

**Eluned Morgan AS/MS**  
**Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol**  
**Minister for Health and Social Services**



**Llywodraeth Cymru**  
**Welsh Government**

Russell George MS  
Chair  
Health and Social Care Committee  
Senedd Cymru

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21 March 2022

Dear Russell,

Thank you for the Committee's letter on 2 March 2022 following my session on 10 February 2022. Please find below a response to your action points in the order raised in your letter.

### **Vaccination programme**

Since my committee appearance, we have published the latest [COVID-19 Vaccination Strategy](#), which sets out how the vaccination programme will continue to play a significant part in keeping the people of Wales safe in 2022, with a focus on the vulnerable and elderly.

As we transition beyond the emergency pandemic response, we continue to be led by the latest clinical and scientific evidence from the Joint Committee on Vaccination and Immunisation (JCVI) and the Chief Medical Officer (CMO) for Wales. COVID-19 has not gone away and we must learn to live with this virus just as we live with many other infectious diseases.

While we are all hoping for a smooth transition into a Covid Stable scenario where there will be new waves of infection, but they are not expected to put unsustainable pressure on the NHS, we also need to be ready to respond quickly to any future outbreaks or new variants. We have a responsibility to learn from the pandemic and ensure there is sufficient resilience in the system to stand up a Covid Urgent response should it be needed. The COVID-19 Strategy stresses the continued need for the NHS, with its highly skilled and experienced workforce, to respond promptly and effectively, and demonstrate the agility and flexibility to scale up, or scale down resources and delivery, depending on need.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Health boards have been asked to continue to deliver primary and booster doses, including the spring booster, in line with the current schedule and to plan on the basis of a core 'most likely' scenario including provision for an autumn booster, as well as planning for a COVID urgent scenario of a 'surge' in response to a variant of concern, akin to that delivered in late 2021 in response to the Omicron variant.

Health board's plans for COVID-19 vaccinations will be included in their IMTPs in response to the Planning Framework. They will be expected to provide narrative in their IMTP to outline their proposed service models and schedule as well as their plans in relation to maximising uptake, equity, surge capacity and workforce. We are expecting to receive those plans for scrutiny by the 31<sup>st</sup> March. In addition, health boards will be expected to report on their progress which will enable the sharing of good practice and innovation.

In terms of a universal offer of vaccination to all 5-11 year olds, health board vaccine SRO's have already planned for this scenario, including securing paediatric trained vaccinators and child-friendly vaccination centres. They have built on their learning from the vaccination of clinically at risk 5-11-year-olds and 12-15-year-olds and have considered carefully how to ensure equity from the outset. There is work in train to ensure the necessary immunisation and clinical guidance is in place, and there is factual and trusted information on the Public Health Wales website for children and parents to help inform their decision. Health boards will start to deploy this programme from mid-March and throughout April and May. The priority remains to protect our most vulnerable and elderly, as we have throughout the pandemic. The spring booster began roll out from Monday 14 March.

I have provided assurance to the NHS that funding will be made available to support their important work, including funding to secure venues, workforce and consumables; though there is the expectation that health boards will explore every opportunity to secure a more sustainable workforce and adapt the delivery models to be as efficient as possible, demonstrating value for money.

### **Review of winter plans**

There has been regular dialogue with Regional Partnership Boards since the submission of their planning documents in November 2021. Feedback from the RPBs has informed the planned review process.

The winter planning process and impact will be reviewed formally during April and May 2022 when the full impact of actions undertaken to support winter resilience will be known.

This review will comprise a number of components:

- Review of actions undertaken by regions to assess the impact in terms of outputs and outcomes (where these data are available). This will be undertaken through the processes used for the Regional Investment Fund for which each Regional Partnership Board submits a quarterly return.
- Feedback from key stakeholders on the process of developing and implementing the winter plan. This will include:
  - RPB leads and health and social care colleagues;
  - Welsh Government policy leads across the Health and Social Services Group.
- The review will gather notable practice and challenges experienced by each region to facilitate learning.

The review will be facilitated by Welsh Government officials and there will be an opportunity for both internal and external colleagues to provide feedback anonymously to ensure colleagues are able to provide full and frank feedback.

A winter learning event may be considered to facilitate dissemination notable practice and seek views from key stakeholders.

A review report will be prepared which will set out key findings and recommendations for further planning cycles.

### **Impact of short-term funding for winter pressure**

The review of winter planning will incorporate consideration of the challenges to delivery, including the ability to deploy short-term funding to support winter schemes.

Alongside allocations of funding to RPBs to support winter, there was significant investment during 2021 to support the recovery of health and social care and to support resilience of services experiencing ongoing impacts of the pandemic and wider system pressures.

The Integrated Medium Term Planning process covers a three-year period with a detailed focus on year one. The expectations of this process are that it takes into account seasonal variations in demand for services and the robust deployment of resources to align with these variations. This process is supported by both national modelling for COVID demand and local modelling of all types of service demand.

The forthcoming process of submission and assessment of IMTPs for 2022-23 to 2024-25 will include a focus on the management of seasonal pressures.

I hope I have provided clarity on the areas set out in your letter but if you would like further information please let me know.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'M. E. Morgan'.

**Eluned Morgan AS/MS**

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Minister for Health and Social Services