

# PHA Annual Business Plan 2024/25





#### Introduction

The Public Health Agency (PHA) Annual Business Plan sets out the key strategic actions that will be taken forward by PHA during 2024/25, in achieving the extant PHA Corporate Plan.

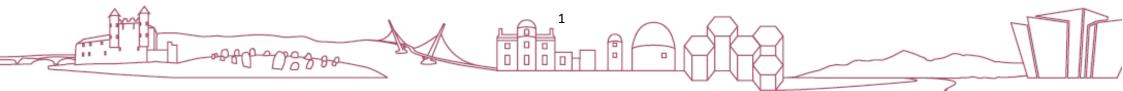
The Annual Business Plan identifies those key priorities that PHA recognises will require particular focus to enable progress to be achieved both during 2024/25 and in future years to protect and improve population health outcomes and reduce health inequalities. The Annual Business Plan is underpinned by Directorate Business Plans which encompass all core areas of work that are being progressed on an ongoing basis, meeting Ministerial priorities and outcomes set out in the Corporate Plan 2017-21.

The Annual Business Plan is broken down under the following key priority areas that align with the PHA Corporate Plan 2017-21 (reviewed and rolled forward to 2024/25) and as reflected under the current organisational Reshape and Refresh programme:

- Health Protection
- Starting Well
- Living Well
- Ageing Well
- Our Organisation and People

There is no doubt that 2024/25 will be a challenging year, as we strive to continue to meet our core commitments within a tight financial context and manage a period of significant organisational and system wide change. It will however, also be a year of significant opportunity as PHA, under the Reshape and Refresh Programme, looks to evolve into a stronger organisation with the capacity and capability to provide the public health leadership and expertise to deal with and advise on the ongoing wider public health and healthcare needs of the population. In this context of significant change, it is important for PHA and its stakeholders to have clarity around our strategic priorities and we will therefore take forward the development of a new Corporate Plan within 2024/25.

The PHA retains its responsibility for providing public health professional input to the Department of Health's Strategic Planning and Performance Group (SPPG) for the commissioning of health and social care services across Northern Ireland. In discharging our ongoing responsibilities in this domain we will continue to support the commissioning process and will work closely with colleagues in SPPG to take forward the planning, development and implementation of the new Integrated Care Planning System for Northern Ireland, ensuring that the public health agenda and addressing health inequalities, is appropriately reflected in any new plans.





Tackling our long-established pattern of health inequalities - the unfair and avoidable differences in health outcomes both across the population and between different groups within society, is a complex and multifaceted challenge. At the core of the challenge is the need to address the wider social determinants of health and this requires the commitment and support of Government Departments, statutory bodies and Community and Voluntary Organisations.

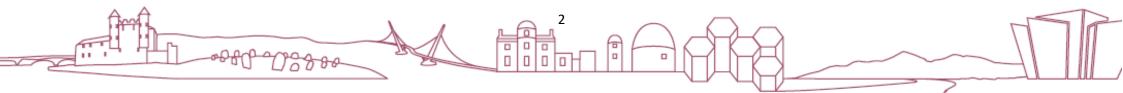
As the lead public health body, PHA will continue to work with partners across Northern Ireland to tackle these inequalities and during 2024/25 we will specifically:

- target a greater level of investment towards population groups and communities, experiencing the highest health inequalities;
- focus preventative services on those groups experiencing poorest health, including the top 20% socioeconomically deprived populations;
- invest in health enhancing services, which provide opportunities for all and support our most vulnerable populations;
- engage with service users, carers, their advocates and the wider public, enabling their voices to be heard.

While not directly linked with the key actions and key performance indicators stated in this document, the Quality Improvement/HSCQI Directorate will support PHA priority areas of work by implementing the HSCQI Annual Workplan (as mandated by the HSCQI Leadership Alliance). Key areas of this Workplan will support the PHA Annual Business Plan through the delivery of regional improvement programmes, building regional quality improvement capacity and partnership working.

#### Accountability

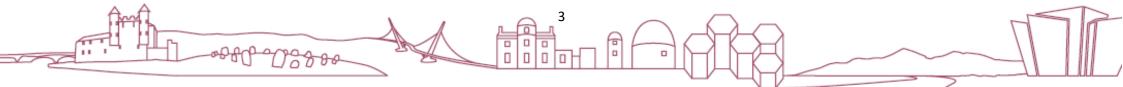
The Annual Business Plan will be monitored quarterly and update reports across all KPIs will be provided to PHA Board. The Agency Management Team (AMT) will be collectively responsible for ensuring the actions and associated KPIs are achieved. Where actions are not on target to deliver, these will be considered by AMT and mitigating actions agreed to ensure maximum progress is made by March 2025.





#### 1. PROTECTING HEALTH

| Strategic Priority                      | Strategic Initiative   | Outcome Measures (including timescales)  | Lead Director  |
|---|--|--|----------------|
| Protecting the health of the population | <ul> <li>We will improve the control and reduce the impact of infectious diseases.</li> <li>We will explore and harness opportunities to protect and improve health, working with others taking a</li> </ul> | KPI 1: Implement the provision of BBV screening through low threshold and inclusion services to individuals at risk of hepatitis C, hepatitis B and HIV through injecting drug use or sharing drug taking paraphernalia, by March 2025 | Joanne McClean |
|   | 'one health' approach which recognises the links between the environment, animal and human health.   | KPI 2: The public health component of a<br>Northern Ireland One Health AMR Action Plan<br>will be developed by March 2025<br>(early draft agreed by end of December 2024)  | Joanne McClean |
|   | We will deliver an effective<br>communicable disease and AMR<br>surveillance service which alerts us to change in the incidence of   | KPI 3: Development of a unified, regular surveillance report and risk assessment for DoH and HSC system by March 2025  | Joanne McClean |
|   | to changes in the incidence of infections so we can take action to protect public health.  | KPI 4: Establishment of outbreak detection through statistical exceedance reporting completed by end of October 2024   | Joanne McClean |
|   | We will support HSC partners in the control of infectious diseases.  | <b>KPI 5:</b> Appraisal of flu vaccination delivery programme including development of options for programme management (including budget  | Joanne McClean |
|   | <ul> <li>We will lead the implementation of<br/>the Northern Ireland vaccination<br/>programmes.</li> </ul>  | control) completed and agreed with DoH by  March 2025. (Quarterly updates provided  June/September/December)   |                |
|   | <ul> <li>We will lead on the development of<br/>the PHA, SPPG and BSO Pandemic<br/>Preparedness Framework.</li> </ul>  |  |                |





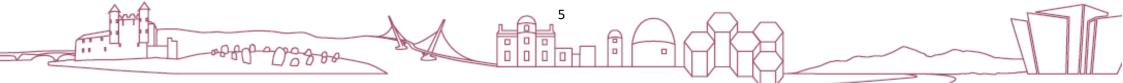
#### 2. STARTING WELL

| Strategic Priority  | Strategic Initiative   | Outcome Measures (including timescales)   | Lead Director  |
|---|--|---|--|
| All children and young people have the best start in life | We will support the provision and development of programmes that support children to:  Survive (reducing mortality, pre-conception and antenatal care),  Thrive (universal services, new born screening, nutrition and neurodevelopment, support for child development HCHF, vaccination, health care, wellbeing support etc)  Transform (poverty, safeguarding, social complexity and deprivation, family support, FNP etc) | KPI 6: Vaccine uptake rates for Pertussis and MMR stabilised with particular emphasis on those with the greatest risk of experiencing health inequalities by March 2025. (Quarterly updates provided June/September/December)   | Joanne McClean   |
|   | We will drive improvements in access to high quality data which will facilitate the development of outcome driven actions to support families and improve the health and wellbeing of mothers and children.  | KPI 7: Develop an action plan, in partnership with Encompass, to replace and strengthen the existing child health system and its links to other key data systems by March 2025  KPI 8: Review unmet need and risk factors associated with social complexity in pregnancy by December 2024 | Paul McWilliams / Stephen Wilson/ Leah Scott/ Heather Reid  Heather Reid |



## 3. LIVING WELL

| Strategic Priority                               | Strategic Initiative  | Outcome Measures (including timescales)  | Lead Director                     |
|--|---|--|-----------------------------------|
| All individuals and communities are equipped and | We will review our existing<br>investments and programmes of<br>work and determine what changes   | KPI 9: Develop a framework to our approach for tackling health inequalities by December 2024   | All Directors                     |
| enabled to live long<br>and healthy lives        | are necessary to better target those individuals and communities experiencing the highest levels of health inequality.                              | KPI 10: Complete the Discovery exercise for the development of a NI Mental Health Hub by September 2024  | Joanne<br>McClean/Heather<br>Reid |
|  | We will develop and implement with partners a range of coordinated actions across communities and a   | KPI 11: Approval of Commissioning Framework for Alcohol and Drugs Complete Phase 1 and commence Phase 2 of Regional Drugs & Alcohol Services Procurement by December | Joanne McClean                    |
|  | range of settings to improve mental health and wellbeing and reduce the level of suicide.   | <b>KPI 12:</b> Implementation phase 1 – 3 of a Whole Systems Approach Obesity in line with   | Joanne McClean                    |
|  | We will seek to influence and support<br>healthy behaviours including<br>reduction from alcohol and drug use,<br>promote health weight and physical | PHE/Leeds Beckett University methodology across early adopter sites, with 2 or 3 completed <b>by March 2025</b>  |                                   |
|  | activity, reduce prevalence of<br>smoking, improve sexual health and<br>promote uptake of population  | <b>KPI 13:</b> Continue to reduce smoking prevalence across NI by a minimum of 1% during 24/25. (i.e. from 14% to 13% <b>by March 2025</b> )                         | Joanne McClean                    |
|  | <ul><li>screening programmes.</li><li>We will support actions, focussed on</li></ul>  | KPI 14: Develop a cancer prevention action plan, including the actions outlined in the   | Joanne McClean                    |
|  | early detection and treatment of illness, in particular cancer, respiratory and cardiovascular disease to optimise better health                    | Cancer Strategy 2022 agreed by December 2025   |                                   |



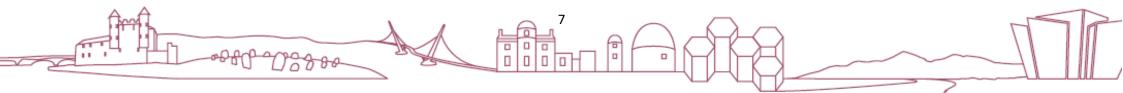


| Strategic Priority | Strategic Initiative   | Outcome Measures (including timescales)  | Lead Director  |
|--------------------|--|--|----------------|
|                    | outcomes including those living with long term health conditions.  | KPI 15: Action plan to address inequalities in participation in screening programmes developed by March 2025 | Joanne McClean |
|                    | <ul> <li>We will work with HSC Partners to<br/>ensure the delivery of high quality<br/>population screening programmes<br/>which reflect best practice standards.</li> </ul> |  |                |



## 4. AGEING WELL

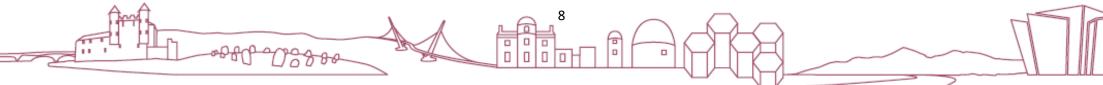
| Strategic Priority  | Strategic Initiative   | Outcome Measures (including timescales)  | Lead Director  |
|---|--|--|----------------|
| All older adults (the ageing well community) are enabled to live healthier and more | We will work to support people to<br>maintain their health as they age, so<br>that they can lead active health lives<br>for as long as possible delaying the<br>onset of ill health and frailty.   | KPI 16: a new regionally agreed, evidence based safer mobility model across NI completed by March 2025   | Heather Reid   |
| fulfilling lives  | We will develop and implement multi<br>agency healthy ageing programmes<br>to engage with and improve the<br>health and wellbeing of older people.   | KPI 17: all HSC care homes will have implemented the care homes fall pathway initiative - by December 2024 and a further 10% of the Independent care home sector will have adopted the pathway by March 2025 | Heather Reid   |
|   | <ul> <li>We will promote appropriate<br/>intervention programmes within all<br/>settings to prevent, detect and<br/>manage ill health (including mental ill<br/>health) and its consequences.</li> </ul>   | <ul> <li>KPI 18:</li> <li>i) Level 1-3 Education and Training Tools for Advanced Care Planning Programme will be in place and quality assured by December 2024.</li> </ul>                                   | Heather Reid   |
|   | <ul> <li>We will work to support people to<br/>make the best decisions around their<br/>care and treatment particularly at the<br/>end of life including the development<br/>of advance care plans through the<br/>RESPECT framework.</li> </ul> | ii) Implementation structures for the RESPECT programme will be in place and implementation underway including public messaging by December 2024   |                |
|   | We will support programmes and initiatives that promote independence and self-management.  | KPI 19: a 5% increase in uptake rate in seasonal flu vaccination programme for care home staff by March 2025   | Joanne McClean |





## 5. OUR ORGANISATION AND PEOPLE

| Strategic Priority                 | Strategic Initiative   | Outcome Measures (including timescales)   | Lead Director      |
|------------------------------------|--|---|--------------------|
| Our organisation works effectively | We will progress the implementation<br>of the PHA Reshape and Refresh<br>programme to ensure the<br>organisation effectively delivers its  | KPI 20: New PHA Corporate Plan to be developed by March 2025 KPI 21: New PHA Operational structures and   | CEO /All Directors |
|                                    | <ul> <li>organisation effectively delivers its core functions.</li> <li>We will support our staff and their</li> </ul>   | operating model, implemented by March 2025. (Quarterly updates provided June/September/December)  | Directors          |
|                                    | wellbeing, particularly during a period  | build, depterment, becomes,   |                    |
|                                    | of organisational reform and restructuring.  | KPI 22: Revised Business Continuity Plan developed and training rolled out by December 2024   | Leah Scott         |
|                                    | <ul> <li>We will ensure appropriate resilience<br/>measures are in place across the<br/>organisation to enable a rapid and<br/>appropriate response to major public<br/>health incidents.</li> </ul> | KPI 23: PHA procurements to be progressed in line with the agreed Procurement Plan for 2024/25 by March 2025 - (quarterly updates provided June/September/December) | Leah Scott         |
|                                    | We will make better use of data,<br>research, evidence and health<br>intelligence to inform our decision-  | KPI 24: New Partnership Agreement in place with DoH by December 2024  | Leah Scott         |
|                                    | making, influence external partner agendas and will further develop appropriate and robust data where required.  | KPI 25: PHA Digital and Data Strategy approved by Board and Implementation Plan developed by September 2024   | CEO                |
|                                    | We will ensure high quality and appropriate governance   | KPI 26: PHA Skills and Development Framework approved by September 2024   | Leah Scott         |
|                                    | arrangements and processes are in place to support the delivery of the PHA functions.  | KPI 27: Launch of new PHA People Plan by June 2024  | Leah Scott         |





| Strategic Priority | Strategic Initiative  | Outcome Measures (including timescales)   | Lead Director                   |
|--------------------|---|---|---------------------------------|
|                    | We will ensure we have the skills,<br>opportunities and staffing capacity to<br>deliver our functions.  | KPI 28: New PHA R&D office to be set up and HSC R&D Strategy to be issued for consultation by March 2025  | Joanne<br>McClean/Leah<br>Scott |
|                    | We will work in partnership to<br>communicate effectively with our<br>stakeholders and target audiences | KPI 29: PHA will be in membership of each AIPB by January 2025  | All Directors                   |
|                    | and strengthen collaboration for improvements in population health and wellbeing.                       | KPI 30: PHA will achieve financial breakeven position at end of year March 2025   | All Directors                   |
|                    | We will work with SPPG and HSC partners to provide professional   | <b>KPI 31:</b> An approach to health inequalities and associated training will be delivered to all staff across the organisation <b>by March 2025</b> | All Directors                   |
|                    | public health input to the commissioning of health services.  | KPI 32: PHA in membership / co-leading new SPPG/PHA commissioning teams by September 2024   | All Directors                   |