

Sixth Senedd strategy

December 2021

Background

1. The Health and Social Care Committee (“the Committee”) has been set up by the Senedd to look at policy and legislation, and to hold the Welsh Government to account on the physical, mental and public health and well-being of the people of Wales, including the social care system.
2. This document sets out our strategic approach to our work in the Sixth Senedd.

How we developed our strategy

3. We undertook a range of activities to inform the development of our strategic approach for the Sixth Senedd:
 - Between July and September 2021, we consulted stakeholders and the public on priorities for the Sixth Senedd.
 - On 23 September 2021, we received an update on the COVID-19 pandemic from the Chief Medical Officer for Wales, the Chief Scientific Adviser for Health, and the Welsh Government’s Technical Advisory Cell, and held a scrutiny session with the Welsh Government Ministers with responsibility for health and social services.
 - On 7 October 2021, we held a private discussion with academics with expertise in issues emerging in respect of COVID recovery.
 - On 21 October 2021, we held an externally-facilitated strategic planning session.



Our vision for health and social care

4. Our vision for health and social care over the next five years is:

- A **post-COVID reset**, which results in:
 - All people in Wales living longer and healthier lives.
 - A health and social care system that is working more effectively than it was before the pandemic.
 - People who use health and care systems knowing which services to access to meet their needs, and having a more positive experience.

5. Achieving this vision will require:

- Better **integration** between health and social care.
- Progress in **reforming social care**, including greater sustainability of social care services.
- Increased levels of **health literacy** and signposting between services.
- Improved **access to mental health services**, especially for young people and people with the most acute needs.
- Progress in **addressing workforce shortages** across health and social care, including the development of the primary care workforce and services so that people are able to access appropriate expertise close to home.
- **Higher morale** across the health and social care workforce.
- Improved **self-management and self-care** of chronic conditions.
- Improved standards and practice in relation to **women's health**.

Our role

6. Our role is to drive change through influencing the Welsh Government and the health and social care sector.

7. We will do this by:

- Maintaining a sense of **cross-party common purpose** towards our shared vision, while recognising and respecting that Members will have different political perspectives.
- **Keeping a priority issue or issues on the Government's agenda, or pushing an issue or issues up the agenda**, through inquiries, general scrutiny, informal discussions with the Minister, seeking briefings from the Welsh Government, correspondence, monitoring the implementation of recommendations, Members' own questions or contributions in Plenary etc.
- **Identifying barriers to implementation or change, and how such barriers might be addressed**, and following up work to see whether the barriers have been addressed. This might also include more systematically scrutinising Welsh Government responses, and following up where responses are not sufficiently clear, robust or comprehensive.
- **Planning work in sufficient time** to provide clarity for stakeholders, enable relationships to be built with people whose voices might not otherwise be heard, and to make best use of resources and time, while also **retaining sufficient flexibility and capacity to enable us to respond to emerging or topical issues**.
- Putting aside time periodically to **reflect on progress made** towards the overarching vision, what contribution we have made, and what further actions we could take to drive progress.

Cross-cutting issues

8. The following themes will run through all of our work:

- **Putting people at the heart of health and social care**
For example, who is affected by policies or decisions; different impacts on different groups or communities; how people are communicated with, engaged, consulted or involved.
- **Innovating for improvement**
For example, alignment with the Welsh Government's transformation agenda; innovation in processes, technology, equipment, training and attitudes; barriers; evidence-basis; evaluation, sharing and rollout; funding; risk appetite and the balance of safety and innovation; accountability and drive; agility; the alignment of aspiration and implementation.
- **The health and social care workforce**
For example, capacity; training and retraining; embedding innovation in workforce planning and development; staff morale and wellbeing.
- **Health inequalities and inequities**
For example, the differences in health outcomes and access to services across different groups, communities, socioeconomic groups or geographic areas.
- **Delivering a post-pandemic reset**
For example, considering how things were before the pandemic, how they were affected by the pandemic, and what we want the situation to be.

Priority issues

9. We have identified the following priority issues. We will keep these lists under review throughout the Senedd.

Year one of the Sixth Senedd (2021-22)

- COVID: watching brief on the pandemic, and post-COVID reset.
- **Health and social care workforce**, including training; recruitment; retention; needs; training places; culture of innovation and improvement; and senior leadership (for example through pre-appointment hearings or scrutiny sessions).
- Impact of the **waiting times** backlog.
- Patient flow through hospitals, with an initial focus on **hospital discharge**.
- Mental health.
- **Winter planning** for health and social care.
- Scrutiny of the **Welsh Government's draft budget 2022-23**.

Potential priorities for years two to five of the Sixth Senedd (2022-26)

- **Primary care**, including widening understanding of the range of services, signposting, unconscious bias, and health literacy.
 - The promotion of healthy lifestyles and prevention.
 - Women's health.
 - Rehabilitation services.
 - Access to services for **long-term chronic conditions**.
 - Tackling health inequalities.
 - **Social care** integration and funding.
 - Support and services for **unpaid carers**.
 - The pandemic and post-COVID reset.
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How we will work

10. We have agreed that we will:

- **Build relationships** to facilitate constructive collaboration and influence.
- Listen to **lived experience**, including undertaking **visits** once the public health situation allows.
- Be **alert to our meetings** and **flexible** in our meeting times.
- Hold **hybrid meetings** by default.