

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol ar Graffu ar Gynllun y Gaeaf ar gyfer Iechyd a Gofal Cymdeithasol 2021 i 2022 Llywodraeth Cymru](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Scrutiny of the Welsh Government's Health and Social Care Winter Plan 2021 to 2022](#)

WP 10

Ymateb gan: | Response from: Coleg Brenhinol Meddygon Teulu | Royal College of General Practitioners



Thank you for the opportunity to contribute to the Health and Social Care Committee's inquiry into the Welsh Government's Health and Social Care Winter Plan 2021 to 2022.

To begin, it must be acknowledged that the context in which this plan was implemented had its own distinct challenges with the rise of the Omicron COVID-19 variant. This factor inevitably impacts on assessing a plan prepared prior to the variant emerging and on the potential to extrapolate information from the Winter plan period to date for use in planning ahead for next Winter.

It is the College's view that the principles underpinning the Winter Plan were appropriate. However, there are numerous points while reading the priorities it is necessary to ask "how will this be delivered?" and while this is sometimes answered in subsequent documents, to specific sections of the NHS it would not be unreasonable to suggest that this document is not a fully formed plan but rather an indication of priorities and distribution of funding. A more comprehensive plan would both benefit the health sector but also allow greater understanding of what is happening in other areas of the NHS and afford patients and the public, clarity on what they can expect from medical and care professionals during the Winter period

Health inequalities and vulnerable groups

The inclusion of this section is welcome, albeit should be expected, however for Welsh Government to achieve a real shift towards tackling health inequality it will require a cross-governmental long-term strategy along the lines of that proposed by the Health and Wellbeing Alliance policy group associated with the Welsh NHS Confederation: <https://www.rcgp.org.uk/about-us/news/2021/april/joint-paper-calling-on-the-next-welsh-government-to-show-national-leadership-on-ending-inequalities.aspx>.

At present there is too big a gulf between the ambitions of the Wellbeing of Future Generations (Wales) Act and the short-term fixes proposed in the Winter Plan. Of course, it is accepted that there may need to be 'sticking plaster' solutions in the interim, but we would like to see the Winter Plan proposals for reducing health inequality to be interlaced with a far more wide-reaching strategy to turn the tide on health inequality. It is important to acknowledge that the Covid-19 pandemic has served to widen health inequalities across Wales, and urgent steps need to be taken to address this.

Primary and Community Care Services

The proposals for general practice are reasonable in principle but require further explanation as to how they would be implemented. We would also challenge the perception that is implicit in the phrase "we will continue to incentivise GP practices to improve access for patients". It is not that GPs require a nudge to deliver better access, it is simply that there are an insufficient number of GPs to handle the demand in the timely manner that both patients and the profession expect. Welsh Government has made progress in training more GPs but these gains are lessened as many GPs are leaving the profession, resulting in ongoing challenges in sustaining and growing the service. It is important to consider the provision of training placements, wellbeing of GPs and retention of GPs within the workforce. We would draw the Committee's attention to our 8-point plan for improving access to general practice: <https://www.rcgp.org.uk/about-us/news/2021/october/rcgp-cymru-wales.aspx>.

Post-COVID syndrome (Long COVID)

We would like to take this opportunity to reiterate general practice's commitment to helping patients with post-COVID syndrome. The College has been at the forefront of providing professional development support for GPs as we learn more about this debilitating illness.

Urgent and emergency care - Maintaining safe health services

Steps have been taken to mitigate against the worst failures of Wales' emergency care system, but the scale of the problem has long been known even pre-pandemic. We empathise with our secondary care colleagues who are facing an unsustainable situation. There is an urgent need for Government to address the shortcomings of our urgent and emergency care system. It simply cannot be right that GPs, having made a medical assessment, are denied timely ambulance provision and are either left to transport a patient to hospital themselves or pass that burden onto a distressed family member.

GPs are on the frontline of this systemic problem. It is the GP who often has to provide the care while an ambulance is awaited, pulling them away from seeing other patients. It is the GP who is being challenged by a distressed family about the failure in the system. Tragically, it is also sometimes the GP who is the most senior clinician available when a patient passes away when they should have been admitted to hospital.

While, as acknowledged above, the problem is systemic and every section within that system is under immense pressure, it cannot simply be dismissed as a systemic failing. There needs to be accountability.

Supporting our health and social Care workforce

It is impossible to respond without emphasising quite how exhausting the last two years have been for GPs and general practice. In December 2020, RCGP carried out a survey in Wales which revealed that GPs were working at 127% of capacity. That was before their involvement in the vaccine roll-out. Delighted as the profession has been to be at the forefront of the vaccine roll-out, the workload has been immense. During this health emergency, GPs and their teams have stepped up selflessly. They were seeing patients face-to-face before there was any vaccine on the horizon. They have fallen ill with COVID, recovered and come back to help more patients during this extreme time. They have adapted to the rapidly deployed new technology. However, rising to the occasion in an emergency cannot be business as usual. The workload pressure is unsustainable. We need more GPs, more multidisciplinary team working, more new GPs trained and more space for that training to be accommodated. Unless these long-term issues are addressed, every Winter Plan will have the feel of an emergency situation.