Government Policy on vaccine products for use in the Autumn of 2023, following on from JCVI advice published on 31 August 2023. Public Health Wales VPDP has been supporting Vaccine Programme Wales and local health boards with training and enabling resources to facilitate the implementation of this Welsh Health Circular. All information contained in this circular will be put into training materials and other enabling resources. Public Health Wales has provided public health advice on prioritisation to CMO on 31 August 2023 to support the response to the BA.2.86 variant, and this Welsh Health Circular puts this advice into policy.
WHC 2023/34	NHS Welsh Sustainability Awards	Action	This WHC has been enacted: The information has been circulated and cascaded to promote the NHS Welsh Sustainability Conference and Awards information, through their staff networks and communications channels.

WHC No.	Title	Status	Compliance
WHC 2023/36	Speaking up Safely Framework - NHS Wales	Compliance	This WHC has been enacted: The Speaking Up Safely Framework was endorsed by the Board on 26 October, and the Board has submitted an Action Plan to Welsh Government outlining how the plan will be implemented and the outstanding actions to be completed to embed the framework Implementation will be monitored through the People and OD Committee.
WHC 2023/38	Healthy Start eLearning course	Action	This WHC has been enacted: A review of our workforce has been undertaken to identify positions which will require this competency.
WHC 2023/43	Vaccination of Healthcare Staff to Protect Against Measles	Compliance /Action/ Information	This WHC has been enacted: The relevant information was considered by the Business Executive Team, including mitigation measures.
WHC 2023/46	All-Wales Control Framework for Flexible Workforce Capacity	Action	This WHC has been enacted: The deadline for phase 1 of this work was extended to 19 January 2024. Baseline data was collated and responded to Welsh Government before 19 January 2024. Relevant action has been taken to provide an initial response and a small working group will take forward the longer-term action required to ensure compliance with this WHC.
WHC 2023/47	Influenza Vaccines and Eligible Cohorts for the 2024/25 season	Compliance /Action/ Information	This WHC will be enacted as part of the implementation of the flu vaccination campaign: Public Health Wales will ensure that the information on eligible cohorts is included in all public and professional communications for the 24/25 season. Furthermore, Public Health Wales will note the phased start to the adult campaign as part of its planning for the internal staff flu campaign.
WHC 2024/2	Standards for Competency Assurance of Non-Medical Prescribers in Wales	Action	This WHC has been enacted. We have agreed our nominated lead and have undertaken an assessment of any non medical prescribers in Public Health Wales by 1st week of May 2024. Following this the following action will be taken:

WHC No.	Title	Status	Compliance
			<ul style="list-style-type: none"> <li>Assess any NMPs against these standards.</li> <li>Develop an assurance mechanism going forward for any newly appointed NMPs.</li> </ul>
WHC 2024/8	Vaccination against measles – urgent action	Compliance	<p>This WHC has been enacted: The following information is provided:</p> <ul style="list-style-type: none"> <li>Data an epidemiology – Public Health Wales have to produce a bespoke surveillance report on measles in schools and produce this on a monthly basis until July 2024. We are developing the analyses and delivered the first baseline report by in February, and will produce routinely from this point forward.</li> <li>Information assets - Public Health Wales have provided some assets and resources to support local delivery in catch up or outbreaks settings. More resources will be developed in coming weeks to support need. A comms and engagement plan has been submitted to Vaccine Programme Wales to support local delivery.</li> <li>Workforce and training - Public Health Wales are required to deliver 2 training packages. An MMR webinar is scheduled for the 28 Feb ahead of the end of Feb deadline set in the WHC. We are also developing a train the trainer session for health protection and vaccination teams and are on schedule to deliver towards the end of March ahead of the deadline set.</li> <li>outbreak actions - Health protection teams are looking at data around testing of cases to ensure that there are robust pathways in place for testing suspected measles cases.</li> </ul>

WHC No.	Title	Status	Compliance
WHC 2024/9	COVID-19 spring booster vaccination programme 2024	Action	This WHC has been enacted: The WHC sets out the operationalisation of the recent JCVI advice on COVID-19 booster vaccination for those who are over 75, resident in care homes for older adult or a severely immunosuppressed. Public Health Wales Vaccine Preventable Disease Programme (VPDP) have built the requirement to provide surveillance for this cohort into its processes for routine surveillance. We have also provided training and supported other enabling actions to allow Local Health Boards to safely and legally administer the vaccine, and developed the appropriate public information resources to support vaccination.
WHC 2024/10	NHS Welsh Sustainability Conference and Awards	Action	This WHC has been enacted: Public Health Wales has cascaded and promoted the NHS Welsh Sustainability Conference and Awards information and new dates through their staff networks and communications channels. It has also been shared with the Climate Change Programme Board
WHC 2024/12	Nursing Preceptorship & Restorative Clinical Supervision - A National Position Statement	Compliance /Action	This WHC has been enacted. Public Health Wales has already established systems and processes to support the principles of Preceptorship and Clinical Supervision, but will more formally adopt the principles and expectations outlined within this WHC, with appropriate reporting as defined within it.

## 10. Hosted Bodies – NHS Executive

From 1 April 2023, we have been the host organisation for the NHS Executive.

The Welsh Government decision to establish an executive function was set out in *A Healthier Wales* and based on the findings and recommendations of both the OECD Quality Review and the Parliamentary Review of the Long-term Future of Health and Social Care. Both set out the need for a stronger centre, additional transformational capacity and streamlining of current structures.

The NHS Executive for Wales ('the NHS Executive') has been established under a Mandate from the Welsh Ministers as a 'hybrid' model, comprising a senior team within Welsh Government, supported by the bringing together of defined national bodies in the NHS in Wales into a single delivery and accountability structure.

The agreement between Public Health Wales and Welsh Government to host the NHS Executive was approved by the Board on 26 January 2023. The agreement sets out appropriate governance and reporting arrangements for the NHS Executive (NHS based) to ensure that hosting arrangements are clear and transparent and that the rights and obligations of all parties to this agreement are documented and agreed.

Phase 1 of the NHS Executive hosting arrangement was implemented within 2023-24 in accordance with the Hosting Agreement.

Phase 2 of the NHS Executive hosting arrangement commenced from 1 April 2024 and, following the Board approving an addendum to the Hosting Agreement, detailed service provision documents and a detailed assurance schedule are in development to ensure sound governance arrangements remain in place with clear levels of hosting provision.

Under phase 1, the services of the NHS Executive included services previously delivered by;

- ❖ The NHS Wales Health Collaborative
- ❖ The NHS Wales Delivery Unit
- ❖ The NHS Wales Finance Delivery Unit
- ❖ Improvement Cymru

From 1 April 2024, the following additional functions will move into the NHS Executive;

- ❖ Digital and data;
- ❖ Innovation and value;
- ❖ Workforce delivery;
- ❖ Emergency planning;
- ❖ National Clinical Framework – Implementation arrangements.
- ❖ The transfer of Improvement Cymru to hosted status and the proposed transfer of the National Programme Urgent and Emergency Care (6 Goals) and the Strategic Programme for Primary Care to align with the other Directorates of the NHS Wales Executive.

Work is also underway to bring TEC Cymru into the NHS Executive within 2024/25.

From May 2024, a detailed Assurance Schedule will be in place to facilitate the NHS Executive providing assurance to our Committees and the Board throughout the year. In addition, an Annual Assurance Statement and Report from NHS Executive will be provided at the end of year.

## 11. Staff and Staff Engagement

We engage with our staff in a number of ways which are part of the checks and balances we undertake to support and enable good governance.

In support of the Board and Executive, we have a formal advisory group - the Local Partnership Forum.

The Local Partnership Forum has met 5 times during 2023/24 and has considered the following matters:

- Sharing progress and support to the development of the Strategic Equality Plan; Culture Assessment; Work How it Works Best; our People Promise (Employee Value Proposition).
- Sharing of organisational performance and assurance data to update on key achievements, risks and developments.
- Organisational change programme updates and support to the development of improved resources for staff experiencing change and managing/ leading change.
- Proposals for governance arrangements relating to Partnership working at Board.
- Update on the organisation's Long-term Strategy and Integrated Medium Term Plan.
- Job evaluation process improvements and updated job description templates.
- Update on the new Speaking Up Safely framework and involvement in the supporting organisational protocol.
- Policy review and development.

The Forum has endorsed several new or updated policies for approval. In addition to this formal meeting, we have established an informal meeting which meets monthly to address more operational issues.

There is a well-established Joint Medical and Dental Negotiating Committee. During 2023/24, and we have continued informal monthly meetings with representatives from this group.

We also have a consultation process open to all staff for all new and revised organisational policies, staff diversity networks and engagement events, all of which are used to hold meaningful individual and group conversations with our colleagues. These mechanisms are used in parallel with other ways for staff to share their work and opinions, including the staff intranet, Viva Engage (Yammer) and a Public Health Wales Staff Facebook group.

During 2023/24, we have continued to engage with consultant colleagues (medical and multi-professional) through the establishment of a Consultant Engagement group, to which all consultant colleagues are invited to attend. Chaired by the Deputy Medical Director, this provides a forum for consultants to come together collectively to support each other and work together towards greater consultant engagement within Public Health Wales on issues that matter to them.

## 12. Review of Effectiveness

As Chief Executive and Accountable Officer, I have responsibility for reviewing the effectiveness of the system of internal control. The review of the system of internal control is informed by the work of the internal auditors, the Executive Directors, and all Executive Team Directors, within the organisation who have responsibility for the development and maintenance of the internal control framework, and comments made by external auditors in their audit letter and other reports.

The Board and Committees have reviewed the effectiveness of the system of internal control in respect of the assurances received. The Strategic Risk Register is the mechanism for close monitoring of strategic risks and is scrutinised by the Board and Committees. On reviewing the system of internal control, I can confirm that it is effective in providing the necessary assurance to the Board and Committees.

The four standing Committees undertook a self-assessment during 2023/24 via Committee Effectiveness questionnaire, and a workshop session to discuss the findings and outcomes of the survey. The outcomes of these discussions will feed into the wider review of Board effectiveness scheduled for Quarter 1 2024.

*(Further information on the Effectiveness cycle can be found in [section 4.2](#) of this report.)*

### 12.1 Internal Audit

Internal audit provides the Accountable Officer, and the Board through the Audit and Corporate Governance Committee, with a flow of assurance on the system of internal control. As Chief Executive, I have commissioned a programme of audit work which has been delivered in accordance with the Public Sector Internal Audit Standards by the NHS Wales Shared Services Partnership. The scope of this work is agreed with the Audit and Corporate Governance Committee and is focussed on significant risk areas and local improvement priorities.

The overall opinion by the Head of Internal Audit on governance, risk management, and control is a function of this risk based audit programme and contributes to the picture of assurance available to the Board in reviewing effectiveness and supporting our drive for continuous improvement.

The Head of Internal Audit has concluded (taken from Head Internal Audit Annual Opinion):

The overall opinion for 2023/24 is that:

<b>Reasonable assurance</b>		<p>The Board can take Reasonable Assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with low to moderate impact on residual risk exposure until resolved.</p>
-----------------------------	-----------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

### Summary of Audits 2023/24

Review Title	Assurance Rating	Objective of Review
Welsh Risk Pool	Substantial	WRP guidance requires Internal Audit to review the process. This review is undertaken each year.
Follow up - Population health grants management	Substantial	Provide the trust with assurance regarding the implementation of and progress against the agreed management responses from the Population Health Grants Management Audit (Limited assurance)
Board assurance – Committee work planning	Substantial	Consider the structure and assess the operation of the Committees to ensure effective and efficient reporting, scrutiny and decision making on areas of accountability.
Finance – Use of procurement cards	Reasonable	To consider monitoring, governance and reporting arrangements.
Business Continuity and Technical Resilience	Reasonable	To consider the Trust’s approach to business continuity following the internal documentation.
Work Programmes	Reasonable	To consider management and approach programmes that are funded by grants.
IT infrastructure and network management	Reasonable	To evaluate and determine the adequacy of the systems and controls in place for the management of the IT infrastructure assets and network management.
Appraisal process – Consultants employed by Public Health Wales	Reasonable	To review the appraisal process for Public Health consultants within Public Health Wales.
Incident reporting	Reasonable	To consider the governance and reporting arrangements in relation to the management of incidents.
Contracts management	Reasonable	To consider monitoring, governance and reporting arrangements in relation to contracting arrangements.
<b>Limited Assurance</b>		
<b>None</b>		
<b>No Assurance</b>		

Review Title	Assurance Rating	Objective of Review
None		
Advisory/Non-Opinion		
None		

The audit work undertaken during 2023/24, was reported to the Audit and Corporate Governance Committee. These detailed results have been aggregated to build a picture of assurance across the organisation.

The Head of Internal Audit is satisfied that there has been sufficient internal audit coverage during the reporting period in order to provide the Head of Internal Audit Annual Opinion. In forming the Opinion, the Head of Internal Audit has considered the impact of the audits that have not been fully completed.

There have been no Limited Assurance Internal Audits reported in 2023/24. There was one Limited Assurance report relating to Population Health Grant Funding which has been monitored during 2023/24 with regular update reports to the Audit and Corporate Governance Committee on the progress with the implementation of management actions arising from the review.

## 12.2 Counter Fraud

Public Health Wales receives its Counter Fraud Provision from Cardiff and Vale University Health Board (CAVUHB). This provision is operated under a Service Level Agreement. Public Health Wales pay for a Counter Fraud provision of 100 days of service annually. The Counter Fraud team at CAVUHB is staffed by four Counter Fraud Specialists. The team work in compliance with the NHS Counter Fraud Authority Standard Requirements in order to provide the Cabinet Office led consistent approach to countering fraud in the public sector. This involves developing an anti-fraud culture through the provision of, an education and awareness strategy, strategic planning, risk assessment and proactive work, and the investigation of all allegations of fraud.

The Counter Fraud Team liaise with internal and external partners including Internal Audit, Audit Wales, the Counter Fraud Service (Wales), NHS Counter Fraud Authority, the police, and the Home Office Immigration and Enforcement teams, and the Crown Prosecution Service.

During the course of this financial year a total of (16) new referrals have been received by the team. (10) of these were informally resolved and (6) were promoted to formal investigation. Three of those formal investigations have been closed with no further action being required.

As of 31st March 2024, there are (3) investigations open and being actively investigated by the team.

Counter Fraud reports and updates are provided to the Audit and Corporate Governance Committee throughout the year. At the beginning of the year an Annual Workplan is provided to Committee that has been reviewed and endorsed by the Executive Director of Finance. At the close of the year the Counter Fraud Manager provides to committee an Annual Report of the work carried out by the team. In addition, a Functional Standard Return is completed and sent to the NHS Counter Fraud Authority compliance and quality assurance team outlining the activities of the team during the year and identifying how the organisation has achieved compliance with the NHS Counter Fraud requirements.

## 12.3 External Audit – Audit Wales

The Auditor General for Wales is the statutory external auditor for the NHS in Wales. Audit Wales (AW) undertakes the external auditor role for Public Health Wales, on behalf of the Auditor General.

Each year a Structured Assessment report completed, for 2023, AW reported:

*‘Overall, we found that the Trust has effective arrangements to ensure good governance, with sound approaches in place to develop and monitor its plans and manage its finances. Opportunities exist to improve the timeliness of committee meetings and further strengthen some of the Trust’s corporate systems of assurance.’*

*‘...The Board and its committees operate well, and maintain a good focus on public transparency, hearing from staff and service users, and continuous improvement. The Board remains cohesive and changes in membership have been managed well, although a gap has presented a challenge. Quality of papers is generally of a good standard with appropriate action being taken to improve this further. Opportunities exist to consider the timing of committee meetings.’*

*‘...the Trust is continuing to strengthen its corporate systems of assurance related to performance and quality governance. The Trust’s approach to identifying strategic risks is improving, and the Board Assurance Framework is now consolidated into a single document. However, arrangements for managing strategic and corporate risks, and tracking recommendations need further work.’*

*‘...the Trust has a sound approach to developing and monitoring the delivery of its strategies and plans, with a new long-term strategy in place and a strengthened approach to demonstrating impact. The Trust overall has a sound approach to managing its financial resources.’*

These recommendations will be taken forward in 2024/25, and reported to the Audit and Corporate Governance Committee.

## 13. Conclusion

As Accountable Officer, I have responsibility for reviewing the effectiveness of the system of internal control. My review of the system of internal control is informed by the work of the internal auditors and the Executive officers (including the Executive Team Directors) within the organisation who have responsibility for the development and maintenance of the internal control framework, and comments made by external auditors in their audit letter and other reports.

This Annual Governance Statement confirms that Public Health Wales has continued to mature as an organisation and no significant internal control or governance issues have been identified. The organisation will continue to address key risks and embed good governance and appropriate controls throughout the organisation.

This Annual Governance Statement provides a summary of the steps the organisation is taking to demonstrate that we operate in accordance with the governance standards and the wider standards framework. This report demonstrates the evidence that we comply with these standards.

I can confirm that the Board and the Executive Team has had in place a sound and effective system of internal control, which provides regular assurance, aligned to the organisation's strategic objectives and strategic risks.

**Signed:** xxx Date: xx/xx/xxxx

**Dr Tracey Cooper**  
**Chief Executive and Accountable Officer, Public Health Wales**