## Question 1: Initial priorities identified by the Committee

The Committee has identified several potential priorities for work during the Sixth Senedd, including: public health and prevention; the health and social care workforce, including organisational culture and staff wellbeing; access to mental health services; evidence-based innovation in health and social care; support and services for unpaid carers; access to COVID and non-COVID rehabilitation services; and access to services for long-term chronic conditions, including musculoskeletal conditions.

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| Q1. Which of the issues listed above do you think should be a priority, and why? |
| You can comment on as many or few of the issues as you want.In your answers, you might want to think about:* What impact or outcomes could be achieved through any work by the Committee?
* How the Committee might address the issue?
* When any Committee work should take place?
* Whether there are any specific groups, communities or stakeholders that the Committee should involve or hear from in any work?
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| We welcome the initial priorities highlighted by the Committee which align closely with those of the Royal College of Speech and Language Therapists in Wales (RCSLT Wales) and more broadly with those of Allied Health Professionals (AHPs) in Wales. We are particularly pleased to see rehabilitation listed amongst the potential priority areas. We have provided feedback on particular themes but as a broader point suggest that health inequalities including disparity in access, diagnostics, treatments, experiences and funding be woven as a strand throughout inquiries, aligning with ‘A Heathier Wales’ and the Race Equality Action Plan for Wales. Public health and preventionThere has long been talk of a health and social care system that has an integrated, whole system approach, a ‘wellness’ system, which aims to support and anticipate health needs, to prevent illness, and to reduce the impact of poor health.[[1]](#footnote-1) In light of this, it would be extremely helpful for the Committee to consider further the balance of funding between primary and secondary care services and progress on the shift of services closer to home and right care, right place, right person provision of services.AHPs such as speech and language therapists have an important role to play in contributing to better population health and the prevention agenda and thus, we believe would have a great deal to contribute to such an inquiry.Access to mental health servicesWe believe that such a priority should include a key focus on the current and future workforce given the growing demand and workforce challenges. We are aware that this is an issue across age-groups and have also raised this priority area in our response to the Children, Young People and Education Committee. It would be extremely helpful for the Committee to scrutinise the development of the upcoming Mental Health Workforce Plan. We view the plan as a real opportunity to remodel current provision and create sustainable services which ensure that all people in Wales are able to access appropriate mental health support. We believe that multidisciplinary working – with a well-trained, supported workforce that is equipped to meet the demands – should be central to the future provision of mental health services for all ages. This approach would enable each group of professionals to use their unique skills, knowledge, and abilities to better meet the needs of individuals. In our view, development and improvement of the mental health workforce must include the full range of Allied Health Professionals and bring in new professions and skillsets. Additional scrutiny would be very timely in determining to what extent the plan will drive change and include a wide range of professions considered given recruitment challenges in the traditional workforce? We would hope such an inquiry would engage widely across service user and professional groups and include professions such as speech and language therapy which are not currently routinely part of core mental health teams but evidence suggests have a great deal to offer.Access to COVID and non-COVID rehabilitation servicesWe have long called for an inquiry into rehabilitation services and very much welcome the inclusion of this topic within the list of potential inquiries for the Committee. We would wish to see this inquiry earlier rather than later in the Senedd term. We believe the terms of reference should explore:* The current demand for rehabilitation services and how this differs across Wales.
* Impact of COVID on rehab services and provision for long COVID.
* Best practice and how this is disseminated.
* The balance of digital and face to face approaches.
* Current funding for rehabilitation services.
* Current Welsh Government policy around rehabilitation.

We believe AHP professional bodies should have a key role to play in working collaboratively with the Committee on this inquiry alongside service user organisations such as the Stroke Association, Parkinson’s Association, MNDA etc. We would be keen to explore how we could support such an inquiry via our AHP Policy Officers group and how service user voices and experiences can be effectively captured. The Health and Social Care WorkforceWe welcome the decision of the committee to undertake an early inquiry into the Health Education Improvement Wales Social Care Wales workforce strategy and will be submitting evidence. As a broader point, the pandemic has brought unprecedented challenges to our health and social care workforce. We would welcome an inquiry into the impact of the pandemic on the wellbeing of health and social care professionals at all levels.Professional bodies would have a great deal to contribute to such an inquiry. We have collated feedback on the impact on the speech and language therapy profession throughout the pandemic and would wish that any such inquiry would take views from across the workforce and include the views of AHPs – the third largest workforce in the NHS. * Digital

As part of any inquiries considering the health and social care workforce the Committee should consider how well the current health and social care workforce is equipped to make use of innovations in digital systems in the delivery of care. Digital systems are playing an increasingly large role in the delivery of services and digital skills are an essential part of the day-to-day provision of care. NHS staff need to be supported to deliver care using digital skills and to manage workloads and caseloads more effectively. Access to the right information will enable staff to make better decisions and provide faster care. Technology also enables the sharing of care plans between staff in different settings so individuals in need of care experience a joined-up service. |

## Question 2: Key priorities for the Sixth Senedd

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| Q2. In your view, what other key priorities should the Committee consider during the Sixth Senedd in relation to:1. health services;
2. social care and carers;
3. COVID recovery?
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| You can comment on as many or few of the issues as you want.In your answers, you might want to think about:* What impact or outcomes could be achieved through any work by the Committee?
* How the Committee might address the issue?
* When any Committee work should take place?
* Whether there are any specific groups, communities or stakeholders that the Committee should involve or hear from in any work?
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| a) Health services |
| Neurodevelopmental ServicesWe are calling for a short inquiry into the current Welsh Government funded demand and capacity review of all-age neurodevelopmental services and have also raised this call in our response to the Childre, Young People and Education Committee.We are very aware that neurodevelopmental services are under very significant pressure and waiting lists have been increased by the pandemic. Members working in these services have fed back to us concerns about sustainability of services and ability to meet increasing need. This featured strongly within scrutiny of the proposed Autism bill during the last Senedd term. A recent Welsh Government funded Scoping [Study](https://gov.wales/sites/default/files/statistics-and-research/2019-09/scoping-study-alignment-development-autism-neurodevelopmental-services.pdf) for the Alignment and Development of Autism and Neurodevelopmental Services also highlighted significant workforce sustainability concerns.We would welcome scrutiny of the Welsh Government funded demand and capacity review of all-age neurodevelopmental services currently taking place to support the development of long-term solutions. We believe it to be imperative that such an inquiry include feedback from neurodiverse people, representative service user organisations and professional bodies representing the range of health care professionals working in ND teams. We work closely with other professional bodies working in this area and would be very keen to discuss and support further. Gender Services As part of a multidisciplinary team (MDT), speech and language therapists have a key role to play in ensuring the best possible outcomes for trans and gender-diverse people. Speech and language therapists, with appropriate skills, may support voice modification and facilitate gender expression through vocal and communication change and exploration (RCSLT,2019). [[2]](#footnote-2)When the Welsh Government established the Welsh Gender Team (WGT) in April 2019, with the intention to better meet the needs of those requiring gender services within Wales, it was expected that the demand for speech and language therapy (SLT) would be met from within existing core services. However there has been a significant increase in referral numbers to SLT services and a number of services have highlighted that they are currently not in a position to meet the demand for this service. One local Health Board is far from unique in highlighting that in 2020/21 they saw a 3-fold increase in referrals. It is expected that the trajectory for 2021/22 will see a further increase against the baseline. A number of local Health Boards have highlighted that it may no longer be possible to be able to continue to provide a safe and effective SLT service to this patient population. We believe it may be timely for the committee to review the performance of the WGT and capacity to meet growing demand.  |
| b) Social care and carers |
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| c) COVID recovery |
| Current demand on the system We would recommend the Committee consider the current demand on health and care services and how it could be addressed. COVID recovery needs to be planned, resourced and delivered over the medium term balancing the immediate needs of providing access to diagnostic and treatments with supporting a change in delivering more sustainable services. One local Health Board has highlighted concerns, which are echoed across Wales of demand on AHP services over the upcoming winter period and indeed in the future. We believe that sustainable workforce models are required in order to help with Covid recovery and to maintain services in acute and community care and to enable innovative and long-term changes in service provision for example Discharge to Recover then Access (DR2A) pathway, of which AHPs are key to successful delivery. The current demand is driven by number of complex and interwoven factors and an investigation into the backlog could highlight other issues such as the level of unmet need, workforce shortages and NHS infrastructure. The Committee could aim to set out the extent of these issues and the gap between where we are now and where we need to be. |

## Question 3: Any other issues

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| Q3. Are there any other issues you wish to draw to the Committee’s attention? |
| Health inequalities Covid-19 has revealed and exacerbated existing health (and other) inequalities and we believe that real progress will require coherent, strategic efforts, thus we have suggested that the consideration of health inequalities be woven as a strand throughout all Committee inquiries. Moreover, alongside our colleagues in other professional bodies and charities, we are calling for an inquiry across all Senedd Committees on tackling health inequalities in Wales. Meaningful progress will require efforts across all sectors to close the gap and an inquiry undertaken by all Senedd Committees will enable Committees to consider what action each Welsh Government department is doing to tackle the root cause of health inequalities and give recommendations for improvements. |

## Submitting evidence

### Guidance on providing written evidence

If you have any questions about this consultation or providing written evidence, please contact us at SeneddHealth@senedd.wales or on 0300 200 6565. You may also wish to read the advice on [“Getting involved with committees”](https://senedd.wales/senedd-business/committees/getting-involved-with-committees/), which explains how to prepare and submit evidence to Senedd committees.

### Official languages

The Senedd has two official languages, Welsh and English. In line with the [Senedd’s Official Languages Scheme](https://senedd.wales/Laid%20Documents/GEN-LD11101/GEN-LD11101-e.pdf), we request that you submit your response in both languages if you are able to do so. If your response is not submitted bilingually, we will publish in the language submitted, stating that it has been received in that language only. We expect other organisations to implement their own standards or schemes and to comply with their statutory obligation.

### How we will use your information

General information regarding consultations, which you should consider carefully before submitting a response to the Committee, is available in our [privacy notice](https://senedd.wales/en/help/privacy/Pages/help-inquiry-privacy.aspx).

### How to submit your response

We prefer to receive evidence digitally (for both practical and sustainability purposes). Please send an electronic copy of your form to SeneddHealth@senedd.wales.

If you cannot provide evidence digitally, you can send a copy to:

Health and Social Care Committee
Welsh Parliament
Cardiff
CF99 1SN

Responses should be submitted no later than **16.00 on** **17 September**

1. A Healthier Wales, A Plan for Health and Social Care, page 4 [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)