

14 September 2022

Dear

## **ATISN 16582 – NHS Plans**

Thank you for your request to the Welsh Government for information received on 16 August 2022 relating to NHS plans and will be dealt with under the Freedom of Information Act (2000) (FOIA). You have requested the following:

### ***Staffing levels:***

1. *What are your plans to reduce the sickness absence rate and fill the vacancies for doctors and nurses ahead of winter when admissions may increase?*

### ***Bed Capacity***

2. *Do you have a plan in place to increase the number of general and acute beds available now, over the next six months and a longer-term plan to ensure sufficient beds?*

### ***Waiting lists for operations***

3. *What plans does the trust have in place to tackle the current waiting list and clear the back logs? What is the long-term plan to ensure waiting lists remain low so that patients are reassured they will be treated quickly?*

### ***Impact of lockdowns, masks and restrictions on visiting patients***

4. *Please provide clear clinical and scientific evidence to support the decision to force NHS staff to wear masks in order to reduce the spread of respiratory viruses and the results of any impact assessment carried out at your trust that considered the impact on staff and their physical and mental health?*
5. *Please provide evidence that the restriction on the number of visitors has reduced the spread of a respiratory virus and details of consultations carried out with patients to assess the impact on their well-being?*

### ***PCR testing for COVID-19***

6. *Why are staff and patients still being tested with PCR tests? What is the plan to phase out PCR testing and to rely on actual clinical diagnosis on patients and staff with symptoms?*

## **Our Response**

1.

It is the responsibility of health boards and trusts to plan, deploy and manage their workforce to meet population need, now and in the future. NHS bodies continue to review sickness absence plans and trajectories to inform demand and capacity planning and can escalate any concerns through established governance arrangements.

Our present focus is on recruiting more healthcare professionals, including from overseas where this is ethical, and on investing in the workforce of the future by continuing to train more people to ensure we have the right number of staff to care for the people in Wales.

## 2.

It is the responsibility of health boards to commission and provide services to meet the needs of their local population. This will include agreeing the provision of beds to deliver all the services required for their population. Flexibility on the bed requirement has to be managed locally to reflect the local delivery models, and demands for both emergency and elective services. Over recent years, as there have been improvements in the way services are delivered, procedures that were previously carried out as an inpatient are now being done as day cases, and those that were being done as day case are being done as outpatient procedures. During the pandemic, national bed requirements for intensive care was managed nationally but that was for a period of time to manage services at risk.

## 3.

At the end of April, the Minister for Health and Social Services published our Planned Care Recovery Plan (<https://gov.wales/sites/default/files/publications/2022-04/our-programme-for-transforming--and-modernising-planned-care-and-reducing-waiting-lists-in-wales.pdf>) which sets out our approach to transforming the way services are delivered and reducing waiting lists so that patients in Wales get the care and treatment they deserve in a timely manner. The plan, which was developed in collaboration with clinicians, contains a number of challenging but achievable targets and is supported by a recurrent investment of £170 million. Progress against the targets is monitored on a monthly basis and is published on the StatsWales website: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/Referral-to-Treatment/covid19recoveryplanambitionsforreferraltotreatmentwaitingtimes>

## 4.

During all phases of the COVID-19 pandemic, health and social care providers in Wales have been asked to adhere to the UK COVID-19 Infection Prevention and Control (IPC) guidance. This guidance was withdrawn on 27 May 2022 and may be found [here](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control). (<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>)

The guidance was based on a continuous review of the international evidence base and was issued jointly by the Department of Health and Social Care (DHSC), Public Health Wales (PHW), Public Health Agency (PHA) Northern Ireland, NHS National Services Scotland, UK Health Security Agency (UKHSA) and NHS England as official guidance.

Wales has played an active part in the development and continued evaluation of this guidance via Public Health Wales representation on the UK IPC group, but Welsh Government has had no direct role in its formulation. It is a measure of the speed and responsiveness of the work of the UK IPC group that new evidence was assimilated in five hundred iterations of the guidance over two years.

The UK IPC guidance has been consistent with recommendations from the World Health Organisation (WHO) throughout and was endorsed by the Health and Safety Executive (HSE).

The IPC Guidance made PPE recommendations, including on mask usage, based on the WHO recognised mode of transmission of coronavirus.

## 5.

It is clear that throughout the pandemic, high community transmission rates result in a higher number of hospital cases through both raised admissions and increases in nosocomial transmission.

Reduction of footfall in hospital via restrictions on visiting has therefore been a valuable intervention, combined with appropriate use of PPE, IPC measures and social distancing as part of the Hierarchy of Controls, in lessening the opportunity for nosocomial transmission.

## 6.

The Welsh Government continually reviews its testing strategy based on the best scientific, public health and expert evidence we have available to us. The use of PCR tests is supported by advice from Public Health Wales who confirm that a positive test corresponds extremely well with the presence of SARS-CoV2 RNA, indicating that a person is, or has been, infected with the disease.

Our most recent surveillance data continues to show a decline in the prevalence of Covid-19 in communities and hospitals following the recent wave caused by the BA.4 and BA.5 subtypes of the omicron variant of coronavirus. Regular asymptomatic testing has less positive impact during times when prevalence is low and on a downward trajectory in improving health outcomes. Therefore, we have recently scaled back routine asymptomatic testing both for the general public and health and social care staff.

In line with our ongoing objective to protect the most vulnerable from severe disease, we will continue to provide symptomatic testing for patients, those eligible for Covid-19 treatments, health and social care staff, care home residents and prisoners. We will also continue to provide tests for those being discharged from hospital into care homes. For care home residents, prisoners and some patients we are providing multiplex tests that detect Covid-19 and other respiratory viruses.”

### **Next steps**

If you are dissatisfied with the Welsh Government’s handling of your request, you can ask for an internal review within 40 working days of the date of this response. Requests for an internal review should be addressed to the Welsh Government’s Freedom of Information Officer at:

Information Rights Unit,  
Welsh Government,  
Cathays Park,  
Cardiff,  
CF10 3NQ

or Email: [Freedom.ofinformation@gov.wales](mailto:Freedom.ofinformation@gov.wales)

Please remember to quote the ATISN reference number above.

You also have the right to complain to the Information Commissioner. The Information Commissioner can be contacted at: Information Commissioner's Office,  
Wycliffe House,  
Water Lane,  
Wilmslow,  
Cheshire,  
SK9 5AF.

However, please note that the Commissioner will not normally investigate a complaint until it has been through our own internal review process.

Yours sincerely,