

THE PEOPLE'S PRIORITIES:

SENEDD ELECTION 2026



Eich llais mewn iechyd | Your voice in health
a gofal cymdeithasol | and social care



Accessible formats

This document is also available in Welsh.

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You can download it from our website or ask for a copy by contacting our office.

Our manifesto sets out

4 priorities and

12 practical calls

for change, rooted in
what people have told
us.

Professor Medwin
Hughes, Chair of Llais:

*"It's an opportunity
for the incoming Welsh
Government to do what
people and communities
across Wales want it to do
– LISTEN and ACT – quickly
and decisively so our health
and social care services
deliver for people in the
areas that matter most to
them, because they make
the biggest difference to
their lives."*

Equity and access

Target investment in
communities with the
poorest health outcomes.

Better transport
solutions.

Extend Llais complaints
advocacy to all children
and young people in
social care.

Person-centred care

Make 'What matters
to you' conversations
standard in every NHS
care and treatment plan.

End 'no news is
good news': actively
communicate test results
within two weeks.

Strengthen Welsh
language provision in
health and social care.

Prevention and early intervention

Increase primary care
capacity.

Create a statutory right
to respite care for Wales'
310,000 unpaid carers.

Protect and expand
community prevention
services.

Integration and service co-ordination

Remove barriers to
integration.

Create a single, person-
centred complaints
process for health and
social care.

Fix the cliff edge for
young people moving
between child and adult
services.





About this *manifesto*

Llais exists to champion the voices of people who use health and social care services.

That is why across Wales, in villages, towns, and cities, we have listened to tens of thousands of people. In community halls, high streets, schools, local GPs, care homes, and online, people have shared their experiences, frustrations, and hopes for health and social care.

This manifesto is built on those voices: the people's priorities, what matters most, what would make the biggest difference to their lives, and what needs to change.

People know that budgets are challenging, and they recognise the dedication of staff working on the front line in difficult circumstances. NHS and social care services need sustained investment in staff and resources, and others will rightly make that case.

This manifesto complements that essential work by focusing on what people actually experience when they use services, and the practical changes that would make health and care work better for them.

The call for *change*

The message is clear: people across Wales have told us they need more than promises, policies, and plans; they need action they can see and feel in their everyday lives.

Communities want health and social care services to follow through on what they say they will do, and they want meaningful accountability when things go wrong.

Why? Because people believe that when services are held to account, real progress happens. It's not about blame; it's about making sure commitments lead to change that lasts.

People want health and social care services that are there when they need them, treat them with dignity, listen to what matters, and work together to keep people well.

And in some places, that's what happens. People have shared stories of staff going above and beyond, and of care that feels personal and kind.

But too often, that isn't the reality everywhere.





People across Wales are tired of waiting weeks for a GP appointment or months, even years, for surgery. Parents worry about the quality and safety of maternity and neonatal care, or face long delays for diagnoses and support for conditions like ADHD or autism.

Some carers feel overwhelmed and unsupported, often reaching breaking point before help arrives.

Mental health support is patchy and slow, with long waits for assessment and treatment, and families say it's especially hard to get help for children and young people.

Emergency departments are described as "war zones", with hours or even days spent waiting in corridors.

Many struggle to find an NHS dentist, or feel they have to be in crisis before anyone will help.

Too often, people feel they aren't listened to, that decisions are made without them, and that there simply aren't enough staff to provide safe, compassionate care.

Delays in hospital discharge are a growing concern, people who are medically fit to leave wait too long for the right care package, or are discharged inappropriately, sometimes late at night or without proper support.

Families are often confused about where to go for help arranging care, and many unpaid carers miss out on assessments and support.

Communities notice when things work well elsewhere and wonder why their own services haven't tried it.

The move towards more specialist services further away in regional centres can leave people feeling left behind, facing long journeys, poor communication, and uncertainty about how they'll be kept safe if life-saving care is far from home.

These are not isolated stories; they are patterns we hear in every region, across all communities and languages.

People value compassionate staff, continuity of care, and community-based support. But they are frustrated by long waits, poor communication, unstable care packages, and services that don't talk to each other.



Equity and access

People want fair access to health and care, no matter where they live, their background, or their circumstances.

Across Wales, people tell us they struggle to get appointments, lack reliable transport, and feel that services don't always meet their needs. In some communities, these problems hit much harder.

Health and social care shouldn't depend on your postcode, yet those living in the poorest areas spend around 20 years fewer in good health than those in the most affluent. Yet GP practices serving the most deprived communities typically have fewer GPs and nurses per patient.

In rural and remote areas, people can be miles from the nearest service, and without reliable transport, getting to an appointment becomes a choice between health and the cost of getting there.

People notice when things work well elsewhere and wonder, "Why can't we have that here?"

These inequalities aren't inevitable; they're a result of decisions, and Wales can choose differently.



"Being able to schedule an appointment, access to transport (not having to rely on taxis), convalescence near home [would make a difference]."

"Equity of access and the right to be treated with dignity and respect."

Our calls

Target investment in communities with the poorest health outcomes.

Move resources to support communities with the poorest health outcomes, so everyone has a fair chance at a long and healthy life. Base decisions on what communities actually need, not just what's been done before and hold services accountable for these choices.

Better transport solutions.

Improve parking options, bus routes, community car schemes, non-emergency patient transport, and support with travel costs, so no one misses out on care because they can't get there. Require local authorities and health boards to work together, with joint plans and annual reporting on progress, to ensure transport enables access to health and social services, not blocks it.

Extend Llais complaints advocacy to all children and young people in social care.

Change regulations so every child and young person in social care can access Llais support when raising concerns. Llais should be able to support everyone with their complaints, especially the most vulnerable in our society.

Prevention and early intervention

We need to invest in the things that keep people well and out of hospital. Right now, across Wales, people say

Support often comes too late.

Carers among us are stretched to breaking point before help arrives.

Community services that keep people well and connected have disappeared in many areas.

Early help for mental health or long-term conditions is hard to find

Families are left waiting for urgent care, respite, or practical support.

We're waiting until people are in crisis instead of getting help to stay well. This has to change.



"We needed help at an earlier stage, not now when everything is going wrong."

"Sometimes I need urgent care for my husband to go into respite. It can take weeks to organise and I don't have weeks when an elderly relative dies and I need to help the rest of my family."

Our calls

 **Increase primary care capacity.**
Expand staff numbers in the right places. Improve appointment systems. Make it easier to get help before problems become crises.

 **Create a statutory right to respite care for Wales' 310,000 unpaid carers.**
Guarantee breaks and emergency support for unpaid carers when regular arrangements fail, back this right with funding, clear eligibility rules, and annual reporting on uptake. Introduce legislation to enshrine this right in law, ensuring unpaid carers have guaranteed support this is protected regardless of future policy changes.

 **Protect and expand community prevention services.**
Secure funding for day centres, befriending, and social prescribing, as well as other community services that keep people well, connected, and prevent them from ending up in hospital. Support local decision-making and partnership working, so our communities can design and deliver the services that work best for them.

Person-centred care

Why this matters:

People want to be treated as individuals, listened to, and involved in decisions about their care. Too often, people feel like just a number, chasing for updates, or not listened to about what matters to them.

Welsh speakers can't always access services in their first language. This isn't good enough.

Everyone deserves dignity, honesty, kindness, and clear communication, whatever their age, background, or language.

"[I just want] dignity, honesty, kindness, being called by my name."

"I want to be listened to and not judged, and to have a clear complaints procedure."



Our calls

 **Make 'What matters to you' conversations standard in every NHS care and treatment plan.**

Introduce a legal duty for every care plan to start with a 'What matters to you' conversation, and link this to patient-reported outcomes. Amend the statutory guidance to require compliance and publish results.

 **End 'no news is good news': actively communicate test results within two weeks.**

Make sure every person receives their results proactively, without having to chase. Track and report turnaround times for test results.

 **Strengthen Welsh language provision in health and social care.**

Guarantee access to services in Welsh, with clear targets and public reporting on progress. Ensure Welsh speakers can use health and social care services in their first language at every stage of their care.

Integration and service co-ordination

People want services that work together. People are exhausted from repeating their story to service after service because different parts of the system don't talk to each other.

Too often, GPs and hospitals fail to share vital information, especially if people receive treatment from other parts of Wales or in England. This leaves people chasing updates and feeling lost in a maze of disconnected services.

When things go wrong, people don't know which system to complain to.

Young people face a cliff edge at 18 when moving between child and adult services, with support disappearing overnight.

People want a system where every part works together—where information flows, transitions are safe, and no one falls through the cracks.

The government must make services accountable for integration, so people experience joined-up care, not fragmentation.



"Can't they liaise more with GPs so you don't have to keep repeating things."

"My son is turning 18 this month. Respite had been provided twice a month but now he's going into adult services it's a shambles. There's no respite provision for months and months."

Our calls

Remove barriers to integration.
Invest in shared digital systems and fix data governance so information can be shared safely and appropriately for direct care. Streamline processes and cut unnecessary bureaucracy to ensure services work efficiently and deliver value for money. Require health boards and local authorities to work together, with clear timelines and national monitoring.

Create a single, person-centred complaints process for health and social care.

Make it simple for people to raise concerns when care crosses services. Reduce duplication and administrative burden by introducing a unified complaints system that is easy to navigate and delivers timely outcomes for people.

Fix the cliff edge for young people moving between child and adult services.

Guarantee continuity of care during transitions, with clear standards and accountability for delivery. No young person should lose support or face excessive waits when turning 18, such as moving between child and adult mental health services, neurodevelopmental services, social care, or ongoing treatments.

Contact us

If you would like to give us feedback on this publication or wish to receive this information in an alternative format or language, please contact us on the details below.

We welcome telephone calls in Welsh. If you write to us in Welsh, we will answer in Welsh.

This will not lead to a delay in responding to your correspondence.

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