Priorities for the Seventh Senedd Health and Social Care Committee

About Llais

Llais is the independent statutory body that reflects the views and represents the interests of people living in Wales in their National Health Service (NHS) and social care services.

We operate locally, regionally, and nationally. We work with people and communities in all parts of Wales so that everyone's voice can be heard, and used, to drive the planning, design, development and delivery of health and social care services for everyone.

We:

- reach out to hear from people within our local communities through an ongoing programme of engagement activities. We do this so that people know about and understand what we do, and to gather their views and experiences of NHS and social care services. We do this in lots of ways, face to face and digitally, including visiting places where people are receiving health and social care services;

- use what we hear to help health and social care services better understand how those of us who may need, and use services think services are meeting their needs, in the way that matters most to them. We help make sure the NHS and social care services takes action to make things better where this is needed.

  This includes working with health and social care services leaders when they are thinking about making changes to the way services are delivered, so that people and communities have their say from the start; and

- provide a free, independent, and confidential complaints advocacy service to help people raise their concerns about health and social services.

Our response

The Welsh Government's priorities broadly reflect many of the service-specific issues we hear most often from people across Wales, including waiting times, urgent and emergency care, mental health, social care, support for carers, prevention and reducing inequalities.

However, what people tell us suggests that some of the most significant challenges and barriers sit between these priorities: at the boundaries between services and organisations; in how people navigate the system; in whether people's experiences influence decisions; and in whether improvements reported by organisations translate into better experiences for people.

We therefore encourage the Committee not only to examine individual services and policy priorities, but to scrutinise what happens between them and whether improvement is visible in people's experiences, particularly for communities and groups already experiencing poorer access and outcomes.

How people experience boundaries, coordination and accountability

Many of the difficulties people report to us arise at the boundaries between services, organisations or systems. This includes health and social care, hospital and community services, children's and adult services, and regional, specialised, commissioned and cross-border care.

People tell us they can be uncertain who is responsible for their care, receive conflicting information or find themselves navigating service or organisational boundaries without clear support. Continuing Healthcare assessments, discharge arrangements and access to specialised services often illustrate these challenges.

Many of the concerns raised with us are also about the day-to-day experience of navigating care. They involve letters arriving late or not at all, referrals or assessments being delayed, appointments changing unexpectedly, poor communication between services, people repeatedly having to tell their story, or a lack of continuity in the care, support and relationships that matter to them.

These issues can seem administrative, but they can have a significant impact on people's confidence, wellbeing and ability to access care. They can also widen inequalities, particularly where people have less capacity, support or resource to navigate complex systems.

As services become more integrated, regionalised and specialised, the Committee could examine whether accountability has kept pace with changes in how care is organised: who takes responsibility when a person's pathway crosses several organisations, and who is accountable for the overall experience and outcome?

We also believe the Committee should explore whether the issues that matter most to people are sufficiently visible within the governance and accountability arrangements of health and social care organisations, and whether assurance arrangements locally, regionally and nationally give appropriate weight to complaints, advocacy and lived-experience intelligence alongside performance, safety, finance and operational information.

A useful test for scrutiny is not simply whether an organisation can demonstrate that an improvement action has been completed, but whether there is evidence that people can feel the difference.

Understanding people's experiences of social care

We welcome the Committee's focus on social care, unpaid carers and the National Care and Support Service.

A key question for the Committee is whether Wales understands people's experiences of social care with the same depth, visibility and scrutiny as healthcare.

People frequently tell us that understanding how to access social care support, what help may be available, how decisions are made and where to go for information, advice and assistance can be difficult.

Significant challenges often occur at some of the most vulnerable times in people's lives, particularly at the interface between health and social care around assessment, discharge and ongoing support.

We would encourage the Committee to focus not only on the availability of care and support, but on people's experiences of accessing and navigating social care, and whether national reporting, intelligence and scrutiny arrangements provide a sufficiently clear picture of those experiences.

As the National Care and Support Service develops, scrutiny should test whether reform produces improvements people can recognise and feel: easier access, clearer information, more consistent rights and entitlements, better coordination and greater responsiveness to what matters to them.

Using complaints, advocacy, service change and lived experience as intelligence

Through complaints advocacy, engagement, representations and regional intelligence, we often see similar issues emerging through different routes.

The introduction of Listening to People in April 2026 provides an opportunity to examine not only whether individual NHS concerns are resolved effectively, but how intelligence from complaints and advocacy is aggregated, shared and used to identify emerging risks, recurring issues and opportunities for wider improvement.

The issues around maternity and perinatal services illustrate the value of bringing lived experience, complaints, advocacy, inspection and performance information together.

The Committee should consider how recurring themes are identified and acted upon, and how organisations demonstrate that learning has changed both practice and people's experience.

Service changes

We are likely to see big changes in the way services are delivered during the Seventh Senedd. As services become increasingly regional, specialised and commissioned across organisational boundaries, the

Committee should examine whether people are involved early enough to influence decisions, how organisations demonstrate the impact of people's views, and whether proposed benefits are subsequently experienced by people and communities.

The Committee should also consider whether service change affects all communities equally, particularly those living in areas of multiple deprivation, rural communities, or places where travel, transport and geography create additional barriers.

Scrutiny should not end once a service-change decision has been made. Significant changes should be evaluated against the benefits originally presented to people and communities, including their impact on access, inequalities and people's experiences.

Keeping children and young people visible

Many of the Committee's proposed priorities have particular significance for children and young people, including waiting times, mental health support, prevention, healthy weight, vaping and wider public health challenges.

Recent evidence strengthens the case for children's health to be a distinct and sustained priority during the Seventh Senedd. Concerning trends across a range of indicators in Wales have been identified which reinforces the case for a comprehensive Children's Health Plan.

We would encourage the Committee to make sure that children and young people's experiences remain visible throughout its work, rather than being considered only through service-specific discussions.

Waiting times, mental health support, prevention, healthy weight, vaping and wider public health challenges all have particular significance for children and young people. Delays in assessment, treatment and support can have consequences for development, education, family life and future outcomes as well as immediate health.

Challenges around mental health, neurodevelopmental and other specialist support, provision in educational settings and transitions between children's and adult services also frequently cross organisational boundaries.

The Committee should examine how effectively health, social care and wider public services work together for children and young people whose needs span those boundaries, and whether their experiences and outcomes are sufficiently visible within the evidence used to assess services.

A People's Principles lens for the Seventh Senedd

Through our national conversation with thousands of people across Wales, we heard a remarkably consistent description of what matters most to people in health and social care:

- access that works for everyone;
- dignity and respect every time;
- clear and honest communication;
- joined-up care that feels seamless;
- timely care and support while waiting;
- care that recognises and responds to the whole person;
- care and support that enables independence; and
- inclusive, accessible and fair services that help reduce inequalities rather than reinforce them.

These People's Principles should provide a strong and consistent citizen-experience lens for the Committee's work during the Seventh Senedd.

Alongside scrutiny of policy, performance, finance, quality and delivery, they provide a simple but important test:

Are people experiencing health and social care in the way they have told us matters most to them?

This would help the Committee scrutinise not only whether systems and organisations report improvement, but whether that improvement is visible in people's lives.

There is good work happening across health and social care in Wales. People's experiences can make that work stronger by helping identify where improvement is being felt, where barriers remain and where systemic issues require further scrutiny.

Llais would welcome the opportunity to support the Committee throughout its work by sharing intelligence drawn from regional and all-Wales insight.

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