

**Item: 04**

**Title: Chief Executive's report**

**Introduction**

Since our last public board meeting, I have continued to work with key partners to talk about our role, inform our plans, ways of working, delivery on our commitments, tackle key issues in health and social care and identify how we can work together to strengthen the voice of people in health and social care services. Details of all these activities are available on request.

This report focuses on a few of the developments and activities I have been involved in since the last full public board meeting on 25 March 2026. These key activities and developments have not been covered in more detail in other Board papers.

**Strengthening people's voices**

**Supporting a stronger public voice in Community by Design**

We have been working with NHS Wales Performance and Improvement on a range of developments and activities designed to drive improvement in the way services are designed and delivered. One of these is the Community by Design programme. This programme aims to support more care that's planned and delivered closer to home.

The approach starts from the point of view of the person using services and works on the assumption that care should be provided in the community wherever it is safe and appropriate to do so.

The programme focuses on helping services think differently about whole pathways of care so that support is joined up, easier to access and better matched to people's needs. It looks at how partners can make better use of community-based diagnostics, advice and shared decision making, risk management, medicines support, monitoring and the skills of the wider multi-professional team. Current work includes pathways linked to breathlessness, diabetes and community mental health.

This is important from a Llais perspective because it reflects a more person-centred way of planning services and creates an opportunity to build people's experience, confidence and priorities into service redesign from the start.

If Community by Design is to deliver lasting change, it will need to be shaped by what local people and communities say matters to them, especially where changes affect access, continuity of care and people's ability to get the right support at the right time and in the right place. There is a clear opportunity to align this work with the People's Principles,

particularly around access that works for everyone, dignity and respect, clear and honest communication, joined-up care and services that respond to the whole person.

We will continue to work with NHS Wales Performance and Improvement to support a strong public voice in how Community by Design is developed and applied across Wales. This includes making sure that people and communities are listened to meaningfully as services change, and that what we hear through our wider engagement helps shape care that is more joined up, more accessible and more responsive to what matters most to people.

### **Bringing a patient perspective to the Nursing and Midwifery Council's (NMC) transformation programme**

We continue to work with the Nursing and Midwifery Council to inform and influence how its work should affect people's experience of care and their confidence in healthcare services.

We met with the Chief Executive and his colleagues last month to focus on a range of patient related matters, including:

- its consultation on improving nursing and midwifery practice learning, including the quality of placements, more community-based learning for nursing students and stronger midwifery education.
- proposed changes to fitness to practise rules that aim to respond to concerns more quickly and fairly while continuing to protect the public.
- the Council's work on anti-racism, inclusion and cultural awareness in education and practice, including principles to help universities and practice partners respond better to racial inequality and the Black maternal health crisis. This includes its commitment to listen to bereaved families affected by failures in maternity services and to learn from what families have shared about safety, accountability and care.

We reinforced the importance of shaping these changes around the lived experience of people who use services, especially where safety, dignity, fairness and trust are at stake. We had a shared view that changes to regulation and education should help build safer care, stronger professional standards and greater confidence for the people and families who rely on services.

Our work together has informed the Nursing and Midwifery Council's development of maternity guidance, helping to make sure that women's experiences and the views of families are better heard and better reflected.

Our continuing work is focusing on how the Council's wider transformation programme aligns with the People's Principles particularly where they

speak to dignity, listening, clear communication, fairness and joined-up care. This is an important opportunity to embed the Principles within the regulatory framework for nurses and midwives in support of safer, fairer and more responsive care.

### **Working with the General Medical Council to support developments from a patient perspective**

We have also recently worked with the General Medical Council to help strengthen its patient-facing communication, particularly in relation to how it writes to people when concerns are raised but are not taken forward.

Our contribution focused on the importance of plain language, compassion, accessibility, transparency and taking a trauma-informed approach, so that people feel better informed, treated with respect and clearer about what happens next.

This reflects what people consistently tell Llais matters most when they are trying to navigate difficult processes or raise concerns about care.

At its most recent UK Advisory Forum meeting in Cardiff, Llais was asked to frame attendee's thinking and discussions on education and training for doctors by talking about the People's Principles. The Council had already done some work to test how well their standards and requirements aligned with the People's Principles. The value of using the Principles to strengthen discussion around communication, dignity, fairness, listening and person-centred care was highlighted.

The General Medical Council has since followed up to continue taking this work forward, which is a positive sign of ongoing commitment and an opportunity to build further influence for the People's Principles in this area.

### **Working with Healthcare Inspectorate Wales**

We have recently agreed to work with Healthcare Inspectorate Wales to explore how the People's Principles can help inform the development of its new inspection methodology for healthcare in Wales. This is a positive opportunity to strengthen the way people's experience and expectations are reflected in how the quality and safety of healthcare is assessed.

There is a clear opportunity for this work to help make sure inspection approaches give proper weight to what matters most to people, including dignity and respect, clear communication, access, joined-up care and being listened to. This work can be an important step in building a stronger link between what we hear from people and communities and how assurance and improvement is taken forward across healthcare services in Wales.

### **Cross border healthcare: the challenges affecting people's experience of healthcare**

Since my last report, Llais has contributed further evidence to the Welsh Affairs Committee inquiry into cross-border healthcare arrangements between England and Wales. This includes giving evidence to the inquiry

at the committee's session on 22 April 2026. Our evidence drew on what people have told us directly through engagement, complaints advocacy and wider work with community partners who work with people who rely on services across the border.

Our evidence highlighted that cross-border healthcare is a routine part of NHS care for many people in Wales, particularly in border communities and for those who need specialist treatment in England. While these arrangements are longstanding, people's experiences are often more confusing and more stressful than they should be. People tell us they are not always clear which rules apply to them, what they are entitled to, who is responsible for decisions about their care, or where to go when something goes wrong.

We drew attention to the practical impact this can have on people's lives. This includes difficulties navigating different systems, delays linked to funding and administration (and in particular the impact of the decision made by Powys Teaching Health Board to slow down treatment for people on waiting lists in England), limited digital and data sharing between services, long travel distances, and inconsistent support for Welsh language needs. These issues can leave people feeling uncertain, overlooked and less able to influence decisions about their care.

The evidence also reflects the relevance of the People's Principles, particularly around access, clear communication, joined-up care, fairness and being treated with dignity and respect. Since the oral evidence session, we have also submitted follow-up written evidence to the Committee about the impact of operating different waiting times in English hospitals depending on where someone lives.

### **Strengthening people's voices in social care**

We have continued to work with the Association of Directors of Social Services and the National Office for Care and Support to help strengthen the place of people's voices in social care policy, service development and decision making.

This reflects our shared interest in making sure that social care change is shaped more clearly by what people, families and carers say matters to them, and not only by organisational or system pressures.

With the Association of Directors of Social Services, discussions have continued around the design of a co-operation agreement to support the way service change proposals are handled in both health and social care.

This includes the importance of early information sharing, a consistent approach to engagement, and clearer arrangements for how Llais can respond to proposed changes affecting people's access to, and experience of, care and support.

With the National Office for Care and Support, we have continued to focus on public engagement that is more visible, more responsive and more connected to how social care improvements are planned and delivered.

This continued partnership working has provided a useful opportunity to reflect on progress against the National Office's plan and how its actions are being delivered in practice. It has also reinforced the importance of making sure that engagement is not treated as a separate activity, but as a core part of how decisions are shaped and tested so that people's experience informs the development of a National Care and Support Service for Wales.

### **Influencing the new Welsh Government's priorities**

Wales now has a new Government, which will be developing its Programme for Government. This creates an important opportunity for Llais to continue to bring forward what people have told us matters most in health and social care, and to make sure that people's voices are heard clearly as new priorities are shaped.

We will work to inform and influence the priorities of the new Government by building on the strong alignment between the People's Priorities (Llais' manifesto calls) and the People's Principles and the commitments made during the election period, as summarised below:

The clearest and most direct alignment between Llais manifesto calls and the election commitments made by the new government is in relation to 'What matters to you' conversations, proactive communication of test results within two weeks, strengthening primary care, improving integration and continuity of care, support for unpaid carers, Welsh language provision, and greater emphasis on prevention, fairness and reducing inequalities.

We will continue to use the people's priorities and principles and what we've heard from people and communities across Wales to frame our engagement with the new administration, helping to keep discussions focused on what will make the biggest difference to people's everyday experience of care and support.

## **Developing ourselves to deliver for people**

### **Improving our digital Workforce systems**

We are an early adopter for the new ESR (Electronic Staff Record) system and will be working with NHS Wales Shared Services and the national programme team.

Taking this role gives us the opportunity to shape the design and development of the future system, while also accessing additional support that will not be available to organisations joining later. The programme is currently in the foundational readiness phase, which will run through Spring and Summer 2026. The entire NHS project will be phased over approximately 4 years, as an early adopter, we will be moving earlier in this cycle, subject to readiness and national planning.

This work will position Llais to benefit from a more integrated workforce system over time, improving data quality, reducing duplication and enabling more efficient processes and better workforce planning. As part of this, we will receive dedicated support and are currently scoping the

detail, which is likely to include project management, specialist data and digital expertise, and additional practical resource to work alongside our teams to deliver key elements of the change.