



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

Annual Report 2022/23

Section 2

Accountability Report

DRAFT

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.



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

Part A: Corporate Governance Report

DRAFT

Public Health Wales Directors' Report 2022/23

In accordance with the Financial Reporting Manual (FReM), 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 Register of Interests 2022/23
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 Data Breaches section (section xx) of this the Annual Governance Statement.
Information on environmental, social and community issues.	See section xx 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 xx Date: xx

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:	Xx	xx
Chief Executive:	Xx	xx
Director of Finance:	Xx	xx

Annual Governance Statement

Contents

1.	Introduction	66
2.	Scope of Responsibility	67
3.	Governance Framework.....	68
3.1	The Board	71
3.1.2	Variations to the Standing Orders	71
3.1.3	Board Development and Briefing sessions	80
3.1.5	Board Activity	73
3.2	Committees of the Board.....	80
3.2.1	Audit and Corporate Governance Committee	85
3.2.2	Quality, Safety and Improvement Committee	87
3.2.3	People and Organisational Development Committee	91
3.2.4	Knowledge, Research and Information Board Committee	94
3.2.5	Remuneration and Terms of Service Committee.....	97
3.2.5	UK COVID-19 Public Inquiry Preparedness Sub-Group .	97
3.3	Executive Governance.....	101
3.3.1	Business Executive Team.....	101
3.5	Board and Executive Team Membership.....	104
3.5.1	Departure and appointment of Non-Executive Directors	104
3.5.2	Board Succession Planning.....	105
3.5.3	Senior Staff Appointments and Departures.....	105
3.5.4	Staff Representation at Board and Committee Meetings	106
3.5.5	Board Diversity and Inclusion	106
4.	Improvements to the Governance Framework	108
4.1	Review of the Board Committee Terms of Reference...	108
4.2	Performance and Effectiveness Cycle.....	108
4.3	Protocol for Reserving Matters to Private Session	110
5.	The Purpose of the System of Internal Control.....	112
5.1	Capacity to Handle Risk	112
6.	Quality Governance Arrangements.....	116
5.1	Quality, Nursing and Allied Health Professionals Directorate	116
5.2	Information Governance.....	120
5.3	Duty of Candour	119
7.	Health and Care Standards	121

Annual Governance Statement 2022/23

8.	Health and Safety.....	122
9.	Long Term Strategy: Working to Achieve a Healthier Future for Wales (2030) 124	
10.	Our Strategic Plan (Integrated Medium Term Plan).....	126
11.	Mandatory Disclosures	127
	11.1 Equality, Diversity and Human Rights	127
	11.2 Welsh Language	128
	11.3 Handling Complaints and Concerns	129
	11.4 Freedom of Information Requests	129
	11.5 Subject Access Requests	129
	11.6 Sustainability and Carbon Reduction Delivery Plan	130
	11.7 Emergency Planning/Civil Contingencies	132
	11.8 Business Continuity	134
	10.9 Data Breaches	135
	10.10 UK Corporate Governance Code	136
	10.11 NHS Pensions Scheme.....	136
	10.12 Ministerial Directions	137
12.	Hosted Bodies.....	146
	11.1 NHS Wales Health Collaborative	146
	11.2 Finance Delivery Unit	147
	11.3 NHS Executive	147
13.	Staff and Staff Engagement	148
14.	Review of Effectiveness	150
	13.1 Internal Audit	150
	13.2 Counter Fraud.....	153
	13.3 External Audit – Audit Wales	153
15.	Conclusion.....	154

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 2022/23.

This Annual Governance Statement is intended to demonstrate to the Welsh Government how we managed and controlled resources in 2022/23 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 Her 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 10 May 2023. This final version was presented to the Committee on the (DATE) for recommendation to the

Board for approval on the (DATE). The Board approved this Statement for submission to Welsh Government at a Board meeting on the 28 July 2023

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 these 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.¹ 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

¹ Public Health Wales has fully adopted the model Standing Orders, with one amendment to Section 6.4.3: changing the circulation of agenda and supporting papers to Board/Committee members from 10 to 7 calendar days before a meeting.

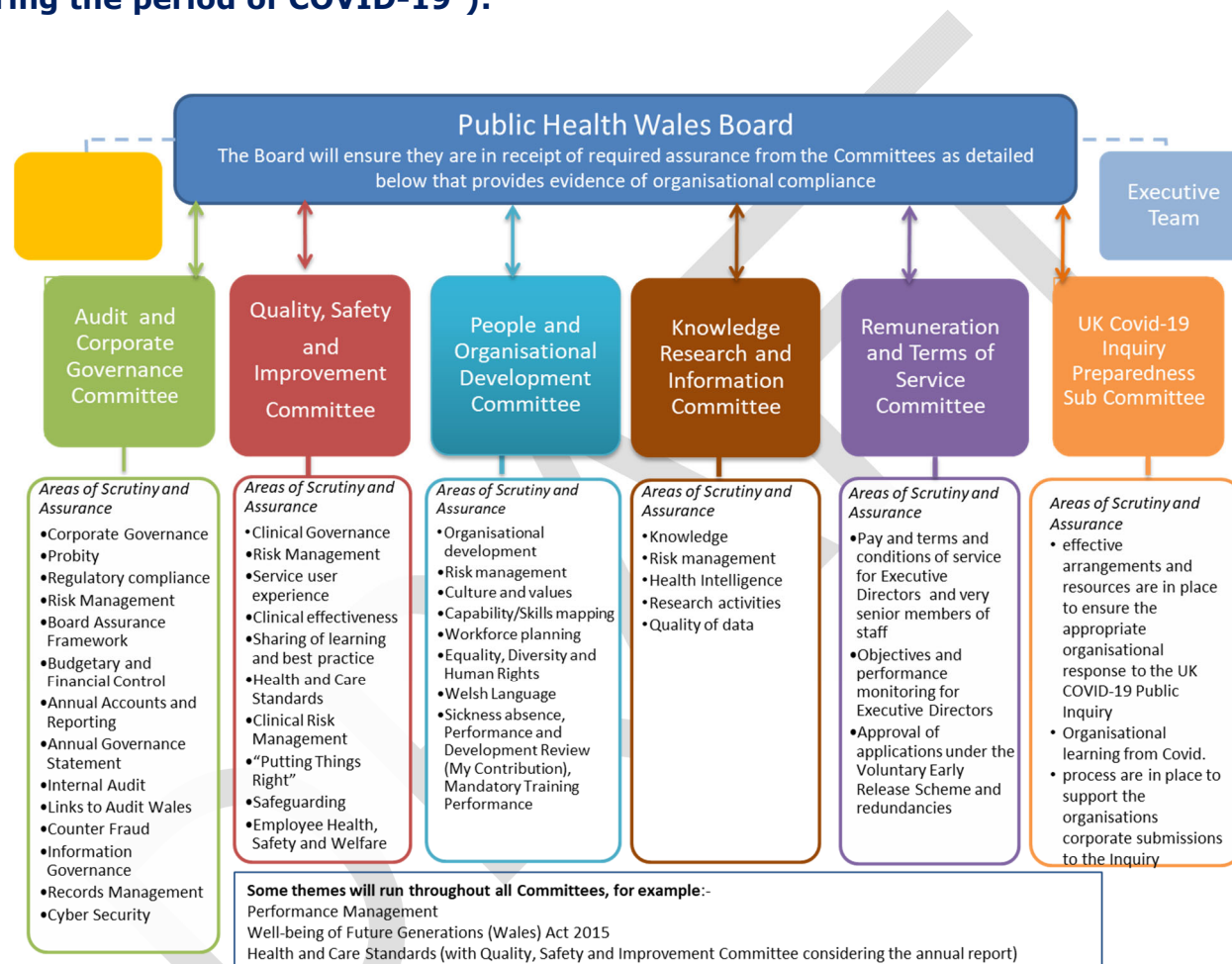
promoting the values and standards of conduct for the organisation and its staff.

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 \(or Committee\) was](#) approved by the Board in May 2021, and further updated in September 2022, to help identify the reasons which are most likely to apply to material considered by the Board (or Committee) in Private Session. (See **Section xx** 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.

DRAFT

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-19²):



² 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 2022/23 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 2022/23.

All the meetings of the Board in 2022/23 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 29 July 2022. 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.

3.4 3.1.2 Variations to the Standing Orders

Public Health Wales has fully adopted the model Standing Orders, with one amendment to Section 6.4.3: changing the circulation of agenda and supporting papers to Board/Committee members from 10 to 7 calendar days before a meeting.

Public Health Wales has continued to livestream all Board meetings during 2022/23. The video recording of the meeting is uploaded to the website as soon as possible following the meeting.

Board meetings were a blend of in person and virtual meetings during 2022/23; the Board agreed that from the November 2022 Board meeting, the Board would meet in person where possible for both Board meetings, and Board Development Sessions.

The Committees have predominantly met virtually during 2022/23 and are not currently livestreamed.

Annual Governance Statement 2022/23

Committee Meetings 2022/23

28 July	29 Sept	24 Nov	26 Jan	30 Mar
---------	---------	--------	--------	--------

Improvement:

19 Oct	14 Dec	15 Feb
--------	--------	--------

Governance:

13 Oct	19 Jan	16 Mar
--------	--------	--------

Local Development

6 Sept	6 Oct	12 Jan	15 Mar
--------	-------	--------	--------

Quality of Service:

6 Dec	8 Mar
-------	-------

Additional Information

Preparedness Sub Group

3.5 3.1.2 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"> ❖ Changes to the Executive Team. ❖ Summary of meetings such as Joint Executive Team (JET), meetings with Welsh Government Ministers and submissions to the Senedd (Welsh Parliament) Committees, meetings with partner organisations. ❖ Regular updates on the UK COVID-19 Public Inquiry, including preparation within the organisation. ❖ Updates on the establishment of the NHS Executive announced in <i>A Healthier Wales</i> in 2018 but delayed due to the COVID-9 pandemic. ❖ Updates on key Organisational work such as winter planning preparations, the opening of a Screening Centre in Mountain Ash, refurbishment of Clwydian House, Wrexham and Disability Confident Leaders Renewal. ❖ International meetings and engagement the World Health Organization (WHO), and updates on the work including Public Health Wales' WHO Collaborating Centre Re-designation extension. ❖ Update on publication of relevant reports such as the report of the Independent Review of Health Protection in Wales, External Review of the Tuberculosis Outbreak centred around Llwynhendy, and Fair Work for Health, Well-being and Equity: release of a guide for local authorities, health boards and other regional and local agencies on improving health, well-being and equity through action on fair work. ❖ Updates on current organisational initiatives such as Cervical and Bowel Screening Programmes optimisation, implementation of our new Cervical Screening

	<p>Information Management System, and update on our approach to the cost of living crisis and how we can support and help mitigate the implications of the cost of living crisis in Wales, Young Ambassadors Programme, and meetings with Universities exploring our respective activities, priorities and opportunities for collaboration.</p> <ul style="list-style-type: none"> ❖ Update on events hosted and attended, including Staff Conference Events, Asia Europe Foundation Event: The Role of Risk Communications in Pandemics jointly hosted a two-day international high-level meeting on The Role of Risk Communications in Pandemics, and Conference of the Parties (COP) of the United Nations Framework Convention on Climate Change known as COP27. ❖ Update on Awards received, including: Swansea University Research and Innovation Award for our Microbiology Team recognition of their hard work and dedication throughout the pandemic, Our Research and Evaluation Team awarded the Health and Care Research Wales Impact Award and The Healthcare People Management Association (HPMA) Cymru Conference and Public Health Wales Award Winners
<p>Integrated Performance Report and Financial Report</p>	<p>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.</p> <p>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.</p> <p>The Financial Report outlined the revenue and capital position for Public Health Wales on a monthly basis together with year-end forecasts where appropriate.</p>
<p>Public Health Dashboard</p>	<p>The Board considered the newly developed Public Health Dashboard, which shared a the range of information to inform the management of inequalities and the wider determinants of health, with particular focus on the cost of living crisis.</p>
<p>Risk</p>	<p>The Board:</p>

	<ul style="list-style-type: none"> ❖ Regularly considered the Strategic and Corporate Risk Registers, and received assurance as part of the Committee's in depth consideration of the Risk register. ❖ Considered and approved the revised risk appetite descriptors for the Integrated Medium Term Plan (IMTP) Strategic Priorities in May 2022. ❖ As part of the Long Term Planning progress, the Board also undertook a review of the Strategic Risks, and approved revised Strategic Risk in March 2023. (See Section 4 for further details)
Corporate Policies	The Board approved an updated Corporate Policies, Procedures and Other Written Control Document Policy, and considered an annual update on the current status of Policies within the organisations, including plans in progress to review and update those past their review date.
Young Ambassadors Programme	The Board considered the feedback from the Young Ambassadors residential event and approved the establishment of a Young Ambassadors Board Partnership Forum. The Young Ambassadors Board Partnership Forum reported to the Board following their meetings. (See section x for further details)
Board and Committee Governance	
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 approved and update to the Protocol for Reserving Matters to a Private Board (or Committee) . (See Section 3.4.3 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 Section 3.2 for further details)
Committees of the Board Annual Reports 2021/22	The Board considered Annual Reports from the Committee's for 2021/22, and took assurance that the Committees were fulfilling their terms of reference. (Note: the Annual Reports for 2022/23 will be presented to the Board for assurance in May 2023) (See Section 3.2 for further details)

Committee Terms of Reference Annual Review	The Board considered a review of the Committee’s terms of reference and approved the proposed revisions. (See Section 3.2 for further details)
Plans and Strategies	
Strategic Plan (Integrated Medium Term Plan)	The Board considered and approved the Strategic Plan (Integrated Medium Term Plan) 2023 to 2036. (See Section 9 for further details)
Long Term Strategy	The Board considered and approved the Long Term Strategy 2023 to 2035. (See Section x for further details)
Financial Plan /Budgetary Control Framework	The Board considered and approved the Financial Plan /Budgetary Control Framework.
Capital Programme 2022/23	The Board approved the planned capital expenditure for 2022/23, including a proposed plan for Public Health Wales’ discretionary capital funding, as well as Public Health Wales’ strategic capital replacement programme with regard to Breast Test Wales.
Improvement Cymru Strategy – ‘Achieving Quality and Safety Improvement’ (2021) Update on Progress	The Board considered an update on progress against the 2022/23 work plan, and were assured of the delivery of the NHS wide approved Improvement Cymru Strategy – ‘Achieving Quality and Safety Improvement’ (2021).
Tuberculosis (TB) Report and Action Plan	The Board considered a report to the Boards of Public Health Wales and Hywel Dda University Health Board (HDUHB) with the completed External Review Report into the management of the TB outbreak centred around Llwynhendy, Carmarthenshire, and to outline the findings and recommendations made by the external review panel. The paper also set out the action plan for Public Health Wales and high-level action plan for HD UHB in response to the recommendations
Topical / emerging issues	
Approval of Annual Report and Accounts	The Board approved the Annual Report and Accounts for 2021/22 for submission to the Welsh Government, following review by the Audit and Corporate Governance Committee and auditing by Audit Wales.

Annual Governance Statement 2022/23

Staff Networks Update Report	The Board considered an update on the requests to date that the Staff Networks have made to the Board within presentations during 2021/22.
Cervical Screening Wales Interval Change	The Board considered an update on the change made to the Cervical Screening Wales Programme in January 2022 to be in line with current UK National Screening Committee recommendations for participants aged 25 to 49 years who have a HPV negative result. The Board was assured that work was being taken forward to review, learn lessons and to implement a communication strategy to reassure the public about the change.
Update on COVID-19 and Other Incidents	The Board was updated on relevant updates
Cost of Living – Strategic Presentation	The Board considered approach to respond to the Cost of Living crisis and supported the framework as the basis for a public health approach to the cost of living crisis.
Trauma-Informed Wales:	Consideration of a presentation on Trauma informed Wales: A Societal Approach to Understanding, Preventing and Supporting the Impacts of Trauma and Adversity
Strategic Partnerships and Joint working	
NHS Wales	Judith Paget, Director General Health and Social Services Group/NHS Wales Chief Executive at the Welsh Government joined the meeting of the 26 January 2023, to discuss the key challenges facing health and social care in Wales and the role of Public Health Wales.
Welsh Government	Eluned Morgan, the Minister for Health and Social Services, joined the Board meeting in January 2023 for the discussion the Public Health Wales Rapid Overview Dashboard.
	Welsh Government representatives joined the Board to presentation on the Duty of Quality and Duty of Candour on the 269 January 2023, both of came into force from 1 April 2023. This presentation outlined the purpose of each Duty, summarise the responses to a recent consultation process and highlight the key implications
Public Health Merit Award	The Board considered an update on the Public Health Merit Award scheme, which has been coproduced with partners in established youth organisations. The Board

	endorsed the approach of the public health merit award scheme and the co-productive approach taken throughout.
--	--

Private Board Sessions

The Board held a Private Board session alongside every public session in 2022/23 to consider business of a confidential nature, considering aspects of significant issues including:

Topic	Purpose
COVID-19 updates	To supplement the update provided to the Board in open session by providing sensitive information including emerging outbreak issues and contractual approvals.
Health protection reports (non-COVID-19) -	To update the Board on sensitive information about non COVID-19 health protection matters
Strategic risk Four (Cyber Security)	To provide updates and allow for consideration of the Strategic risk four (Cyber Security) in private session due to the sensitive nature of the risk.
Memorandum of Understanding with Improvement Cymru	To endorse the Memorandum of Understanding document, explaining how Public Health Wales will discharge the Services of 'Improvement Cymru' during the period of transition to ensure full integration across all services of the NHS Executive under a mandate from the Welsh Ministers, effective from 1 April 2023.
Local Public health teams/Update on transfer and associated Memorandum of Understanding	The Board approved the Memorandum of Understanding (Part 1) document forming an agreement between Public Health Wales and the seven Health Board for the transfer of the Local Public Health Teams
NHS Executive Hosting Agreement	To approve the Hosting Agreement for the NHS Executive with the Welsh Government and the Memorandum of Understanding for the relationship with improvement Cymru and the NHS Executive .
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..
--	---

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.

DRAFT

3.6 3.1.3 Board Development and Briefing Sessions

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

The Board has considered its effectiveness and ongoing development throughout 2022/23.

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

❖ **Quality Improvement**

This session focused on the Quality agenda in Wales, Update on the duty of Candour, Citizens Voice Body, Quality management, Quality as an organisational strategy, and the Improvement and Innovation Hub, including its progress next steps

❖ **Risk Appetite**

Discussion on risk appetite and tolerance, exploring and agreeing the risk appetite for the IMTP Strategic themes, and considering the focus for an overarching risk appetite statement.

❖ **Long Term Strategy**

The Board undertook several sessions on the Development of the Long Term Strategy, including early input into shaping the focus of the strategy, the objectives and the themes within this to help shape the proposition. The Board also considered early drafts of the emerging strategic proposition, including suggested future organisational priorities.

❖ **AGILE and User Centred design**

An overview of three recent projects that had been trail-blazing the use of AGILE and user-centred design in Public Health Wales. This focused on what we learned from employing the technique for the discovery phase on diabetic eye screening, developing a rapid public health overview dashboard and user feedback on our research, knowledge and analytical products, and considered discuss how this could be further developed the use of these techniques and ways of working across the organisation.

❖ **Providing Leadership to Shape our Culture**

The Board reviewed the draft cultural narrative, ensuring it was aligned to the long term strategy. The Board explored a number of key questions including considering the type of culture needed to implement the of refreshed Long-term Strategy and Quality as an Organisational Strategy

❖ **Climate Change**

The Board considered the challenges and opportunities of the climate and nature emergencies, and links to the public health agenda. The Board considered Public Health Wales could develop its narrative showing how solutions to the climate and nature crises would also result in improved public health outcomes, and linked to the current work around the Long Term Strategy priorities and how Climate Change was embedded within these.

The Board has also held sessions on:

- Long Term Strategy as part of the development of the strategy.
- Strategic Risk Review, as part of the review of the strategic risks in the context of the Long Term Strategy.
- The initial findings from the review of Tuberculosis outbreak jointly commissioned by Public Health Wales and Hywel Dda University Health Board.

DRAFT

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 organisations 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 2022/23 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 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 UK Public 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. This report is 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

Annual Governance Statement 2022/23

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 2022/23

Committee	Chairperson	Committee Members
Audit and Corporate Governance Committee	Dyfed Edwards, Non-Executive Director (until 27 February 2023) Nick Elliot, Non-Executive Director (from 28 February 2023)	Mohammed Mehmet, Non-Executive Director Kate Young, Non-Executive Director
Quality, Safety and Improvement Committee	Kate Eden , Vice Chair and Non-Executive Director	Diane Crone, Non-Executive Director Sian Griffiths, Non-Executive Director Nick Elliot, Non-Executive Director
Knowledge Research and Information Committee	Sian Griffiths, Non-Executive Director	Nick Elliot, Non-Executive Director Diane Crone, Non-Executive Director
People and Organisational Development Committee	Mohammed Mehmet, Non-Executive Director	Dyfed Edwards, Non-Executive Director (until 28 February 2023) Kate Young, Non-Executive Director Jan Williams, Board Chair (from 1 March 2023)
Remuneration and Terms of Service Committee	Jan Williams, Board Chair	All Non-Executive Directors Tracey Cooper, Chief Executive
Covid Inquiry Preparedness Sub Group	Jan Williams, Board Chair	Dyfed Edwards, Non-Executive Director (until 28 February 2023) Kate Eden, Vice Chair and Non-Executive Director Tracey Cooper, Chief Executive Huw George, Deputy Chief Executive and Executive Director of Operations and Finance

3.2.1 Audit and Corporate Governance Committee

During 2022/23, the Committee met five times and was quorate on all occasions.

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	Took assurance from regulate updates from the internal audit, and considered all Internal Audits listed in Section 3.2. for assurance
	Took assurance from of the overall assessment and Opinion from the Head of Internal Audit for the 2021/22 year.
External Audit	Audit Wales (AW) provided the Committee with regular progress reports on any external audits, including the Structured Assessment for 2021 and the Annual Report summarising the audit work undertaken during 2022
Audit (internal and external) Action Log	Took assurance on progress on the implementation of actions and to approve any closure of actions or amendments to timescales.
Counter Fraud	Took assurance on the effective management of Counter Fraud issues within the Organisation, the Committee receives an update at each meeting.
Financial Reporting	Considered Quarterly Losses and Special Payments Reports, and Quarterly Procurements Reports to assure the Committee that these were taken in line with the requirements of the Standing Financial Instructions (SFIs).
	Considered updates for assurance on the financial position of the organisation.
	Approved of the annual bad debts and claims abandoned for 2022/23.
Governance and Accountability	Took assurance on the implementation of the Standards of Behaviour Policy.
	Took that process for recording and monitoring the organisations compliance with WHCs was being managed effectively.

Annual Governance Statement 2022/23

	<p>Took assurance from the Self-Assessment 2022/23 – Compliance against the Governance in Central Government Departments: Code of Practice 2017.</p> <p>Took assurance on the prioritisation and progress being made to review policies and procedures within the remit of the Committee.</p> <p>Approved Policies within its remit.</p>
Information Governance	<p>Took assurance from the Quarterly Information Governance Performance Report that the Information Governance Management System was working effectively</p> <p>Took assurance on the progress and learning from data breaches.</p>
Cyber Security	<p>Took assurance on the organisation’s management of Cyber Security issues via Bi-annual updates as well as specific deep dives.</p>
Annual Committee Effectiveness	<p>The Committee considered a presentation on Committee Effectiveness and Performance following the completion of an online survey by Committee Members and attendees.</p>
Terms of Reference Review	<p>Annual review of the Committee’s terms of reference for a recommendation to the Board for any changes required.</p>
Committee Work Plan	<p>To plan the Committee’s focus for the following year, and to approve a work programme.</p>
Annual Accounts and Accountability Reports	<p>Took assurance that the arrangements were in place to produce the Annual Report in line with requirements for 2022/23</p> <p>The Committee received the Accountability Report and the Annual Financial Statements and Accounts for 2022/23 in draft on May and final in June, for approval prior to submission to Audit Wales and Welsh Government.</p>
Hosted Bodies	<p>Took assurance from the hosted Finance Delivery Unit: Annual Assurance Statement and the hosted NHS Wales Health Collaborative Annual Assurance Statement that the hosted bodies had complied with the hosting arrangements.</p>
Strategic and Corporate Risks	<p>Took gain assurance that Strategic and Corporate Risks within the remit of the Committee were being appropriately managed, and took assurance on system of management of risks within the organisation.</p> <p>Took assurance from the Annual Review of Risk that the organisation has the appropriate plan in place to manage risk within the organisation.</p>

3.2.2 Quality, Safety and Improvement Committee

The Quality, Safety, and Improvement Committee met five times during 2022/23 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 undertook further scrutiny of the following areas during 2022/23:

Quality and Candour	Considered updates on the approach to implement the Health and Social Care (Quality and Engagement) (Wales) Act 2020 within Public Health Wales. The Committee took regular assurance on the Organisation’s approach to successfully implement and comply with the legislative requirements of Duty of Quality and Candour.
	Took assurance on the approach to develop and implement the Innovation and Improvement hub in Public Health Wales.
	Took regular assurance on the effective management of Putting Things Right (Incidents, Complaints, Redress, Claims and Compliments) via quarterly reports, as well as an annual report for 2021-22.
	Took assurance that the Health and Care Standards self-assessment process had been completed for 2021-22 and noted the overall organisational position. The Committee noted the future direction of Health and Care Standards, following the introduction of the Health and Social Care (Quality and Engagement) (Wales) Act 2020.
	Noted the update on the revised approach to reporting requirements for the Annual Quality Statement 2021/22.

Safeguarding	The Committee approved the Organisation’s Safeguarding Annual Report 2021/22 and noted the revised terms of reference for 2022/23. Took assurance from a mid-year update on Safeguarding, on the arrangements in place and progress on the delivery and implementation of safeguarding plans to enable Public Health Wales to fulfil its statutory responsibilities. Took assurance on the Safeguarding Maturity Matrix self-assessment and improvement plan to promote and monitor the welfare of children, young people and adults at risk.
Medical Devices	Took assurance on the arrangements for medical devices management through regular Committee updates.
Health and Safety	Took assurance that appropriate measures were in place to monitor compliance with health and safety regulations and incident reporting, and to address areas identified for improvement via quarterly health and safety reports. The Committee approved the Health and Safety Terms of Reference and Work plan for 2022/23.
Clinical Governance	Took assurance on the Quality and Clinical Audit Plan Annual Report for 2021/22, approved the Quality and Clinical Audit Plan 2022/23, and later took assurance on the progress of the plan. Took assurance from a deep dive of the management of Quality and Clinical Audit within the Organisation.
	Took assurance on the progress of the development of the Public Health Wales Clinical Governance Framework.
	Approved the Public Health Wales Infection Prevention and Control Annual Report for 2021/22 and noted the revised terms of reference for 2022/23. The Committee took assurance throughout the year that Public Health Wales was meeting its IPC responsibilities.
Incidents and Alerts	Took assurance on the governance and implementation arrangements of the Once for Wales Concerns Management system, which included the successful implementation of phase one.
	Took regular assurance that an effective management system for distribution, monitoring and record keeping for alerts / safety notices was in place.
	Took regular Claims and Redress updates, including lessons learnt and took assurance that the claims were being managed in line with Claims Management Policy and Procedure.
Deep Dives	Took assurance from a detailed presentation on the Healthcare Associated Infection, Antimicrobial Resistance and Prescribing (HARP) Programme.

	<p>Took assurance from a detailed presentation on a on the work of the Health and Wellbeing Directorate, which included an overview of the key programmes delivered.</p> <p>Took assurance from a deep dive into the progress of the Organisations approach to Engagement and took assurance that the Year 2 Implementation Plan for '<i>Our Approach to Engagement</i>'.</p>
Service Delivery	<p>The Committee considered regular updates on the recovery of the Organisation’s screening programmes due to impact of the pandemic, taking assurance that the recovery of the screening programmes were progressing, the work underway to recover the remaining programmes, and the future development of screening programmes. The Committee also considered a cervical screening campaign update following a change to routine interval in the cervical screening programme, and took assurance on the work undertaken as part of the communications campaign to rebuild trust in the safety and effectiveness of the cervical screening programme in Wales.</p> <p>Took assurance on winter planning within the Health Protection and microbiology services for 2022/23.</p> <p>Considered updates against the establishment of the Office of the Medical Director.</p> <p>Took assurance on the effectiveness of the internal influenza vaccine campaign delivery for 2021/22.</p>
Emergency Planning and Business Continuity	<p>Took assurance from the Organisation’s Emergency Planning and Business Continuity annual report for both 2021 and 2022, and took assurance in relation to the Organisation’s compliance with the requirements of the Civil Contingencies Act (2004) the NHS Wales Emergency Planning Core Guidance (2015) and the Organisation’s level of emergency preparedness.</p>
Risk	<p>The Committee received regular updates on the Corporate and Strategic Risks within the remit of the Committee, and took assurance on the management of these risks.</p>
Professional Registration	<p>The Committee Took assurance that there were systems in place to support Revalidation of Medical Consultants, and supported the development of the Office of the Medical Director to further improve the arrangements and systems for Revalidation.</p>

Arrangements	The Committee considered an audit of arrangements within Public Health Wales for verifying active professional registration for 2022/23 and took assurance that the arrangements were fit for the purpose stated.
	The Committee took assurance on the progress of the implementation of the Healthcare Support Workers Framework within Public Health Wales.
Audit	Considered the Audit Wales Review of Quality Governance Arrangements, noting the audit's overall conclusion that the Trust was committed to improving its quality governance arrangements.
	Considered the stock management Internal Audit Report and took assurance that the monitoring of any actions from this report would be undertaken through the Audit and Corporate Governance Committee.
Governance	Approved Policies within its remit.
	Considered a presentation on Committee Effectiveness and performance following the completion of an online survey and workshop.
	Undertook an annual review of the Committee's terms of reference for recommendation to the Board for any changes required.
	Received the Committee Forward Look at each meeting.

3.2.3 People and Organisational Development Committee

The People and Organisational Development Committee met four times during 2022/23 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 2022/23:

People and Organisational Development Priorities	Considered a presentation on the People and Organisational Development Directorate High Level vision and set out the 'Big 5' Priorities for the year.
Equality, Diversity and Inclusion	<p>Considered Equality, Diversity and Inclusion: Priorities for 2022/2023 presentation noting the work underway on the strategic equality objectives: the roll out of diversity dashboards; fair pay; learning and development; employee value proposition, the behaviours and competency framework and the legal reporting obligations.</p> <p>Took assurance through regular updates that the organisation had the appropriate plans in place to meet the Welsh Language statutory requirements.</p>
Workforce	<p>The Committee approved the following documents:</p> <ul style="list-style-type: none"> • Annual Equality Report 2021-22 • Workforce Report Annual Report 2021-22 • Gender Pay Gap report 2022

Annual Governance Statement 2022/23

	<p>The Committee received the Behavioural Framework presentation, which was one element of a programme designed to embed our values throughout the Organisation over a 2-3 year period.</p> <p>Took assurance that work on the 'Working Where Work Works Best' was progressing well.</p> <p>The Committee regularly considered a live presentation of live data from the Performance and Assurance Dashboard focusing on sickness absences, staff vaccinations, recruitment and turnover, Equality, Diversity and Inclusion date.</p> <p>The Committee received a presentation on the Employee Value Proposition to address workforce challenges around attraction, recruitment and retention of staff.</p>
<p>Organisational Change Update</p>	<p>The Committee received an Update on Organisational redesign affecting Health and Well-Being (HWB) and World Health Organisation Collaborating Centre (WHO CC) directorates report. The Committee received a report on transfer of Local Public Health Teams to Local Health Boards.</p>
<p>Engagement and Partnerships</p>	<p>Regularly considered topical discussions with the local partnership forum representatives on the Committee.</p> <p>Took assurance the Staff Networks were developing and providing input into organisational development projects. The Committee noted a number requests submitted by the Staff Networks to the Organisation's Board during 2021-22 and took assurance of the progress made against the requests to date.</p>
<p>Governance</p>	<p>Took assurance from an annual report on the management of Raising Concerns (also known as whistle blowing) in line with the All-Wales Raising Concerns Policy and noted plans for the promotion of the Raising Concerns policy process through manager training. A Concerns and Grievance Internal Audit Final Report had received a reasonable assurance rating.</p> <p>The Committee's focus and plan for the following year was undertaken, and a work programme approved.</p> <p>The Committee undertook a Committee Effectiveness and Performance session and a report from this discussion will be submitted to the Board during Quarter 1 2023/4.</p> <p>Approved Policies within its remit.</p>

Annual Governance Statement 2022/23

	The Committee received regular assurance from an update on the register of policies and written control documents on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee.
Audit	The Committee considered the recommendations made within the Internal Audit Final reports for Workforce Sickness Absence Monitoring , Final Internal Audit Report and took assurance that the monitoring of any actions from these reports would be undertaken through the Audit and Corporate Governance Committee.
Risk	The Committee regularly received the Corporate and Strategic Risk Registers to enable them to gain assurance that operational risks were being appropriately managed.

DRAFT

3.2.4 Knowledge, Research and Information Board Committee

The Knowledge, Research, and Information Board Committee met four times during 2022/23 and was quorate on all occasions. The Committee assists the Board in discharging its functions in meeting its responsibilities with regard to relation to the 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 2022/23:

Monitoring Impact Proposal	The Committee considered and approved the proposed approach for a systematic approach for Public Health Wales to monitor the impact of its Knowledge and Research outputs.
Behavioural Science Unit	The Committee considered a presentation by way of an introduction to the Behavioural Science Unit.
Open University	The Committee considered a presentation from the Open University as part of its consideration of how Public Health Wales can work with universities in Wales to explore forming strategic partnerships. The links with the Open University (OU) had progressed the furthest due to an alignment of their interests in targeting people in the lowest two quintiles of the index of multiple deprivation. The discussion explored how Public Health Wales could develop a strategic partnership with OU.

Research and Evaluation	Considered a detailed overview on the Research, Development and Evaluation within the Specialist and Reference Units, Infection Services Division
	Considered regular updates at each meeting on the progress with the development of the Research and Evaluation strategy.
	Considered an update on Research Opportunities within the WHO Collaborating Centre overview of the opportunities within a global context the breadth of the work within the collaborating centre, particularly the range of international partners.
Deep Dives	Undertook a deep dive into the work of Diabetic Eye Screening Wales (DESW) and the outcome of a systems review that had taken place. A 'Discovery' model had been undertaken to review the way in which diabetic eye screening was conducted in Wales.
	Undertook a deep dive into Health Inequalities.
Data and Digital	Considered a detailed presentation from the Office of the national statistics on Statistics for the public good including exploring the concepts of trustworthiness, quality and value.
	Considered regular updates on the development of the Digital and Data Strategy. In December, the Committee provided input from the Committee to further develop the strategy. In March, the Committee considered a framework to introduce the current draft of the Public Health Wales digital and data strategy. It also provided details of the methods used, to provide a benchmark of quality for the work.
	Considered a presentation of a review on Artificial Intelligence (AI) in Health and Care in Wales.
	Considered a verbal update on progress with the development of standards to collect equality information which aligned with census data.
Risk	The Committee received regular updates on the Corporate and Strategic Risks within the remit of the Committee, and took assurance on the management of these risks.

Governance	<p>The Committee considered a presentation on Committee Effectiveness and Performance following the completion of an online survey by Committee Members and attendees. A full report from this discussion would be to the Board in May 2023.</p>
	<p>Annual review of the Committee’s terms of reference for a recommendation to the Board.</p>
	<p>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.</p>
	<p>Received the Committee Forward Look at each meeting.</p>

DRAFT

3.2.5 Remuneration and Terms of Service Committee

The Remuneration and Terms of Service Committee met twice during 2022/23 and was quorate on both 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 2022/23.

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 process 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 regards 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 two occasions during 2022/23 to consider whether Public Health Wales should apply to be a core participant Modules 1, 2, 2B and 3 (as set out below).

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.

Following a comprehensive review of the provisional outline scope for Module 1, the COVID-19 Subgroup agreed that Public Health Wales should apply for Core Participant status.

On 7 September 2022, Baroness Hallett, granted our application for Core Participant status stating;

"I consider that PHW played, or may have played, a direct and significant role in relation to the UK's resilience and preparedness for the Covid-19 pandemic and that it has a significant interest in Module 1 of the Inquiry."

Since that time, we have worked with the Inquiry Team to provide detailed witness and documentary evidence in preparation for the public hearings, which are currently scheduled to take place between 13 June and 21 July 2023.

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.

This module has been divided into the following parts:

- ❖ **Module 2** The Central Government and UK wide response to the pandemic.
- ❖ **Module 2A** The Scottish Government's core political and administrative decision-making / response to the pandemic.
- ❖ **Module 2B** Welsh Government's core political and administrative decision-making / response to the pandemic.
- ❖ **Module 2C** The decision-making and response to the pandemic by the government in Northern Ireland.

Following a comprehensive review of the provisional outline scope for Module 2 and its relevant sub parts, the Sub-Group met and agreed that Public Health Wales should apply for Core Participant status for Module 2B given its role as a category 1 responder pursuant to the Civil Contingencies Act 2004 and its role providing specialist advice and support to the Welsh Government throughout the pandemic response.

On 13 October 2022, Baroness Hallett, granted our application for Core Participant status for Module 2B stating;

"I consider that the Applicant played, or may have played, a direct and significant role in relation to the Welsh Government's core political and administrative decision-making in response to the Covid-19 pandemic and that it has a significant interest in Module 2B of the Inquiry."

Since that time, we (and our specialist colleagues) have been working with the Inquiry Team to provide detailed witness and documentary evidence in preparation for the public hearings, which are yet to be formally scheduled.

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.

We look forward to our continued engagement with the Inquiry Team. Our internal preparations continue to ensure that we are ready and able to continue to respond to and provide any information the Inquiry requests of Public Health Wales in an open and transparent manner.

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, it was suggested that further ways to support and 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 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 twice this year and in the process of developing its work plan and aims for the next year. The outcomes of these meetings are reported to the Board via the Chief Executive's report. A full report will be presented to the Board at its July 2023 meeting for a review of the arrangements, and suggestions for improvements as the Board Forum becomes more established.

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 and Directors (some of whom are Executive Directors) 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 2022/23.

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:

- ❖ Ensure 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.

Annual Governance Statement 2022/23

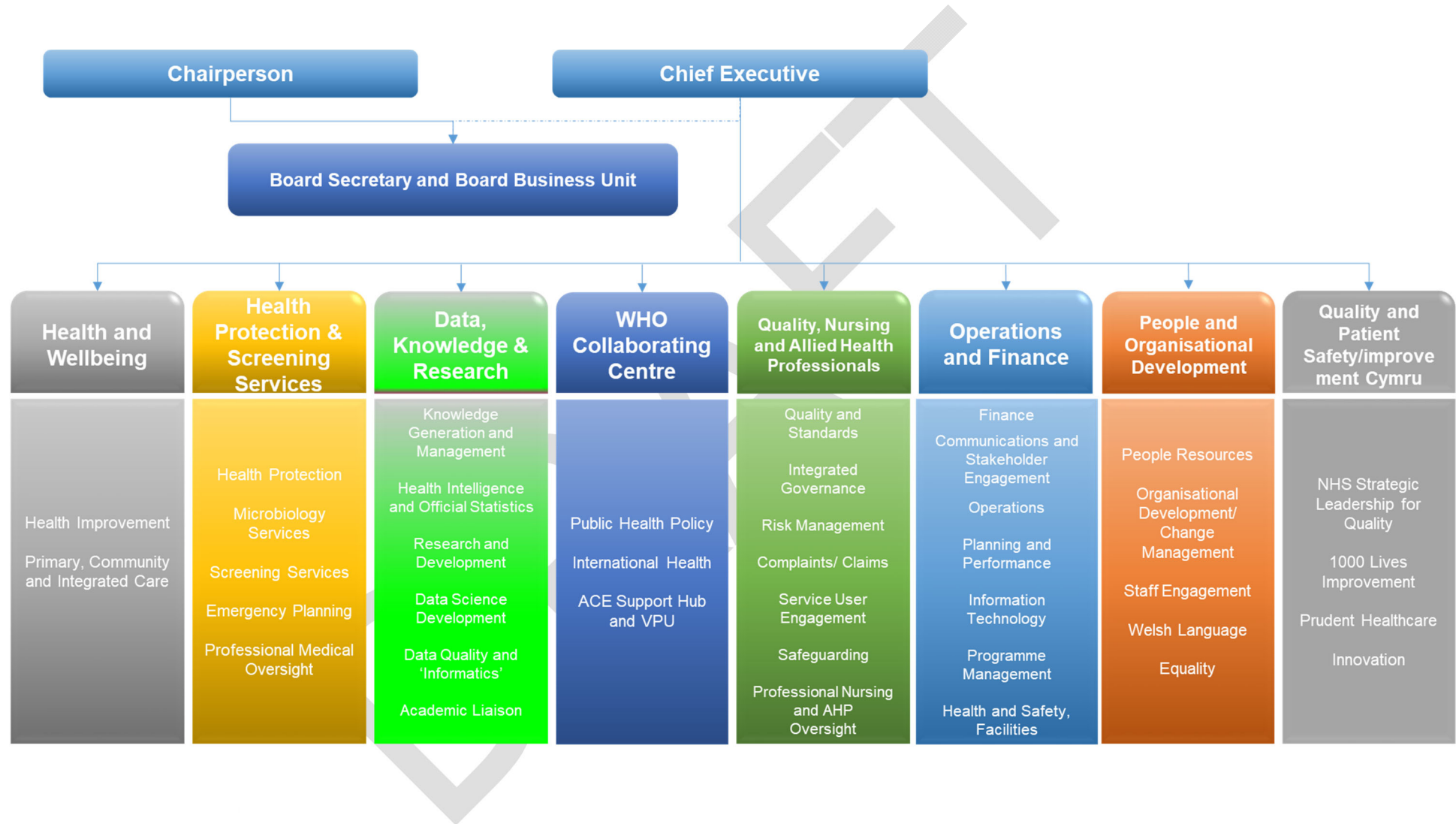
- ❖ Looking forward and horizon scanning for future developments, innovation and technologies relevant to the organisation and public health more broadly
- ❖ Identifying and managing corporate and strategic risks within the Board's risk appetite
 - ❖ Establishing relevant operational decision-making groups and delegating responsibilities to them as appropriate

On average, the Business Executive Team meets twice a month.

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

DRAFT

Figure 3: Executive Team and Directorate Structure in operation from 1 April 2019



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

Change in Regulations

On the 1 April 2022, new regulations became law allowing NHS Trusts in Wales to appoint a standalone Vice Chair position. For Public Health Wales this also meant an additional Executive and Non-Executive Director could be appointed, moving the Board to eight Non-Executive Director and six Executive Directors.

In line with this provision:

- ❖ From the 1 April 2022, the role of National Director for Public Health Knowledge and Research became an Executive Director role on the Board.
- ❖ Nick Elliot was appointed from 3 May 2022 to the Non-Executive Director (Data and Digital) role as an interim direct appointment following this change in regulation. Following this, a public recruitment exercise progressed, and Nick was appointed to a substantive full term post from 1 September 2022.

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 is on secondment from Public Health Wales Board 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 has been extended until 1 March 2024 pending Dyfed's return to Public Health Wales.

As a result of this, there is currently a vacancy for a Non-Executive (General) role as of 1 March 2023. A public recruitment process will progress for this in early 2023/24.

Non-Executive (Third Sector)

Kate Young, Non-Executive Director (Third Sector) was appointed to this role from 1 April 2022 to the 31 March 2026, following the departure of Judi Rhys as of 31 March 2022.

Non-Executive (Local Authority)

From 1 April 2021, Mohammed Mehmet has covered the vacancy left by Alison Ward's departure on the 31 March 2021, and has fulfilled the Local Authority Non-Executive Director on a full basis. Following a public recruitment exercise, Mohammed was appointed to a substantive full term post from 1 April 2022 to the 31 March 2026.

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 Health and Well-being

Sally Attwood was appointed as Transitional Director of Health and Well-being on the 1 July 2021, she left Public Health Wales on 31 May 2022.

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 is currently underway.

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 pending the recruitment of a permanent appointment.

From 17 April 2023, Paul Veysey has been appointed in the permanent role.

National Director for Public Health Knowledge and Research

From the 1 April 2022, the role of National Director for Public Health Knowledge and Research became an Executive Director role on the Board.

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

Professor Mark Bellis left Public Health Wales on the 5 December 2022, although he retains an Honorary Consultant contract with us. Dr 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 which is currently in progress.

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 2023, the Board had a gender balance of 61.5% (8) female, 38.5% (5) male, 23% (3) members were from a Black and Ethnic Minority background, 0% declared a disability.

Annual Governance Statement 2022/23

One Board member is a fluent Welsh speaker and a further two are advanced learners.

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 2022/23.

DRAFT

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 2022 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 on 26 May 2022

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 2022/23**, focusing on corporate arrangements, including the governance arrangements, for ensuring that resources are used efficiently, effectively and economically. **(Further to be added once approved)**
- ❖ 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 2023** who took **assurance** of our

compliance with the Corporate Governance in Central Government Departments – Code of Practice 2017. *(Further information is provided in [section 10.10 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 February 2023, 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 Audit Office good practice guidance and were adapted for the Committees.

Workshops were held in February/March 2023, with Committee Members 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 2023.

Relevant learning from the overall review of effectiveness will be fed into the Board performance review in 2022/23: a summary of the Committees' considerations and outcomes of this review will be reported to the Board in quarter 1 of 2023 as part of the wider Board effectiveness review.

c) Board Performance and Effectiveness

A Board review of performance and effectiveness will take place in 2023/24, 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 Chair of the Board undertakes an Annual appraisal with the Minister, 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

Between November and December 2022, 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 feedback and it demonstrates our commitment to a culture of openness and transparency

f) Chief Executive Appraisal

The Chief Executive undertakes an Annual appraisal with the Chair of the Board, 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.

4.4 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

Annual Governance Statement 2022/23

interest - in other words that undue harm or influencing of the public unfairly does not take place.

In May 2023, the Board approved the [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 2022/23 and an updated version was approved by the Board in September 2022.

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 out of the formal meetings

An annual review on the matters taken in private session has taken place for the 2022/23 period, and will be presented to the Board in May 2023 for consideration with the view to identify any further learning and improvements that could be made to the process.

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 2023 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.

5.1 Capacity to Handle Risk

As part of the planning process and development of the IMTP the Board approved six Strategic Risk descriptors on 31 March 2022. In September 2022 the Business Executive Team refreshed and approved six corporate risks. During the year, one corporate risk was removed from the register and another added.

In addition to the risk registers, given the substantial changes in the organisation during the COVID-19 pandemic, a significant piece of work was completed to reframe the system of risk management and introduce a Risk Management Development Plan. The plan consolidates the good work that has been done previously including the reports received from internal audit, to learn lessons from the way risk has been managed throughout the pandemic and to take Public Health Wales further along the journey to

becoming a high performing organisation in terms of its risk management arrangements. The plan includes work on risk appetite, training and development at all levels, and the introduction of the Risk module from the Once for Wales Concerns Management System.

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.

The statement for risk appetite was reviewed by the Board in April 2022 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](#).

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
- ❖ Project / Programme Risk
- ❖ Clinical Risk
- ❖ Financial Risk
- ❖ Quality 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
Enabling better population health and reducing health inequalities through preventative and sustainable measures	Willing
Delivering excellent services for population screening programmes, health protection and infection	Cautious

Supporting improvements in the quality and safety of health and care services	Keen
Maximising the use of digital, data and evidence to improve population health	Willing
Enabling the successful delivery of the plan	Willing

Figure 5 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 2023

Figure 5: Public Health Wales Key Strategic Risks 2022/23

Strategic Risk	Risk Score* Max Score 20
There is a risk that Public Health Wales will not be sufficiently focused, agile and responsive in discharging our functions	16
There is a risk that Public Health Wales will not deliver its plans for delivering excellent services for population screening, health protection and infection	9
There is a risk that we will not manage organisational change well	15
There is a risk that we are unable to attract and retain the required professional workforce	15
There is a risk that we will fail to exploit data to inform and direct public health action and interventions	20
There is a risk that PHW will suffer a cyber-attack on its IT systems	20

*Note: these risk were revised and updated in early 2023/24 following advice from specialist risk management consultancies (approved by the Board on 30 March 23).

Figure 6: 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 2023.

Figure 6: Public Health Wales Key Corporate Risks 2022/23

Corporate risk	Risk Score* Max Score 20
Failure in service delivery in Diabetic Eye Screening	20
Fail to meet the requirements of the Health and Social Care (Quality and Engagement) Act 2020	20
Fail to align team performance and development with strategic and operational priorities	12
Fail to secure people resources at right time, at right cost, with right skills	12

Annual Governance Statement 2022/23

Failure to recruit and retain sufficient medical and clinical staff in microbiology services	16
Fail to deliver capital projects (closed January 2023)	Closed
Fail to deliver LINC programme (added December 2022)	20

*Public Health Wales utilises a fivexfive 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.

The Strategic Risk Register and Corporate Risk Register are published on our website with the Board papers at relevant Board meetings.

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 has the responsibility to ensure there are quality assurance arrangements in place, ensure alignment by working with the lead Director for Quality and Quality improvement. The Executive Director 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 Quality, Nursing, and Allied Health Professionals has shared responsibility with the Executive Director of Health Protection and Screening Services, for clinical governance arrangements across the organisation.

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 Standards
- ❖ 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

There are a number of existing corporate groups which support the work of the Business Executive and Board 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 Working 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 xx](#) 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. The guidance in the Manual for Accounts states there is no requirement to prepare a separate AQS for 2022/23.

The Introduction of the Health and Social Care (Quality and Engagement) (Wales) Act (2020) Quality Act requires NHS bodies to report on their Duty of Candour and Duty of Quality annually. This will be introduced for 2023/24.

We also acknowledge that the quality agenda is interdependent with our corporate governance, information governance and risk management arrangements and we are continuing to develop our 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 will come 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.

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 is the identified Executive lead responsible for supporting and driving implementation of the Duty.

Rhiannon Beaumont-Wood, Executive Director of 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 are a number of pan-organisational programmes of work already underway which are enablers for cultural change and support the Duty, including the Organisational Cultural Assessments, the Behavioural Framework, Work How It Works Best, Transforming Management and Leadership, and the Values Framework. Work is commencing to plan the integration of the Duty into these programmes of work.

A pan-organisation Senior Responsible Officer Group has been established to enable sustainable implementation, aligned to existing programmes of work within the organisation. The group in Public Health Wales provides governance and oversight for all work supporting implementation of the Duty of Quality in Public Health Wales to ensure compliance, delivery of projected outcomes and realisation of the required benefits.

Preparatory meetings and the inaugural SRO meeting took place in January and early February 2023, focused upon agreeing the Terms of Reference for the Group and working through the national roadmap for the implementation of key actions for the Duty. The group are working with a range of colleagues as required to ensure involvement across the organisation.

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 x)

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 theory behind the five Leadership Activities in QOS now established. The membership of these workshops has 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.

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 on-going, building on and strengthening the fundamental principles of established 'Putting Things Right' frameworks. This provides a robust process to support 'Being Open' and includes updating policies and procedures and raising awareness and understanding of how the duty applies to Public Health Wales as an NHS body.

The key intention is to promote the ethos of openness, learning and improving, which must be owned at organisational level. The candour procedure and reporting framework encourages reflective learning and preventing future recurrence of 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 the health care provided was or may have been a factor.

The duty means that NHS bodies and primary care will be required to follow a procedure when the duty is triggered.

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 to be reported and stored via the Datix Cymru System
- ❖ Each organisation must publish an annual candour report - build on existing reporting structures (Putting Things Right)

Key work to date:

A series of Welsh Government Duty of Candour workshops were scheduled between October to November 2021, of which Public Health Wales have been represented in the process of establishing internal arrangements to support the implementation of Duty of Candour.

A Duty of Candour Implementation Group was initiated to oversee the implementation within the organisation which included engagement with all services, raising awareness of Duty of Candour in advance of the implementation date. Awareness was also raised via monthly newsletters and an All Wales Duty of Candour Leaflet and Awareness Video shared via Communications. A Communications question and answer session video was also prepared and circulated.

Internal workshops were held with services to understand incidents which occur within those services and how the Duty may apply. A procedure and policy have been developed for the organisation, together with a Duty of Candour list of examples for each service as a single point of reference when investigating incidents.

A Level one e-learning package is now available via ESR and awareness has been raised for colleagues to undertake this training. Level two training was developed and has been offered through March and April to all services for those colleagues with clinical responsibilities, those colleagues who investigate incidents and may have Duty of Candour discussions with service users. The training will continue to be offered throughout the year to ensure all colleagues who require the training have attended.

6.4 Information Governance

We have well established arrangements for Information Governance to ensure that information is managed in line with relevant information governance law, regulations and Information Commissioner's Office guidance. The Knowledge, Research and Information Committee assumed responsibility on behalf of the Board for receiving assurances that the Information Governance system was operating effectively and having oversight of information governance issues. However, due to the ongoing pressures from the COVID-19 response that Committee was stood down in March 2020 and responsibility for oversight was transferred to the Audit and Corporate Governance Committee, where it has remained. The Information Governance Working Group supports the Committee in monitoring and providing oversight of Information Governance arrangements across the organisation.

A review of our records management arrangements has been undertaken and recommendations identified have led to a business case to invest in making improvements in response to the recommendations. Subject to investment the records management plan will be implemented over the next two years.

The Senior Information Risk Officer (SIRO) is the Executive Director for Quality, Nursing and Allied Health Professionals. The role of the SIRO is

that of the advocate for information risk on the Board. The 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.

The role of 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 our Information Governance requirements, and for advising and informing on compliance with all relevant legislation and regulation.

Due to the All-Wales remit of Public Health Wales, along with the diverse services it provides, it is acknowledged that the Caldicott Guardian requires the support of appropriate delegates to enable the duties of the role, as set out above, to be fulfilled. Caldicott delegates have been identified and are required, along with the Caldicott Guardian, to have undertaken the agreed Caldicott Guardian training on an annual basis, as a requirement of the role.

The Caldicott Guardian is the responsible person for arrangements to protect the confidentiality of patient and service-user personal information and arrangements for appropriate information sharing. The National Director of Health Protection and Screening Services, Executive Medical Director performs this role.

Significant improvements continue to be made towards compliance with the requirements of the UK-GDPR as tailored by the Data Protection Act 2018.

7. Health and Care Standards

As part of the Health and Social Care (Quality and Engagement) (Wales) Act 2020, the Health and Care Standards have been reviewed as part of 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 or assurance mechanisms. The Welsh Government have signalled their intention to replace the Health and Care Standards with a new quality reporting framework, based on the Quality Standards. The Quality Standards are framed around the six domains of quality and the five 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 in Public Health Wales the approach to report on the Health and Care Standards in Public Health Wales was, this was to reflect this period of transition and the superseding of the Standards at the end of reporting year. To 'close the loop' on the Health and Care Standards, we have captured improvements that have been implemented in 2022/23. These were identified in the self-assessment process of 2021-22 or are improvements that were identified for reporting against the Standards last year and can be mapped against the Standards.

A range of improvements in this reporting cycle are identified and include service improvements in access, communication and engagement which are being progressed in Public Health Wales. A key improvement area is our approach to listening and learning from feedback from the people we work with and for, which is being enabled through the implementation of Civica which is being utilised by a wide range of services and functions across the organisation.

The organisation is preparing for the duties arising from the Health and Social Care (Quality and Engagement) (Wales) Act and the expectations arising from the emerging guidance.

8. Health and Safety

The Health and Safety Group is a sub-group of the Quality, Safety and Improvement Committee.

The Health and Safety Group provides advice and assurance to the Quality, Safety and Improvement Committee, the Board and the Accountable Officer. This assurance provided 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.

Following the interim arrangements that were established during COVID-19 where the Health and Safety Group convened more frequently to support

the COVID-19 response, the Health and Safety group has reverted back to its original quarterly meeting cycle. This has been since September 2021 and informal meetings of Health and Safety leads continue on a monthly basis in between each formal meeting. The terms of reference were reviewed in April 2022 and approved by the Quality, Safety and Improvement Committee.

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 2022/23, these included:

- ❖ Undertaking and reviewing risk assessments for our premises and addressing actions to ensure our workplaces remained COVID-19 safe and undertaking regular compliance audits to ensure adherence with regulations. Despite restrictions easing in April 2022, many of our services based in health board premises have still been required to wear appropriate protective equipment and health and safety practices adopted during the pandemic have remained in place to minimise the risk of spreading the infection within the workplace.
- ❖ 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 process 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.

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

Our existing Long Term Strategy, 'Working to Achieve a Healthier Future for Wales, 2018 - 2030', was launched in 2018 and was informed by engagement with a range of stakeholders and partners. It resulted in us agreeing seven strategic priorities.

A formal review of our long-term strategy was started in 2020/2021 to assess the validity and future relevance of our existing strategy given the public health challenges of COVID-19, the cost of living crisis, war in Ukraine and the increasing impacts of climate change on health. As part of this work, we intended to validate and agree the key public health outcomes we aim to address, which would draw on the previous work undertaken in early 2020.

As a result of the significant challenges that Wales had faced as a result of the pandemic, it was agreed by the Board in December 2021 that the timeline for our review of our long-term strategy be extended into be completed in Autumn 2022/23.

During 2022/23, the review of the Long Term Strategy recommenced.

Our Strategy review, which has been led by the Board, provided us with an opportunity to assess future public health threats and opportunities. The review was underpinned by the latest public health evidence and research. Through significant engagement, the views of staff, stakeholders and the public have been incorporated into the development. These has been used to shape our thinking and informed the development of our new Strategy.

As part of the review, we have taken the opportunity to review, and refresh, our organisational purpose, mission and vision. These have been developed and informed by the views of staff on what they see as the role and purpose of Public Health Wales.

The draft Strategy was discussed in a series of Board and Executive Team sessions. In addition, draft versions were shared to provide an opportunity for specific comments and amendments.

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

Planning is underway for a formal launch of the long term strategy in May 2023, with a Plain English version, webpages and a plan on a page being developed.

10. Our Strategic Plan (Integrated Medium Term Plan)

Alongside the development of our Strategy, also developed our new Strategic Plan (Integrated Medium Term Plan) for the first three years of the Long Term Strategy, and Financial Plan and Budgetary Control Framework for 2023/24. We have developed these through our integrated approach to planning, which aims to align delivery of our priorities within finance and workforce requirements. The Plan has been developed in line with our statutory requirements and Welsh Government guidance. The draft Strategic Plan has been discussed at a number of Executive Team sessions and shared for comment. As a result, a number of specific changes have been made, which are reflected in the version presented for approval.

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.

In developing the Plan, we recognise that we are operating in a highly volatile and changing environment, which may require us to respond dynamically to changing or evolving challenges/opportunities. Therefore, the delivery of our Plan will need to be subject to regular review and we will establish robust arrangements to manage delivery and make decisions over potential in-year changes to this plan.

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.

We adopted an integrated approach to the development of our Plan, which considers the key delivery, financial and workforce implications. Specific detail on each of these aspects is included within relevant sections of the Plan. A key focus during the development of the Plan has been on assessing

its overall feasibility and to better understand the internal and external dependencies related to our key milestones.

Significant work has been 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.

11. Mandatory Disclosures

11.1 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. Work towards developing the next set of objectives for 2024-2028 will commence in April 2023, in partnership with internal and external stakeholders.

In order to support the revised Strategic Equality Plan, an implementation plan has been developed. A Stakeholder Reference Group made up of external organisations who represent the different protected characteristics continues to monitor and oversee progress being made towards achieving the objectives. 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 2021-2022](#) 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 Silver Plus One status in the Diverse Cymru Cultural Competence Certification Scheme.

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

11.2 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 that 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, Dyfed Edwards (until 28 February 2023) and Kate Eden (from 1 March 2023).

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.

11.3 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 2022/23 30 formal complaints were received. 90% (27) were acknowledged within the target two working days and 97% (29) were responded to within the 30-working day timeframe. In addition, 73 early resolution (Informal) complaints were received during the reporting period.

In 2022/23 2,103 incidents were reported. Of these incidents, five were Nationally Reportable Incidents reported to the Delivery Unit and nine were No Surprises reported to the Welsh Government.

11.4 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 2022/23, we received 185 requests for information which were handled under the FOIA. A further decline from the previous year but still an increase in requests from 2019 of more than 70%. The requests are now more varied and not specific to Covid-19.

150 of the total number received (81%) were answered within the 20-day target, with 35 being responded to outside of the deadline. 10 requests were received in quarter four and are still being processed.

11.5 Subject Access Requests

In 2022/23, 21 subject access requests were received. 19 of these were answered within the target of one calendar month. Two requests were received in quarter four and are still being processed.

11.6 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.

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, and commits to working towards achieving a carbon net zero position by 2030.

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

The breadth and volume of work on the climate change and sustainability agenda within Public Health Wales led to the development of the Climate Change Programme Board in Spring 2022, which aimed 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.

A workshop was held in December 2022 to consider Public Health Wales' role in addressing the public health impacts of climate change. It identified possible key elements of our role including developing, understanding and interpreting the evidence to inform action, provide evidence-based interventions, and to provide integrated technical advice to partners. This includes key functions, including policy advice, behavioural change, communication, surveillance, and guidance. As a result of this, a strategic priority focused on tackling the public health effects of climate change has

Annual Governance Statement 2022/23

been agreed and included in our revised Long Term Strategy. This details a number of objectives on what we will aim to achieve by 2035.

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.

As set out in the NHS Wales Decarbonisation Strategic Delivery Plan, Public Health Wales has developed Public Health Wales Decarbonisation Action Plan that demonstrates how the organisation will contribute to the 46 initiatives. The plan was approved in April 2022 and progress against the plan is currently 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. Feedback from the reports will be used to prioritise areas of focus to reduce our carbon footprint during 2023/24.

As part of our continued recovery from the pandemic, we recognise that more can be done to embed sustainability at the heart of our culture and the adoption of new ways of working will support this. We will continue to use the Well-being of Future Generations (Wales) Act 2015 and Environment (Wales) Act 2016 as drivers, ensuring that the climate and biodiversity are considered as part of everyday decision making and by reducing our carbon footprint and environmental impact will also make a significant contribution to achieving a resilient, healthier, and globally responsible Wales.

We have already begun to undertake significant work across the organisation to reduce our carbon footprint and this will continue through the life of this Plan. We signed the Cardiff Public Service Board Healthy Travel Charter in April 2019. This committed the organisation, and other Cardiff based public sector organisations, to both reduce unnecessary travel and promoting healthy travel. Through changes in our ways of working we have been encouraging staff to use sustainable transport as well as supporting staff to work flexibly through our Work How it Works Best initiative. We achieved the Health Travel Charter commitments in December 2022 and are planning how they can be rolled out across all our major sites. This will support the Welsh Government's commitment to have

30% of public workforce working remotely and reducing the carbon emissions arising from commuting to offices.

During 2022/23 we also commenced work to attain the internationally recognised BS EN ISO 14001:2015 which will help us build confidence and trust with stakeholders that we are compliant with our legal obligations, drive sustainable development through the adoption of environmentally sound processes and contribute to our corporate social responsibility agenda. We have achieved the first stage of the audit work and are now ready to move onto the second stage of the audit process which will commence in May 2023.

The Health and Sustainability Hub has developed various e-guides and resources to support staff embedding sustainable behaviour to help reduce their emissions in work and at home, including the 'Be the Change - Sustainable Home and Agile Working' e-guide, the 'Well-being Goals Challenge' and more recently a Sustainable procurement e-guide published in February 2023. In 2022 we also published the 'SIFT Healthy Environment Workshop' to enable teams and individuals to identify their environmental impacts and plan to reduce them. We will continue to support teams to use the Healthy Environment toolkit in 2023.

11.7 Emergency Planning/Civil Contingencies

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 2022/2023, Public Health Wales attended Strategic and Tactical meetings, and provided further support to key risk specific subgroups such as the Risk, CBRN, Infectious Disease & Health via Consultant's in Communicable Disease Control / Consultant's in Health Protection as well as the EPRR Team.

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 2023, The EPRR Team obtained approval for and submitted 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].

Throughout 2022/2023 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.

Public Health Wales has also been a key contributor to the review of Civil Contingencies in Wales, participating in the three phases of the process that commenced in September 2022.

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 2022/2023 with recent activity focussing on organisational preparedness and business continuity in the light of multi-sectoral industrial action throughout the autumn and winter of 2022.

Emergency Response Plans and Procedures

The Public Health Wales Emergency Response Plan (V.2) was formally approved by the Public Health Wales Board in September 2018 and updated as an Interim Working Draft in February 2022. 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 2022/23, the EPRR Team committed to delivering a comprehensive review of the document to ensure that Public Health Wales continues to meet its statutory obligations under the Civil Contingencies Act (2004) in maintaining an Emergency Response Plan which is fit for purpose.

Subject to approval at Board, the intention will be to issue the document as version 03 of the Emergency Response Plan for Public Health Wales in May 2023.

Further developments have included:

- ❖ Publication of Emergency Planning and Business Continuity SharePoint including dashboard for Lessons Management.
- ❖ Revised activation arrangements for countermeasures (for use in the event of a deliberate or accidental release of chemical, biological, radioactive or nuclear materials).

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 monitored via the Emergency Planning and Business Continuity Lessons Management System. Progress will be reported through the Emergency Planning and Business Continuity Group.

11.8 Business Continuity

In fulfilling its duties in respect of business continuity, Public Health Wales has a Business Continuity Management System which aims to build organisational resilience with the capability for an effective response to safeguard the organisations staff, stakeholder, reputation, and activities.

The Business Continuity Strategy sits alongside a Business Continuity Incident Management Process and is underpinned by individual Business Continuity Directorate/Divisional plans. These outline the specific actions and processes for invoking plans, roles and responsibilities and how the impact of the risks will be managed. This is to ensure that critical activities can be recovered in appropriate time scales. The plans take direction from risk assessment to identify hazards and threats in which the organisation needs to plan, within the context of critical activities.

To support Directorates/Divisions to exercise Business Continuity Plans, Public Health Wales has an 'off the shelf exercise' which aims to form the basis for a facilitated discussion on Business Continuity preparedness.

In light of the multi-sectoral industrial action throughout the autumn and winter of 2022, Directorates and Divisions (via the EPBC Group) were tasked with reviewing and updating individual 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 2022/23; Public Health Wales has facilitated learning in relation to Emergency Preparedness Resilience and Response for a total of 154 staff. This included attendance at Wales Gold, Wales Silver, Debrief Training, the Health Prepared Wales Conference in December 2022 and the Civil Contingencies Conference in March 2023.

The organisation has also participated in eight communication exercises and eight table-top exercises coordinated by the Emergency Preparedness, Resilience & Response Team. Within the last three years the organisation has also conducted two major live/simulated exercises with multi-agency partners across Wales.

In August 2022, the EPRR Team published the 'Introduction to Emergencies' E-Learning package on ESR for all NHS Wales Organisations.

In March 2023, the EPRR Team delivered an Emergencies & Major Incident Awareness Session to 38 Health Protection staff as part of the Annual Health Protection Training Day.

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].

During 2022/23, the Head of EPRR was appointed on a permanent basis, and the established Band 6 Emergency Planning Officer role within the function has been permanently re-graded to the Band 7 Senior Emergency Planning Officer (retitled as EPRR Manager) role which has been temporarily in place since November 2021.

In recognition of the need for the EPRR Team to meet the extended ongoing organisational business need, additional roles for a Band 6 EPRR Officer and a Band 4 EPRR Support Officer role are being established in 2023/24.

11.9 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 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 are undertaken.

During 2022/23, eight reportable data breaches were recorded. All eight data breaches were reported to the Information Commissioner's Office

(ICO) and three were reported to Welsh Government. For all eight reported, the ICO response stated that they were satisfied with the action taken by PHW and that no further action was required on their part.

11.10 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 16 March 2022 outlining how the organisation has complied with the code, the report noted that there have been no reported departures from the Corporate Governance Code.

11.11 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.

11.12 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](#).

There following Ministerial Direction (Non-Statutory Instruments) issued by the Welsh Government were reviewed, 2 required action from Public Health Wales during 2022/23 as shown in the table below.

DRAFT

Ministerial Directions (MDs)	Date	Compliance
The Directions to Local Health Boards as to the General Dental Services Statement of Financial Entitlements (Amendment) Directions 2022	7 April 2022	Assessed and not applicable to Public Health Wales
The Directions to Local Health Boards as to the General Dental Services Statement of Financial Entitlements (Amendment) Directions 2022	7 April 2022	Assessed and not applicable to Public Health Wales
Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2022	9 June 2022	Assessed and not applicable to Public Health Wales
The National Health Service (Charges to Overseas Visitors) (Amendment) (No. 3) (Wales) Regulations 2022	29 June 2022	This has been assessed, They do not apply directly to Public Health Wales as we are very unlikely to recover costs directly for services to overseas visitors. This has been added to the list of exemptions for charges (mpox and reciprocal arrangements with other nations).
The Pharmaceutical Services (Advanced Services) (Appliances) (Wales) (Amendment) Directions 2022	29 July 2022	Assessed and not applicable to Public Health Wales
The Primary Medical Services (Influenza and Pneumococcal Immunisation Scheme) (Directed Enhanced Service) (Wales) (No. 2)	8 August 2022	Assessed and not applicable to Public Health Wales
The Primary Care (Contracted Services: Outpatient Waiting List Scheme) Directions 2022	12 August 2022	Assessed and not applicable to Public Health Wales
Primary Care Contracted Services: Immunisations (PCCS:I) Amending Directions August 2022	25 August 2022	Assessed and not applicable to Public Health Wales
The Abortion Act 1967 – Revocation of the Approval of a Class of Place for Treatment for the Termination of Pregnancy (Wales) 2022	26 August 2022	Assessed and not applicable to Public Health Wales

Annual Governance Statement 2022/23

Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2022	14 November 2022	Assessed and not applicable to Public Health Wales
The National Health Service (Charges to Overseas Visitors) (Amendment) (No. 4) (Wales) Regulations 2022	22 November 2022	This has been assessed, They do not apply directly to Public Health Wales as we are very unlikely to recover costs directly for services to overseas visitors. This has been added to the list of exemptions for charges (mpox and reciprocal arrangements with other nations).
The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2022	30 November 2022	Assessed and not applicable to Public Health Wales
The Wales Infected Blood Support Scheme (Amendment) (No. 2) Directions 2022	8 December 2022	Assessed and not applicable to Public Health Wales
The Regulated Services (Annual Returns) (Wales) (Amendment) (Coronavirus) Regulations 2020	13 December 2022	Assessed and not applicable to Public Health Wales
The Local Health Boards (Directed Functions) (Wales) Directions 2022	15 December 2022	Assessed and not applicable to Public Health Wales
The Directions to Local Health Boards as to the General Dental Services Statement of Financial Entitlements (Amendment) Directions 2023	13 January 2023	Assessed and not applicable to Public Health Wales
The Directions to Local Health Boards as to the Personal Dental Services Statement of Financial Entitlements (Amendment) Directions 2023	13 January 2023	Assessed and not applicable to Public Health Wales Assessed and not applicable to Public Health Wales
Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2023	21 February 2023	Assessed and not applicable to Public Health Wales

Annual Governance Statement 2022/23

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 2022/23 is available at: <https://gov.wales/health-circulars>

We have acted upon, and responded to, all Welsh Health Circulars (WHCs) issued during 2022/23 which were applicable to Public Health Wales.

Of the 29 issued, 16 of these were applicable to Public Health Wales. 12 required action, 1 was for information and 3 were for compliance.

DRAFT

The following 16 WHCs were applicable to Public Health Wales:

WHC No.	Title	Status	Compliance
WHC 2022/8	New Records Management Code of Practice for Health and Care 2022	Action	The requirements of WHC 2022 008 have been incorporated into the newly developed Records Management Policy and Procedure, which formed part of phase two of the records management project. The policy and procedure are currently in draft form and appropriate approvals will be progressed.
WHC 2022/13	2022/23 LHB, SHA and 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 2022/23
WHC 2022/15	Changes to the vaccine for the HPV immunisation programme	Action	This WHC has been enacted. The Vaccine Preventable Disease Programme have been working alongside Welsh Government, UKHSA and the Local Health Boards to prepare for the change from Gardasil to Gardasil 9 for some time. This has been enacted through amendments to public information, consent forms and training provided to partners by VPDP. The completion of the transition from Gardasil to Gardasil-9 was confirmed on 28 June 2022 and this is now the only product available to order by health boards. Therefore this transition programme has been successfully concluded.
WHC 2022/16	The National Influenza Immunisation Programme 2022/23	Action	Public Health Wales have commenced the planning and implementation of the internal staff Influenza Immunisation Programme in line with WHC (2022) 010. The Internal Influenza Vaccination Delivery Plan 2022/23 was provided to QSIC 16 August 2022 and the committee was asked to consider and take assurance from the plan. Our aim is to maximise the staff uptake of

Annual Governance Statement 2022/23

WHC No.	Title	Status	Compliance
			immunisations for the 2022/23 campaign in line with WHC (2022) 016 objectives to increase coverage in all eligible groups.
WHC 2022/18	Guidelines for managing patients on the suspected cancer pathway	Compliance	These guideline are relevant to the Breast Screening Programme, Bowel Screening Programme and Cervical Screening Programme. The pathways for Breast, Colorectal and Cervical all include screening programmes as one of the routes into the pathway. This Welsh Health Circular has been shared with Heads of Programme for these programmes and also received at the Screening Division Senior Management Team on 9 August 2022. The screening programmes points of suspicion for the pathway is complied with as it is from the point of the outcome of the screening test. The timescales in the pathways are not currently being met due to the recovery from the COVID-19 pandemic across screening and the healthcare system.
WHC 2022/20	Never Events – Policy and Incident List July 2022	Compliance / Action/ Information	A review of our compliance against the points covered within this WHC has taken place to ensure compliance.
WHC 2022/21	National Optimal Pathways for Cancer (2022 update)	Action	The WHC has been enacted. The WHC applies to the three cancer screening programmes at Public Health Wales (cervical, bowel and breast). The Screening Division has confirmed compliance with working in line with the pathways outlined within the WHC.
WHC 2022/22	The Role of the Community Dental Service	Action	The WHC applies to the Community Dental Service employed by Health Boards. This workforce supports aspects of the PH programmes under the leadership of Public Health Wales, so has an indirect impact to the delivery of D2S, Gwen am Byth and the Dental

Annual Governance Statement 2022/23

WHC No.	Title	Status	Compliance
			<p>Survey. This is being monitored. The Dental Public Health teams stand ready to support Health Boards in their role.</p> <p>The is a Dental Inquiry being led by the Welsh Government Health and Social Care Committee in October 2022 where the capacity of the CDS will be further investigated. Public Health Wales have provided a written statement and will give oral evidence to the Committee.</p>
WHC 2022/23	Changes to the vaccine for the HPV immunisation programme	Information	<p>This WHC relates to changes to the routine HPV schedule recommended by JCVI in a statement on 5 August 2022 and adopted by Welsh Government in a written statement on 12th August 2022. 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 given to under 25s are due to take effect in the academic year 2023/24. Public Health Wales Vaccine Preventable Disease Programme provide supporting materials and public information for the programme. All materials will require revision ahead of the change. As the transition to the new programme will not occur until the academic year 23/24, and delivery is normally in spring term (Jan-March) the programme will aim to implement by January 2024</p>
WHC 2022/28	More than just words Welsh language awareness course	Action	<p>The new Welsh Language Awareness course (More Than Just Words) is applicable to all Public Health Wales Staff. This WHC has been enacted.</p>
WHC 2022/31	Reimbursable vaccines and eligible cohorts - for the 2023/24	Action	<p>This WHC has been enacted by the VPDP team and incorporated into the advice and training provided to NHS Wales on the preparation and delivery of the influenza campaign for 2023/24</p>

WHC No.	Title	Status	Compliance
	NHS Wales Seasonal Influenza (flu) Programme		
WHC 2022/35	Influenza (flu) Vaccination Programme deployment 'mop up' 2022/ 2023	Action	This WHC instructs Local Health Boards to plan to undertake influenza vaccination in mass vaccination centres to supplement the provision in GPs and community pharmacies in particular for 2-3 year olds and 16+ in clinical risk groups. Public Health Wales does not deliver vaccination to the public. Although we have a system leadership role in providing specialist advice to LHBs and Welsh Government, we are not directly impacted by the instruction.
WHC 2022/32	High Cost Drug System	Action	This WHC is in progress. The Executive Lead and relevant officers are working through the requirements to implement this WHC and a further update will be provided.
WHC 2023/1	Eliminating hepatitis (B and C) as a public health threat in Wales – Actions for 2022/23 and 2023/24	Action	This WHC is in enacted. Public Health Wales is represented at the Welsh Government BBV Oversight Group and is enacting WHC/2023/001 through the work plans of the various PHW teams involved, including in Microbiology, Communicable Disease Surveillance Centre and Communicable Disease Inclusion Health Programme. Specifically, Public Health Wales is working with the health boards to support them in developing their joint recovery plans (Action 1), and is currently developing information tools to monitor progress to elimination and assessing methods to estimate hepatitis C and hepatitis B prevalence (Action 13). Public Health Wales is also contributing to other actions in the WHC where it is not specifically mentioned, for example: in supporting case finding (Action 4),

WHC No.	Title	Status	Compliance
			improving testing models (Action 5, in micro-elimination initiatives in prisons (Action 9), and in delivering the national re-engagement programme (Action 12). Welsh Government is seeking ongoing funding to support national coordination posts. Public Health Wales is required to provide evidence that any funding to PHW to employ national coordination posts has been used to support the BBV elimination work (Action 2)
WHC 2023/2	New Lower Gastrointestinal 'FIT' National Optimal Pathway	Action	This WHC has been enacted. The Screening Laboratory. Public Health Wales provides Symptomatic FIT testing to primary care services across five of the seven Health Boards (Aneurin Bevan, Betsi Cadwaladr, Cardiff and Vale, Powys and Swansea Bay) in Wales. This provides coverage to approximately 75% of the population. Currently testing around 5,000 samples per month.
WHC 2023/4	COVID-19 spring booster vaccination programme 2023	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 VPDP have built the requirement to provide surveillance for this cohort into its processes for routine surveillance. We have also provided training and PGDs to allow LHBs to safely and legally administer the vaccine, and developed the appropriate public information resources to support vaccination..

12. Hosted Bodies

We have continued to host two bodies during 2022/23:

12.1 NHS Wales Health Collaborative

The NHS Wales Health Collaborative was established in 2015 at the request of NHS Wales Chief Executives to improve the level of joint working between NHS Wales' bodies, NHS Wales, and its stakeholders. The Collaborative's work supports improving the quality of care for patients and, ultimately, improving NHS services Wales-wide.

The Collaborative's core functions are the:

- ❖ Planning of services across organisational boundaries to support strategic goals
- ❖ Management of clinical networks, strategic programmes and projects across organisational boundaries
- ❖ Co-ordination of activities and teams across NHS Wales with a view to simplifying existing processes.

The Collaborative is hosted by Public Health Wales, on behalf of NHS Wales, under a formal hosting agreement, which is signed by the ten NHS Wales Chief Executives of Health Boards, NHS Trusts, and the Director of the Collaborative. The Collaborative has a clear reporting line upwards to the Collaborative Executive Group (Chief Executives meeting monthly) and, ultimately, to the Collaborative Leadership Forum (Chairs and Chief Executives meeting approximately quarterly). The Collaborative Executive Group and Collaborative Leadership Forum sign off the Collaborative's work plan annually.

A hosting agreement has been in place since 2015. The current agreement was extended by the Board in February 2022, and runs to 31 March 2023. The agreement provides details of the responsibilities of the Public Health Wales Board and the hosted body. The Board receives assurance on compliance with the terms of the agreement through the production of an Annual Compliance Statement and Report from the Collaborative. The Report for 2022/23 was received by the Audit and Corporate Governance Committee in March 2023.

The Collaborative has its own risk management process (that is compliant with the relevant Public Health Wales policy and procedures) and risks from their Corporate Risk Register are escalated to the Public Health Wales Board as appropriate.

From 1 April 2023, the NHS Collaborative will form part of the NHS Executive, which will be hosted by Public Health Wales. (Refer Section 12.3)

12.2 Finance Delivery Unit

The Finance Delivery Unit (the Unit) was formally established in January 2018, following an announcement by the Cabinet Secretary for Health and Social Services.

The purpose of the Unit is to enhance the capacity to:

- ❖ Monitor and manage financial risk in NHS Wales and to respond at pace where organisations are demonstrating evidence of potential financial failure
- ❖ Accelerate the uptake across Wales of best practice in financial management and technical and allocative efficiency.

The Unit is hosted by Public Health Wales under a formal hosting agreement signed by Public Health Wales, the Director of the Finance Delivery Unit and the Director of Finance, Health, and Social Services Group, Welsh Government. The Unit is accountable to the Director of Finance, Health and Social Services Group at Welsh Government and the annual work programme is agreed and monitored through regular meetings with Welsh Government.

The Board receives assurance on compliance with the terms of the hosting agreement through the production of an Annual Assurance Statement and Report from the Unit. The Report for 2022/23 was received by the Audit and Corporate Governance Committee and Board on 10 May 2023.

From the 1 April 2023, the Finance Delivery Unit will form part of the NHS Executive, which will be hosted by Public Health Wales. (Refer Section 12.3)

12.3 NHS Executive

The Welsh Government decision to establish an executive function was set out in *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') is being 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 services of the NHS Executive include services previously delivered by;

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

The agreement between Public Health Wales and Welsh Government to Host the NHS Executive was approved by the Board on 26 January 2023. The document 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.

The hosting arrangements for the NHS Executive will come into effect from 1 April 2023.

The intention is for Improvement Cymru to be fully integrated into the Executive structure under the formal hosting arrangements to be completed no later than 1 April 2024. In March 2023, the Board approved a memorandum of understanding (MOU) with Improvement Cymru, that set out the mechanism by which Public Health Wales, who is managerially accountable for the Services within Improvement Cymru, will work with and respond to the Mandate set for the NHS Executive by the Welsh Ministers and the overall delivery of the NHS Executive from 1st April 2023.

From April 2023, the Board will receive assurance on compliance with the terms of the hosting agreement through the production of an Annual Assurance Statement and Report from NHS Executive. This will be reported through the Audit and Corporate Governance Committee.

13. 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, formally the Joint Negotiating Committee (JNC).

The Local Partnership Forum has met five times during 2022/23 and has considered the following matters:

- ❖ Updated Terms of Reference for the Local Partnership Forum
- ❖ Proposals for governance arrangements relating to Partnership working at Board
- ❖ Sharing of organisational performance data including End of Year Reviews to update on key achievements, risks and developments
- ❖ Change programme updates, including the TUPE Transfer of Local Health Teams to health boards
- ❖ Update on the organisation's Long-term Strategy review
- ❖ Sharing of progress relating to the development of the Values and Behaviours Framework
- ❖ Ballots for industrial action

- ❖ Cost of living crisis and the organisational response, including adoption of Wagestream
- ❖ Development of the Being our Best framework
- ❖ Development of the Management and Leadership framework
- ❖ Employee Value Proposition (our people promise)
- ❖ Improved Employee On-Boarding and Induction
- ❖ Job evaluation and updated job description templates
- ❖ Long-term Strategy and Integrated Medium Term Plan
- ❖ Management of organisational change
- ❖ Policy review and development
- ❖ Release for Trades Unions activity (Facilities Time)
- ❖ Work How it Works Best

The Forum has commented on, and recommended, several policies for approval. In addition to this formal meeting, we have established an informal meeting which meets every other month to address more operational issues.

There is a well-established Joint Medical and Dental Negotiating Committee. During 2022/23, we have continued informal monthly meetings with representatives from this group.

In addition to these formal partnering mechanisms, we have consulted with the trade unions on all policy reviews and the introduction of all new policies during the last year.

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 intranet, Yammer and a Public Health Wales Staff Facebook group, whose membership now accounts for over half of the workforce.

We had planned to participate in the All-Wales NHS Staff Survey, but the decision was taken at national level to delay this until later in 2023.

We continued to work towards improving the areas which the previous Wellbeing Survey had highlighted as priorities. These were, Communication, Line Managers and Work/Life Balance. Our "Work How it Works Best" Pilot was put in place, and closely monitored and evaluated in order to assess the impact on different staff groups. This pilot has been highly beneficial for many members of staff, particularly those with caring responsibilities, disabilities and long term health conditions. Work was also undertaken to develop a Behavioural Framework entitled "Being our Best". Based on our organisational values, this sets out how we are expected, and how we can expect others to go about doing what we do. The Staff Diversity Networks were involved throughout the design and development of both of these projects, ensuring they were fit for purpose and accessible for all staff.

During 2022/23, we invited our consultant colleagues (medical and multi-professional) to a series of facilitated discussions to improve understanding of their experience working at Public Health Wales. This has enabled us to prioritise and agree collectively five areas to address in the first instance, with consultant colleagues being further invited to share their suggestions for change needed to bring about the improvements required. These suggestions have led to the development of a series of solution-focussed actions which we are currently rolling out.

14. 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 2022/23 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 2023.

(Further information on the Effectiveness cycle can be found in [section 3.4.2](#) of this report.)

14.1 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 2022/23 is that:

Reasonable assurance		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.
-----------------------------	---	---

Summary of Audits 2022/23

Review Title	Assurance Rating	Objective of Review
Local public health teams	Substantial	The overall scope of the audit is to consider the planned project approach and its implementation.
Financial management	Substantial	The overall objective of the review was to consider the management of financial plans at Directorate level.
Cyber security	Substantial	Review arrangements in place for the implementation of the NIS Directive in the Trust, including the Cyber Assessment Framework (CAF), improvement plan and overarching governance.
Welsh risk pool process	Substantial	To provide assurance over the reimbursement processes in place within the Trust.
Health protection division management arrangements (Draft)	Substantial	(To follow once finalised)
Health and Safety	Reasonable	The overall objective of the audit is to consider corporate reporting of Health

Review Title	Assurance Rating	Objective of Review
		and Safety matters with consideration to matters concerning staff working from home.
Workforce – sickness absence monitoring	Reasonable	The overall scope of the audit was to consider the effectiveness of sickness absence monitoring and reporting.
Information governance – contract management (Draft)	Reasonable	(To follow once finalised)
Population health grants management	Limited	
Information provision (Draft)	Limited	(To follow once finalised)

None
No Assurance
None
Advisory/Non-Opinion
None

The audit work undertaken during 2022/23, 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.

(Further information on the Internal Audit Reports received by the Audit and Corporate Governance Committee can be found in [section 3.2.1](#) of this report.)

14.2 Counter Fraud

From 1 April 2012, Public Health Wales has three accredited local counter fraud specialists to support the organisation developing a counter fraud culture by providing advice, awareness sessions, newsletters and if necessary conducting investigations.

The local counter fraud investigators regularly liaise with the Counter Fraud Service (Wales), Counter Fraud Authority and work with other agencies such as the police, and the Home Office Immigration and Enforcement teams regarding fraud investigations, and circulate any alerts in fraud methods. When it is necessary specialist fraud lawyers in the Crown Prosecution Service are consulted about appropriate criminal charges.

At 1st April 2022 a total of (0) investigations were open and being investigated by the team.

During the course of this financial year a total of (4) new referrals have been received and investigated by the team. A total of (4) cases were promoted to formal investigation. All have been fully investigated and all have now been closed. Three resulted in no further action being required and one resulted in a disciplinary sanction.

At 31st March 2023 there are (0) live cases being investigated by the team on behalf of Public Health Wales .

Counter Fraud reports and updates are provided to the [Audit and Corporate Governance Committee](#) throughout the year.

14.3 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 2022, AW reported:

(to be added once finalised)

15. 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.

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: **Dr Tracey Cooper**

Date: 28 July 2023

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