



**Comisiwn
Bevan
Commission**

The Sir Mansel Aylward Spring Summit

The Turning Point: Uniting for the Future of
Health & Care in Wales

Preliminary Report Executive Summary

Wales stands at a turning point.

With rising demand, deepening inequalities and health and care systems designed for yesterday's challenges, small fixes are no longer enough.

In March 2025, the Sir Mansel Aylward Spring Summit brought together over 120 leaders to reimagine a fairer, bolder and more resilient future.

This preliminary report marks the start of that journey – a shared commitment to build a future-focused health, care and wellbeing system, grounded in the Wellbeing of Future Generations Act and driven by the energy already alive across Wales.

Current Context & Future Trends

To shape the future, we must first understand where we're heading. Looking ahead to 2045, this section explores the scale of the challenge we face, and why urgent action cannot wait.



Wales is ageing, fast: The over-65 population will grow **7x faster** than under-65s. Over-90s will **nearly double**. Major illness is expected to rise **33%**; dementias by **70%**.^{1,2,3}



Fewer hands, greater demands: Wales could face a shortfall of **40,000** social care workers and **20,000** care home beds.⁴ The ratio of working-age adults to over-65s will drop from 3:1 to 2:1. People will need to work later in life to sustain public services.⁵



An older, sicker workforce: Wales has the highest sickness absence rates of the UK Nations. With an ageing workforce, this could rise a further **27.5%**.^{6,7}



A fragile frontline: **~6%** of our NHS staff are off sick at any one time - **more than 2x** the national average. Stress & anxiety are leading causes. Nearly **50%** of social care workers say they may leave in the next 5 years.^{8,9}



The unpaid backbone: If unpaid carers in Wales stopped tomorrow, it would cost over **£10bn a year** to replace them - more than the entire NHS Wales budget.¹⁰



Inequality is killing us: Wales has the highest levels of poverty in UK Nations, with **1 in 3 children affected**. People in the most deprived areas are likely to **die 10 years younger** with **15 fewer years** in good health. Yet these communities in Wales receive less per-head funding for primary care.^{11,12,13,14,15}



Flipping the model: **~50%** of our national budget goes into health and care, but **80%** of what shapes our health lies in where people live, work, and play.¹⁶ To meet the needs of tomorrow, this needs to be turned on its head.

‘Shaped by People, for People’

Our Long-Term Vision for Future Health and Care in Wales:

‘Healthier people in thriving communities’

This can only be achieved through:

- ✓ Prevention at every level
- ✓ Equity as a guiding principle
- ✓ Partnerships with people, communities, and organisations
- ✓ Integration across health, care and wellbeing
- ✓ Dynamic, prudent and sustainable services and systems
- ✓ Tech & Data-driven services and decision making at every level.



What Will Success Look Like if we Realise our Vision?

In a decade, Wales should strive to:

- **Turn the tide on inequality:** halve the gap in healthy life expectancy between the most and least affluent communities, ensuring that where you live no longer determines how long or how well you live.
- **Be a world leader in seamless, community-centred care:** rank amongst the top OECD nations for delivering integrated, timely, and person-focused care that people value and trust.
- **Be globally recognised for prudent, value-driven care:** a system that prioritises people over processes, ensuring every pound and every decision improves outcomes and quality of life.
- **Lead the UK in digital health and citizen empowerment:** with real-time, predictive and ethical use of data and AI, giving every person full and secure access to their own health and care records.
- **Create the most health-literate nation in Europe:** empower every citizen to understand, manage and shape their own health and wellbeing, supported by the right information and tools.
- **Champion workforce wellbeing and flexibility:** set the European benchmark for reducing burnout, moral injury, and sickness absence, with a workforce culture built on compassion, inclusion, and resilience.
- **Become the world's first national 'Living Lab' for health and care:** a bold environment for testing, learning, and scaling real-world innovations that improve lives and drive global best practice.

How Do We Get There?

Key Themes and Actions to Achieve our Shared Vision:

Ten Key Themes with aligned Actions emerged as essential to achieving sustainable and transformational change to meet future needs and challenges. These were consistent with the Bevan Commission's [*Foundations for the Future Model of Health and Care in Wales*](#).

Theme 1: Transform culture, leadership and accountability to catalyse system-wide change.

- **Lead differently:** Develop a new model of system-wide leadership, protecting time and space for leaders to think, learn and collaborate through national leadership networks.
- **Align leadership, accountability and incentives:** Ensure financial, operational, and clinical leadership are working towards and accountable for common objectives such as prevention, equity and integration, supported by joined-up governance, strategic planning and performance frameworks.
- **Position Wales as the first Bevan National 'Living Lab' for health and care:** drawing upon our history, foster a culture of open innovation and real-time learning across all levels of the system. Make Wales the easiest place to test, learn and scale what works.

Theme 2: Maximise the potential of data, technology and innovation to design and deliver wide-scale transformation.

- **Create a single digital record:** Give every person in Wales access to a joined-up, real-time digital record spanning health, care, and community services.
- **Use data and AI to enable proactive care:** Leverage linked data and ethical AI to personalise support, predict or anticipate need, and drive fairer, smarter decisions.
- **Unlock the value of Welsh data:** Expand access to the SAIL Databank through national support for research and innovation that directly benefits people in Wales.

Theme 3: Equip and enable people and communities to manage and shape their own health and wellbeing.

- **Empower communities to shape local wellbeing:** Support trusted local assets like libraries, schools, pharmacies and community groups through pooled budgets and devolved decision-making. Enable Public Service Boards to align funding across sectors, giving communities real influence over priorities.
- **Foster shared purpose and accountability for health and care:** Create ongoing, inclusive national dialogue about what good health and care looks like now and in the future, while strengthening mutual accountability between people, PSBs, RPBs and national bodies for improving wellbeing outcomes.
- **Equip people to manage their own health and wellbeing:** Expand access to training and tools such as social prescribing, self-management support, health literacy, and personal data, especially for those most at risk of exclusion.

Theme 4: Deliver equitable health and wellbeing, tackling inequalities and discrimination.

- **Design for equity, not equality:** Hardwire equity into planning, funding and policy, allocating resources based on need, not historical demand.
- **Tackle the Inverse Care Law:** Target investment, access, and accountability to halve the gap in healthy life expectancy.
- **Share power by design:** Create sustained, paid roles for people with lived experience to help shape and support services, especially from marginalised communities.

Theme 5: Invest in prevention and tackling wider determinants of health and wellbeing.

- **Redesign around what keeps people well:** Treat the wider determinants of health as essential infrastructure, reflected in national priorities, funding, and accountability.
- **Mandate investment in prevention:** Set clear minimum thresholds for prevention spending across sectors, with visibility and tracking of impact.
- **Make prevention part of everyday life:** Embed culturally competent, community-led support in the places people live, work and gather, making prevention easy, accessible and routine.

Theme 6: Redesign services and structures around the needs of people and communities to ensure seamless integration across sectors, systems and care pathways.

- **Design services around people, not institutions:** Join up care plans, teams and records to create seamless, person-centred experiences.
- **Create local Wellbeing Point:** Establish a network of integrated care centres that co-locate health, social care and wellbeing services within accessible community spaces.
- **Strengthen the ability of Partnership Boards to deliver integrated care:** Equip RPBs and LSBs to overcome service fragmentation by removing barriers, enabling joint delivery models, and using shared data and outcomes to coordinate care around people and place.

Theme 7: Redesign care structures and settings based on biopsychosocial principles throughout all stages of the life course.

- **Shift from condition-based care to whole-person support:** Move beyond condition-based models by supporting physical, mental and social needs together, embedding emotional support, peer connection, and meaningful activity as core components of care.
- **Wrap care around key life transitions:** Design services around key stages like childhood, menopause, ageing and bereavement, ensuring continuity, flexibility and dignity.
- **Deliver care where people live, with infrastructure that supports it:** Expand community-led models, such as housing with care and supported living; and align estates, planning, and commissioning around local needs and long-term priorities.

Theme 8: Ensure prudent, sustainable care by eliminating waste, minimising complexity and maximising efficiency, productivity and value.

- **Stop low-value care and scale what works:** Make disinvestment part of strategic planning by identifying and phasing out ineffective services, while supporting the spread of proven, people-centred models.
- **Embed prudent principles system-wide:** Align policy, funding, and clinical practice with prudent values, reducing waste systematically, avoiding overtreatment, and focusing on outcomes that matter to people.
- **Streamline systems and roles:** Tackle duplication, complexity and skill mismatches by simplifying pathways, redesigning roles, and supporting staff to work at the top of their licence, enabled by smart tools and better coordination.

Theme 9: Futureproof the competence, capacity and composition of the workforce and their wellbeing.

- **Plan and train for the future workforce:** Develop a national workforce intelligence system to forecast future gaps, trends and emerging roles and flexible training. Align education, placements and career pathways to population needs and evolving models of care.
- **Expand flexible and inclusive training and career routes:** Grow modular, accessible, earn-while-you-learn pathways/ apprenticeships that support movement across roles. Embed digital, relational and adaptive skills to build a confident, future-ready workforce.
- **Recruit, retain and value people where they are needed most:** Use bold, place-based approaches to grow and keep staff in underserved areas. Invest in local training pipelines, fair pay, progression, wellbeing, and flexible roles that support retention and resilience.
- **Value, encourage and support volunteers and carers:** Identify needs, opportunities, training and support for carers, volunteers and people with lived experience.

Theme 10: Reframe performance, governance and resource allocation to reflect need and greatest value.

- **Redefine what we measure and reward:** Shift from process targets to metrics that reflect wellbeing, equity, experience, and long-term outcomes, embedding them into performance, contracts and reporting.
- **Align funding with purpose and value:** Redesign budgets and incentives to follow need, support prevention, and enable shared responsibility across sectors.
- **Create a shared national outcomes framework:** Develop a cross-sector framework with common goals and flexible local delivery to guide collective action and investment.
- **Assess major decisions for health and equity impact:** Ensure all significant policy and spending decisions are tested for their effect on population health, equity and sustainability.

Where do we go from here?

The actions in this report reflect just some of the ideas and ambitions shared at the Spring Summit. They are not final or exhaustive, but mark the first steps towards a future health, care and wellbeing system in Wales. In the months ahead, we will continue to refine them, drawing upon international best practice and securing the partnerships and collective commitment needed to make change happen.

This Time Must be Different

Calls for bold reform are not new.

For decades, reports have urged a shift from reactive care to prevention, from fragmentation to integration, from systems built around institutions to ones built around people. However, bold intentions have too often failed to deliver lasting solutions. This now has to change.

The system isn't broken - it's out of date, overwhelmed, and out of step with people's lives.

Wales has the tools, the talent, and the mandate to lead. If we truly believe in a better future for everyone, we must be bold enough to build it together - starting today, not tomorrow.

-
1. StatsWales Population Projections (2022-based)
 2. Welsh Government, 2024. *Estimates of burden of disease in 2040*; The Health Foundation, 2023. *Health in 2040: projected patterns of illness in England*.
 3. Senedd Research, 2023. *Planning ahead dementia services in Wales*.
 4. Data extrapolated to 2045 from We Care Wales Report 2022 & Care Home Professional, 2024. *Wales hurtling towards 10,000 care home bed deficit over next decade*.
 5. StatsWales Population Projections (2022-based)
 6. Office for National Statistics (April 2024), *Sickness Absence in the UK Labour Market*
 7. Modelled on ONS, 2024 Sickness Absence in the UK Labour Market & StatsWales Population Projections (2022-based) data.
 8. Welsh Government, 2024. *Estimates of burden of disease in 2040*; The Health Foundation, 2023. *Health in 2040: projected patterns of illness in England*.
 9. Social Care Wales, 2023: *Pilot workforce survey - Overall report of findings*.
 10. Carers Wales, 2024. *State of Caring in Wales*.
 11. Office for National Statistics, 2024
 12. Welsh Government, 2025. *Relative income poverty: April 2023 to March 2024*.
 13. Modelled on ONS 'Health state life expectancies by national deprivation' and Senedd Research 'Health and wealth: why tackling health inequalities is so important'.
 14. Office for National Statistics. *Health state life expectancies by national deprivation quintiles, Wales (2018–2020)*.
 15. Currie et al., 2021. *Exploring the equity of distribution of general medical services funding allocations in Wales: a time-series analysis*. BJGP.
 16. World Health Organization Commission on Social Determinants of Health, 2008. *Closing the gap in a generation: Health equity through action on the social determinants of health*.
-

Comisiwn Bevan Commission

School of Management,
Swansea University Bay Campus,
Fabian Way, Swansea SA1 8EN

www.bevancommission.org
bevan-commission@swansea.ac.uk
+44 (0)1792 604 630
