

SECTION 1. WHAT ACTION IS THE WELSH GOVERNMENT CONSIDERING AND WHY?

Introduction and rationale for integrated medium term planning

The production of the *NHS Wales Planning Framework for Integrated Medium Term Plans (IMTPs) 2022-2025* is a mechanism to set out requirements to NHS Wales to support the development of their plans.

The requirement to prepare an integrated Medium Term Plan (IMTP) stems from section 175 of the 2006 Act, as amended by the NHS Finance (Wales) Act 2014. Section 175(1) of the 2006 Act requires health boards to ensure their expenditure of funds given to them “breaks even” over a three-year accounting period, subject to a degree of leniency determined by Welsh Ministers.

The Welsh Ministers are required by section 175(2) to give directions to health boards requiring them prepare a plan setting out how they will comply with the duty in section 175(1). While section 175 only applies to health boards, using powers to direct NHS trusts set out in section 19(1) of the 2006 Act, the Welsh Ministers have effectively imposed the same reporting obligations on NHS trusts.

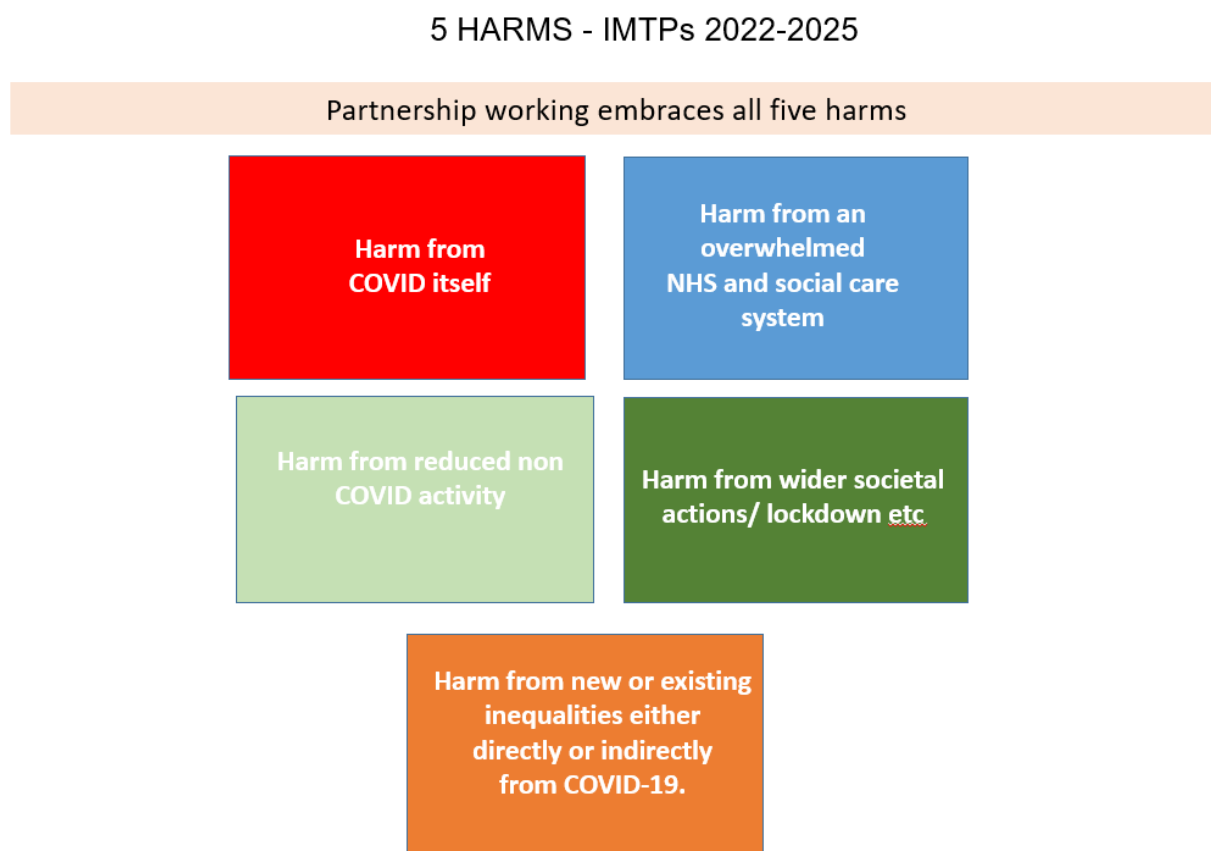
These IMTP frameworks, published annually, provide a three-year look ahead. Each framework sets out the latest priorities and requirements for the NHS in Wales. The framework provides the context and environment landscape upon which the NHS plans should be developed.

In March 2020, the IMTP process was formally paused due to the impact of the COVID-19 pandemic. The IMTP framework was replaced with a requirement for quarterly operational plans in 2020-2021 and an annual plan in 2021-2022. These interim arrangements of both quarterly and annual plans reflected the difficulty that organisations had to produce, and achieve board approval, for a balanced three-year plan.

However, as the three-year duty to break-even must be met by March 2022, the Minister has signalled the importance of reinstating the planning cycle and has agreed to issue a *NHS Wales Planning Framework for IMTP 2022-2025*.

The Technical Advisory Cell has recently updated its guidance on the harms related to COVID-19. There are now ‘five recognised harms’ (previously 4). The diagram below shows the COVID-19 related-harm can occur in five key ways. The Framework has drawn on the five harms and directs health boards, NHS trusts and other national organisations to address and mitigate these in the development of their plans.

Figure 1: The five harms



In developing the NHS Wales IMTP Planning Framework 2022-2025 (the “Framework”) the Welsh Government has had regard to the *Wellbeing of Future Generations (Wales) Act 2015*, and in particular the five ways of working set out below:

Long term

The Framework covers a three year period 2022 – 2025. It is important that in developing it there is regard to the longer term. It means that key topics and requirements for inclusion in the IMTPs are ones that will continue to impact for many years to come, such as the introduction of innovative and digital solutions, financial investment and strengthened partnership, governance and planning arrangements.

Long term trends that have influenced the development of this Framework include:

- **Climate change and decarbonisation** are important factors that the new Programme for Government have embraced. The new Minister for Climate Change and the dedicated portfolio mean the focus on what needs to be done to deliver the commitment for a carbon neutral public sector by 2030, together

with a carbon neutral Wales by 2050, are both met. This Framework makes clear that decisions that are taken across the NHS in Wales must consider the impact they will have on climate change and decarbonisation as well as for patients and their health and wellbeing. In February 2021 *the NHS Wales Decarbonisation Strategic Delivery Plan* was published. It sets out goals and actions that NHS organisations need to achieve in order to make its contribution to this crucial goal.

[NHS Wales Decarbonisation Strategic Delivery Plan](#)

- Alongside the effects on patients the **health and wellbeing of staff** is also an important factor to consider. The NHS in Wales is nothing without its dedicated staff and throughout the last 18 months staff have given their all, going above and beyond. For some they have paid the ultimate price, for others they have worked long hours and been apart from family in their bid to keep patients safe. As we move forward to learn to live with COVID, and its variants, we need to ensure the health and wellbeing of staff is paramount.
- The **mental health and wellbeing of people** across Wales is an important long term goal. The Welsh Government has already demonstrated that it is committed to addressing the issue of mental health across society with a protected minimum spend of £783m for 2021-22. There is recognition that all ages have been affected by the social isolation and other restrictions that have been placed on society but children and young people have struggled particularly with this issue during the pandemic. [Additional investment for children and young people's mental health services](#)
- 2021 has seen an investment of over £9m was made available to support **children and young people's mental health**. The new Programme for Government places the need to support prioritise investment in this area and to promote a 'no wrong door approach' to reduce stigma.
- The **socio-economic duty** came into force in **Wales** on 31 March 2021. Its aim is to improve decision making and helps those who are **socio-economically disadvantaged**. It puts tackling inequality at the heart of decision-making, and will build on the good work public bodies are already doing. It is key to underpinning the focus and direction for NHS Wales when they develop their plans.
- **Technology** supported the way in which we were able to work remotely throughout the pandemic. It meant that many people without front facing jobs were able to work from home and new ways of working were able to be developed to support staff and patients. More virtual appointments between patients and clinicians were supported both in primary care with GPs and in secondary care consultants. The development of Consultant Connect software rollout also meant that clinicians were able to seek and obtain advice from each other to speed up diagnosis and treatment options. More can be achieved by introducing new technologies and new ways of working.

Prevention

It is important that in developing the Framework that there is regard to the prevention. It means that key topics and requirements set out in the framework call for actions in relation to prevention of both speciality conditions, as well as COVID-19.

- ◆ **Rates of infection by COVID-19 and the subsequent variants.** Modelling of the Reasonable Worst Case scenarios has been undertaken regularly since March 2020 and influenced the advice and actions of the Welsh Government in dealing with the pandemic. The advice and expertise of the UK Government Scientific Advisory Group on Emergencies (SAGE) and the Technical Advisory Cell (TAC) in Wales, together with the infection rates per 100,000 population, which are reviewed over a seven day period, all influence the position that the government are taking to address COVID and its effects.
- ◆ COVID-19 triggered a global pandemic, with impacts experienced by every country world-wide - both for those suffering from the virus and those that had existing conditions, for which there have been delays and knock-on effects. Dealing with COVID-19 and its variants will be a necessity for our NHS for the foreseeable future. **Long COVID-19** is an overarching term given to the inherent conditions that those who caught the virus continue to suffer. Recognition for these debilitating effects is growing. In June 2021 the Minister for Health and Social Services announced £5m 'Adferiad' programme to support those with what is now termed 'Long COVID'.
[NHS Wales Confederation welcomes additional spend](#)
- ◆ The framework brings together both the need to prevent harm through direct intervention such as **screening**. Screening for cancer and other conditions needs to resume to full strength in order to ensure that diagnosis is made early and patients can receive early treatment and support.
- ◆ The **vaccination and immunisation programme for children**, whilst recognised as essential, still suffered delays as a result of COVID-19. Social distancing and other Infection control measures meant less children could be seen. The Framework makes clear that the vaccination and immunisation programme needs to resume to full strength in order to protect this cohort of children from serious childhood diseases.
- ◆ The **vaccination programme for COVID-19** has been highly successful in Wales. By June 2021 over 2m people had received their first dose of a COVID-19 vaccine and over 1.5m had received both doses. This has been a quicker roll out and uptake than other parts of the UK. The framework recognises the need to maintain vigilance with the vaccination programme into 2022, with the likelihood of a booster programme in autumn 2021 and for further vaccines as necessary for future variants. [COVID-19 Vaccination Programme Update 21 September 2021](#)
- ◆ The **Test, Track and Protect** strategy was revised, updated and published in June 2021. The existing contact tracing offer was designed to respond to the early emerging challenges of the pandemic, we now need to consider and implement a longer-term, fit-for-purpose delivery model that will flex

and evolve as we move forward into a post-pandemic world. [Test, Trace and Protect](#)

- ♦ **Healthy lifestyles** are referenced in the framework recognising that support to tackle smoking, obesity and addiction are significant in preventing individuals from damaging their health both in the short, medium and longer term. The need to ensure that support is available to all patients is important to address the inequalities in health that affect many parts of Wales.
- ♦ **Inequalities in health** is a key priority for the Welsh Government. While these were areas where inequalities were evident pre-COVID these have been exacerbated by the pandemic. In Wales, the age-standardised mortality rate due to COVID, for the 14 months March 2020 to April 2021 in the most deprived areas, was almost twice the mortality rate in the least deprived areas. Whilst a similar pattern is seen for deaths from all causes, the difference for deaths due to COVID is greater. [Deaths due to COVID-19 by local area and deprivation - Office for National Statistics \(ons.gov.uk\)](#).
- ♦ COVID-19 exacerbated the issues and it is known that those from Black, Asian and Minority Ethnic groups were most affected by the virus in terms of serious illness and death. For this reason the Framework references the new **COVID-19 Vaccination Equity Strategy for Wales**, which seeks to ensure that all people in Wales should have fair access to COVID-19 vaccination with a fair opportunity to receive their vaccination so that individuals, families and their communities are protected from the harms of the virus. [Covid-19 vaccination strategy and updates](#)

Organisations need to be mindful to ensure these topics are considered in the development of their IMTPs, and to increase the prominence of these in the minds of those delivering services. [Public Health Wales: Emerging Drivers of Vulnerability to health inequity in the context of COVID-19](#)

Integration

It is important to have regard to the integration. There is a need to build an integrated seamless service that is recognised by A Healthier Wales which was refreshed in March 2021. [Written Statement -A Healthier Wales Action Review](#)

Integration can be in several forms. It can be in relation to health and social care, primary and secondary care and through a wider range of topics that impact on people's health.

- ♦ The health of the population of Wales is not just influenced by health interventions but equally by the **wider determinants of health** e.g. housing, transport, environment, education etc. Health organisations will need to work with their partners and stakeholders to ensure that decisions that are taken across these areas also generate multiple benefits; for example, that transport links ensure people are not isolated and can reach work, learning and leisure opportunities, that housing is of good quality and that environments enhance people's wellbeing. In developing this Framework, policy colleagues across the Welsh Government portfolios were asked for views and contributions.

- ◆ Acknowledgment of ‘**anchor institutions**’ has recently come to the fore. The Health Foundation’s ‘Anchors in a Storm’ article demonstrates the importance of anchor institutions in supporting and nurturing the communities within which they sit. The top two lessons include purposely tackling inequalities in health and co-producing with communities, both of which lay at the heart of our principles and should be reflected in the next IMTP cycle. [The Health Foundation - Anchors in a Storm](#)
- ◆ The **impact of employment** on the health of individuals is crucial. The impact of COVID-19 related employment changes, insights for interventions to influence health and health equity are key areas, when tackled can reduce inequalities in health. [Good, fair work - Public Health Wales \(nhs.wales\)](#)

Organisations are directed to ensure these are featured in their IMTPs, increases the prominence of these in the minds of those delivering services.

Collaboration

It means that key topics and requirements call for joint work and discussions with partner organisations, stakeholders, as well as the public, to ensure that decisions are relevant and make a positive difference to people’s lives

With the expectation is that COVID-19 will still be circulating in our communities for some time to come and its variants, all partners and stakeholders will need to work together to ensure the spread and impact of COVID-19 is reduced as much as possible.

- ◆ It is important that health organisations producing their IMTPs work jointly with other organisations, particularly within the public, third and independent sectors. This will often be through **formal mechanisms** such as Public Service Boards, Regional Partnership Boards, NHS Boards, and local authority arrangements etc. to ensure alignment between all the different plans.
- ◆ The IMTP framework has been developed and discussed at regular intervals with **key stakeholders** such as Welsh Government policy colleagues, Chief Executives of NHS Wales, Directors of Finance, and Directors of Planning and through networks with social care colleagues and those across wider government departments where topics converge such as economy, environment, education etc.
- ◆ The **Minister for Health and Social Services**, the Deputy Minister for Mental Health & Wellbeing and Deputy Minister for Social Services have all been involved in developing the Framework and the directions and priorities that it sets.

Organisations are directed to ensure these are featured in their IMTPs, increases the prominence of these in the minds of those delivering services.

Involvement

NHS Wales organisations, local authorities, third and independent sector are aware of the IMTP planning cycle process. While some involvement has been able to be undertaken with some groups and professionals, in the development of this framework, the expectation is that organisations will be able to involve colleagues further in the development of their plans.

It is important that organisations understand ‘What matters’ to the people affected by the topics highlighted in the Framework and how might they be involved in delivering services which mitigate the effects.

Impact

The Framework fulfils the duty for Welsh Ministers to issue ‘Directions’ to the NHS in Wales under the NHS Wales Act 2006 and the amended duties set in the NHS Finance (Wales) Act 2014. The Framework provides the context within which health boards and other NHS organisations are expecting to address the challenges they face during 2022-2025.

The Framework, and the IMTPs (plans) that emanate from it, are statutory requirements. The Framework will provide reassurance and direction around what is needed next to keep services joined up and support patients and staff over the next three years.

The Framework will be published by the Minister for Health and Social Services and will provide clear messages to the public, Members of the Senedd and stakeholders on what key strategic and operational factors. It will act as the foundation for the IMTPs going forward.

For Chief Executives and other professionals across NHS Wales the Framework is a significant document. Published annually each autumn it guides the development of the organisations’ IMTPs. While not totally prescriptive it does provide a mechanism for the Minister to convey the government’s requirements and priorities for the period ahead.

Costs and Savings

No financial cost will be incurred in scoping and developing the Framework by the Health and Social Services Group within the Welsh Government.

There has already been considerable investment in the health and social care infrastructure during 2020-21 as a result of the COVID-19 pandemic:

- Over £1.3bn was allocated to support the NHS response to COVID-19. This includes the £800m stabilisation funding for NHS Wales announced in August 2020.
- £45m for Test, Trace and Protect Strategy implementation
- £62.7m through the Local Authority Hardship fund, to support providers of adult social care.
- £40m to support the social care workforce

In September further investment was made to the recovery programme, needed to address the backlog in diagnosis and planned care, to date:

- £248m has been invested to support the recovery for NHS Wales including Long COVID and children's mental health

Organisations will be using these discreet amounts of funding as well as their usual allocations in developing their plans and the implementation of them.

Mechanism

Legislation is not proposed in the development of this Framework and as such a regulatory impact assessment is not required.

- ◆ The Framework will be published by the Minister for Health and Social Services in autumn 2021 to provide directions to NHS Wales on the way in which it must plan for the next years.

The Framework reinforces the statutory responsibility that health boards and NHS Trusts have to produce three year balanced plans.

SECTION 8. CONCLUSION

8.1 How have people most likely to be affected by the proposal been involved in developing it?

This planning framework has been produced to provide the 'directions' to the service, in readiness for NHS organisations to have an IMTP for the next three years 2022-2025.

This framework signals a return to the usual planning cycle and the sets out the requirements for NHS organisations to balance, the continued response to COVID-19 and the recovery from its impact.

The framework is a Welsh Government publication, written to set out the priorities and requirements of the NHS in Wales. This approach was agreed by the Minister in July 2021. Stakeholders have been kept informed of the return to, and production of, the IMTP framework 2022-2025.

The framework will be developed through discussion with colleagues across the health and social services department within Welsh Government, professional leads and senior colleagues from within the service such as NHS Chief Executives, Directors of Planning, and Directors of Finance etc.

The expectation is on NHS organisations to collaborate and involve their own stakeholders in the response to the framework, this includes children and their representatives; people with protected characteristics under the Equality Act 2010;

Welsh speakers and Welsh language specialist groups; and, other people who may be affected by the proposal.

8.2 What are the most significant impacts, positive and negative?

The framework should have a positive impact on people across Wales. The framework is the Minister's 'Directions' to the NHS as required by law under the NHS Wales Act 2006 amended by the NHS Finance (Wales) Act 2014.

It sets out what is required of health boards, and other NHS organisations, need to take into account when they develop their IMTPs for 2022-2025. Organisations will not be starting afresh but will be building on the developments they have already made in their IMTPs 2019-2022, before the COVID-19 pandemic, as well as in response to the Winter Protection Plan and the Quarterly Operational Plans in 2020-21 and the Annual plans developed for 2021-22. The return to developing an IMTP signals the next step on the journey to recovery.

Health boards need to plan to meet the health needs of their respective populations and must do so regardless of age, race, religion, etc. The framework makes clear the need for organisations to ensure that people have equal access to diagnosis and treatment across the five harms (see section 1).

There is recognition that some groups of people have been adversely affected by COVID-19. Inequalities in health have been seen and evidenced prior to the COVID-19 pandemic but were exacerbated by it. The framework should make a positive impact for these groups in that it raises inequalities in health and equity of service to health boards and NHS organisations, setting out an expectation that their IMTPs focus on these areas.

Ministerial priorities feature as the main foundations of the framework and direct the NHS in Wales to address these areas as a matter of urgency:

- **MAINTAIN OUR RESPONSE TO COVID-19**
- **NHS RECOVERY**
- **WORKING ALONGSIDE SOCIAL CARE**
- **A HEALTHIER WALES – STRATEGY FOR HEALTH AND SOCIAL CARE**
- **FINANCIAL DISCIPLINE FOR NHS WALES**
- **MENTAL HEALTH – CLINICAL AND BROADER SOCIETY**
- **SUPPORTING THE HEALTH AND CARE WORKFORCE**
- **POPULATION HEALTH AND HEALTH EQUITY**

Alongside these areas, climate change and decarbonisation and the socio-economic duty feature as important criteria.

8.3 In light of the impacts identified, how will the proposal

- Maximise contribution to our well-being objectives and the seven well-being goals and/or;

- Avoid, reduce or mitigate any negative impacts

The wellbeing of future generation's commissioner has identified the following health statistics that impact on the health and wellbeing of the population of Wales.

Only 10% of health is determined by the Health Services available in a country. The rest is dependent on wider determinants like living conditions, social protection and employment etc.

Over the last decade health inequalities have widened overall and the amount of time people spend in poor health has increased.

In 2018 74% of NHS in Wales spend was on acute services and 20% on tertiary and prevention (4% on secondary prevention and 2% on tertiary prevention)

Mental health problems in children and young people are on the rise. Mental wellbeing is also poorer among adults in more deprived areas.

Healthy life expectancy is lower for those in the most deprived areas and there are no clear signs of the gap recuing

The framework seeks to direct the NHS in Wales to address these health statistics and to improve upon them. The framework leads the way and seeks to outline the critical areas for NHS Wales to address and contributions to the seven wellbeing goals:

The 7 wellbeing goals are:

- a prosperous Wales.
- a resilient Wales.
- a healthier Wales.
- a more equal Wales.
- a Wales of cohesive communities.
- a Wales of vibrant culture and thriving Welsh language.
- a globally responsible Wales.

The framework promotes an integrated approach to health and social care and using the five harms and the quadruple aims set out in section 1.

Where there is any negative impact resulting from actions or responses by NHS organisations, the expectation would be for these to be highlighted and mitigating actions demonstrated within the plans produced.

The framework reflects the 7 wellbeing goals and focuses especially on creating a healthier Wales.

8.4 How will the impact of the proposal be monitored and evaluated as it progresses and when it concludes?

The impact of the framework will be monitored through the production of the IMTPs submitted by health boards, and other organisations, by early 2022. The IMTPs will be subject to review and assessment before being submitted to the Minister to make their final decision on which plans are approved.

The IMTPs will be monitored using the various mechanisms open both the Welsh Government and NHS in Wales. This include the formal Joint Executive Team (JET) meetings chaired by the Chief Executive of NHS Wales, the integrated Quality, Planning and Delivery meetings and the informal arrangements led by each Health and Social Services Group policy lead through their own discussions.