

Health Matters: Your Questions

Cross-party Q&A event, Thursday, February 19, 2026

Politicians from four major Welsh political parties set out their visions for the future of health and care in Wales at a Bevan Commission event held at Cardiff University in February. Representatives from Welsh Labour, Plaid Cymru, the Welsh Liberal Democrats and the Wales Green Party took part in a live Q&A, chaired by journalist Will Hayward and streamed online.

The Welsh Conservatives and Reform UK did not provide spokespeople.

Opening Remarks

Welsh Liberal Democrats – Steve Aicheler

Steve Aicheler warned that the “social contract” underpinning the NHS is at risk of breaking due to failures in access, ambulance delays, and blocked hospital beds.

Key points:

- NHS Wales is “squeezed from both ends” due to failures in primary and social care.
- Long-term planning is essential, but urgent action is needed to unblock beds.
- Lib Dems propose increasing the Welsh rate of income tax by 1p to raise £270m annually for social care.
- Westminster should contribute more through measures such as a digital services tax and a tax on banks.

Plaid Cymru – Mabon ap Gwynfor MS

Mabon ap Gwynfor argued that outcomes were better 15 years ago because the NHS focused on prevention.

Key points:

- Wales is drifting from Aneurin Bevan’s founding vision of prevention and social determinants of health.
- The NHS risks becoming a “national hospital service” focused on crisis response.

- Plaid calls for investment in prevention, stronger primary care, and valuing social care as an equal partner.
- Systems should be redesigned around people, not institutions.

Wales Green Party – Ian Chandler

Ian Chandler called for a fundamental shift from an illness-treatment model to a wellbeing-focused system.

Key points:

- Health and care should prioritise “human thriving” and healthy life expectancy.
- Prevention must become the organising principle, not a slogan.
- Accountability should shift from service volume to wellbeing outcomes.
- Full integration of health and social care, investment in early years, tackling poverty, and supporting unpaid carers are central to the Green vision.

Welsh Labour – Ruba Sivagnanam

Ruba Sivagnanam emphasised Labour’s focus on the social determinants of health.

Key points:

- Despite austerity, Welsh Labour has protected and modernised public services.
- Achievements include free school meals, investment in school buildings, reduced waiting lists, and new social homes.
- Labour has expanded pharmacy-based treatments and delivered 400,000 dental appointments.
- The next step is innovation to create a “healthier, fairer Wales”.

Audience Q&A

Q1 – Sally Anstey, South East Wales: Should health and social care be taken out of political control?

Plaid Cymru – Mabon ap Gwynfor

- No: political accountability is essential.

- Current problems stem from weak leadership and inconsistent governance across health boards.
- Data collection is inconsistent; governance structures need reform.
- First three months of a Plaid government would focus on governance improvements.

Wales Green Party – Ian Chandler

- No: democracy requires political accountability.
- The issue is not political control but focusing political leadership on outcomes and resources.
- Local accountability to patients and practitioners must be strengthened.
- Welsh Government must resource its own strategies properly.

Welsh Labour – Ruba Sivagnanam

- Political accountability is necessary and expected by the public.
- Structural issues exist, such as hospitals not communicating effectively.
- Ministers must intervene when necessary to ensure delivery.
- Progress is being made through better integration of health, social care, and education.

Welsh Liberal Democrats – Steve Aicheler

- Long-term planning should be depoliticised, as health reform takes longer than a single Senedd term.
- Day-to-day management must remain politically accountable.
- Ministers have not been held accountable for declining performance.
- Health boards need clearer guidance and support from government.

Follow-up: How would the NHS look after two years under your party?

- **Plaid Cymru:** Empower patients with a stronger voice and direct influence on boards and ministers.
- **Wales Green Party:** Avoid disruptive structural reforms; focus on improving outcomes within existing frameworks.

- **Welsh Labour:** Improve collaboration between hospitals, social care, and community services; expand reablement services.
- **Welsh Liberal Democrats:** Maintain political accountability but establish long-term, cross-party planning.

Q2 – Chris Dawson-Morris, South East Wales: The Bevan Commission projects a change from a 3:1 ratio of working-age adults to older adults down to 2:1, which will significantly affect the ability to staff care services. Will you be open and honest about the radical service consolidation this will require?

Wales Green Party – Ian Chandler

- There is a demographic “time bomb,” especially in areas like Monmouthshire where the population is already older.
- The population needs assessment predicts a **doubling of dementia cases** in the next decade.
- Prevention is widely discussed but not meaningfully implemented; more investment is required.
- The goal is to keep people **physically, mentally, and socially active** to maintain healthy life expectancy.
- Without investment, Wales faces rationing of care or increased charges—both unacceptable.
- The Green Party supports **wealth taxation** to fund public services, arguing it would have minimal impact on the wealthy but major benefits for the wider population.

Welsh Liberal Democrats – Steve Aicheler

- Emphasised the need for immigration and workforce planning.
- **Immigration** is essential for Wales and part of the solution to workforce shortages.
- Wales needs a **credible, long-term workforce plan** developed with universities and training providers.
- Cardiff University’s consideration of cutting nursing courses shows how underfunded the sector is.
- Paramedics trained in Swansea cannot find jobs due to poor planning.
- Retention of existing staff is as important as recruitment, especially in GP services.

- Over **300,000 unpaid carers** in Wales are absorbing system pressure; they must be valued and supported with respite care.

Welsh Labour – Ruba Sivagnanam

- Agreed that demographic pressures are real but noted that public understanding varies.
- In areas like the Vale of Glamorgan, social care already consumes a large share of local budgets.
- The public knows the population is ageing, but not the full scale of the challenge.
- Wales has received its best funding settlement since devolution, but resources still require careful prioritisation.
- More **joined-up working** is essential—health, social care, and education must collaborate.
- Specialist hubs may require people to travel further for certain treatments.
- A cultural shift is needed: not all care can be delivered close to home.
- Labour supports **national care standards** and fair pay for care workers to make the sector more attractive.

Plaid Cymru – Mabon ap Gwynfor

- Argued that politicians generally have not been honest enough about long-term challenges.
- Wales faces several “**grey rhino**” threats—predictable, slow-moving crises:
 - Diabetes
 - Obesity
 - Ageing population
- These pressures are known, yet action has been insufficient.
- A shift toward **prevention** is essential, but it requires more resources in primary care.
- Example:
 - A GP practice cluster in north Powys serving 12,000 people has successfully reduced falls and frailty.
 - Due to underfunding, they must cut £400,000 and close one practice.
 - This will reduce frailty services and lead to **more hospital admissions**, the opposite of what prevention aims to achieve.

- Redirecting resources from hospital-based care to **primary care** would prevent many costly admissions.

Q3 - Clare Williams, Mid Wales (asked in absentia): Would you commit to developing a long-term agreement on the sustainability of the social care system – specifically including funding and resourcing – given that NHS performance depends heavily on a functioning social care sector?

Welsh Labour – Ruba Sivagnanam

Ruba emphasised that Labour is already working on several elements of long-term sustainability.

Key points:

- Labour supports **standardising pay** for care workers to address poor conditions in parts of the private sector.
- Many private providers deliver high-quality care, but others do not pay properly or maintain acceptable standards.
- Standardisation work has already begun, but Wales does not have unlimited funding.
- More **joined-up working** is essential—between hospitals, GPs, social care, and community services.
- Cultural change is needed so services collaborate more effectively.
- Labour is committed to improving social care, but also wants to invest in early years, jobs, and community wellbeing because these improve long-term health outcomes.

On whether Labour would deliver a long-term sustainable plan within four years:

- Ruba argued that Labour is **already delivering parts of the plan**, including national standards and integrated services.
- She rejected the idea of a “grey rhino” crisis scenario, saying Wales is already acting on the issues.
- More money would help, but Labour’s approach is to improve systems, not rely solely on increased funding.

Plaid Cymru – Mabon ap Gwynfor

Mabon argued that full **integration of health and social care** is essential.

Key points:

- Plaid began this integration work during its cooperation agreement with Labour, but it remains unfinished.
- People still fall between the gaps of health boards and local authorities.
- Some councils are hiring lawyers to fight health boards over Continuing Healthcare packages—evidence of a broken system.
- Delayed discharges illustrate the scale of the problem:
 - Morriston Hospital: 100 people medically fit but unable to leave due to lack of care packages.
 - Wales-wide: 1,360 people delayed.
 - Solving this would require roughly **400 additional care workers**—a manageable number if properly funded.
- Current government responses are “sticking plasters,” such as short-term outsourcing.
- Plaid would invest in **long-term solutions**, not temporary fixes.

Wales Green Party – Ian Chandler

Ian focused on the need to strengthen social care without dismissing its existing strengths.

Key points:

- He rejected the idea that social care is “broken,” calling it one of the **jewels of Britain’s public services**.
- Social care protects vulnerable children, supports adults with disabilities, and helps older people maintain independence.
- The system is **under threat**, not fundamentally flawed.
- Key issues include:
 - **Pay parity**: care workers in local authorities earn less than those in health boards despite doing similar work.
 - **National pay scales** are needed to stop the workforce drifting to better-paid NHS roles.

- Delayed discharges are complex—sometimes due to family disagreement or complex care needs, not just lack of provision.
- Greens support a **holistic long-term plan**, not piecemeal metrics or short-term targets.
- Local councils save the NHS money by preventing admissions, but this is not recognised or funded appropriately.

Welsh Liberal Democrats – Steve Aicheler

Steve criticised the lack of concrete solutions from other parties and argued that the crisis requires **new funding**.

Key points:

- Wales faces a **financial crisis** in social care, with around **1,500 hospital beds blocked** due to lack of care packages.
- The Lib Dems are the only party willing to **raise the Welsh rate of income tax** to fund social care sustainably.
- Increasing the basic rate by 1p would raise around **£270m per year**, which would go directly to councils to fund care.
- Councils are delaying care because their budgets are stretched to breaking point.
- Investment is needed in:
 - Integrated service hubs
 - Frailty services
 - Community-based care
 - Intermediate care (step-down beds, physio, occupational therapy)

Clarification on tax:

- The increase would apply to the **basic rate** of income tax.
- Wales does not have enough high-income taxpayers for higher-rate changes to generate the required revenue.
- The money would be ring-fenced for social care.

Additional comment – Ruba Sivagnanam

Ruba added an example from the Vale of Glamorgan:

- Wales caps home-care charges at **£100 per week per person**, unlike England.

- Social workers are now using **AI-supported systems** to record notes and assessments more efficiently.
- This frees up time for direct care and allows staff to see more people.
- Labour is backing these innovations to improve capacity without relying solely on increased funding.

Q4 - Alan Treharne, Mid Wales: As a clinician working in community women’s health, community gynaecology, and community medicine, what are the barriers inhibiting innovation in NHS Wales, particularly in community services and digital innovation? If elected, what difficult decisions would you take to overcome those barriers?

Wales Green Party – Ian Chandler

Ian began by addressing digital systems, arguing that NHS Wales’ digital infrastructure has been poorly managed.

Key points:

- The replacement for the Connecting Care digital record system has been “atrocious,” running on outdated Microsoft Dynamics technology.
- Local authorities and the Welsh Local Government Association have had to step in due to inadequate Welsh Government support.
- Bureaucracy and slow-moving systems are major barriers to innovation.
- Targets and “cherry-picked metrics” distort priorities and hinder foundational improvements.
- Wales has many pilots that never scale because funding stops after the pilot phase.

Difficult decision:

- Rather than a single dramatic decision, Ian argued for a **cultural shift**:
 - Funding innovation beyond pilots
 - Creating learning cultures
 - Scaling successful models across Wales

Welsh Labour – Ruba Sivagnanam

Ruba focused on cultural and structural barriers, especially around communication and digital integration.

Key points:

- Wales’ ageing population affects digital literacy and adoption.
- A major barrier is the lack of communication between professionals—social workers, clinicians, hospitals, schools.
- Records must be transferable across services so clinicians can see full patient histories.
- Wales is behind England on digital integration but is moving toward adopting existing systems rather than reinventing them.
- Joined-up working is essential for innovation.

Difficult decision:

- Labour would push through **system-wide digital integration**, ensuring records can be shared across services.
- Labour would also drive cultural change to ensure professionals collaborate more effectively.

Welsh Liberal Democrats – Steve Aicheler

Steve drew on his background in entrepreneurship and innovation.

Key points:

- The Welsh NHS has a mixed record: some pilots succeed, but many innovations face resistance.
- A “fixed mindset” and resistance to change are major barriers.
- Contrary to Conservative rhetoric, Steve argued that Wales needs **more empowered managers**, not fewer.
- Managers must be trained to adopt innovation and manage change.
- Rapid technological shifts—remote care, AI, big data—require a more agile system.
- Ethical questions around AI and patient data must be addressed.

Difficult decision:

- The biggest barrier is **mindset**.
- Wales must shift toward a culture that understands risk, embraces innovation, and moves faster on adoption.

Plaid Cymru – Mabon ap Gwynfor

Mabon expressed both frustration and excitement about digital innovation and AI.

Key points:

- Telemedicine should be expanded significantly; Wales lags behind other countries.
- Digital Health and Care Wales handles primary care systems, while health boards handle secondary care—creating incompatible systems.
- This structural split prevents data sharing and slows innovation.
- Wales needs a unified approach to digital systems.

Difficult decision:

- Plaid would **force integration** of digital systems so primary and secondary care can share information.
- Patients should be empowered to allow their data to be shared.
- Wales should follow the example of the “One London” project, which created interoperable systems for 13 million patients at relatively low cost.
- AI can transform imaging and diagnostics, freeing clinicians to focus on patient care.

Q5 - Steve Curry, South East Wales: Should people in Wales “own their own health,” and what practical steps parties would take to support this – especially for communities with the worst health outcomes?

Plaid Cymru – Mabon ap Gwynfor

Mabon argued that personal responsibility must be understood in context.

Key points:

- Historically, poor health was blamed on individuals until public health pioneers showed that **environment, housing, and poverty** were the real causes.
- People should take responsibility for exercise and diet, but many lack access to parks, gyms, or affordable healthy food.
- Housing insecurity forces some families into hotels where they cannot cook.
- Health literacy must be improved through education and digital tools.

Practical steps:

- Improve access to healthy food and safe exercise spaces.
- Strengthen health literacy through schools and digital tools.
- Improve the NHS app so people can track sleep, diet, exercise, and symptoms.

Welsh Liberal Democrats – Steve Aicheler

Steve agreed with Mabon and emphasised structural barriers.

Key points:

- People face consequences for their choices, but many cannot make healthy choices due to poverty.
- Councils are closing leisure centres and libraries, removing key community resources.
- A holistic approach is needed: tackling poverty, improving education, and supporting healthy choices.

Practical steps:

- Invest in community resources.
- Integrate health education into schools.
- Address alcohol, drug use, and nutrition through public health programmes.

Wales Green Party – Ian Chandler

Ian warned against blaming individuals for systemic problems.

Key points:

- Poverty is multidimensional: housing, transport, education, clean air, access to shops, and green spaces all matter.
- Healthy choices must be the **easiest and cheapest** choices.
- Community organisations and social spaces are essential for mental and physical health.
- Wales has the **lowest breastfeeding rate in the world**, not due to lack of desire but lack of support.

Practical steps:

- Improve access to clean air, green spaces, and safe exercise environments.
- Support community groups and sports clubs.
- Restore early-years support such as Sure Start.
- Improve breastfeeding support to reduce long-term inequalities.

Welsh Labour – Ruba Sivagnanam

Ruba emphasised the social determinants of health and the role of early years.

Key points:

- Jobs, income, housing, and environment shape health far more than individual choices.
- Personal responsibility exists but is undermined by constant advertising of unhealthy foods and limited affordability of healthy options.
- The Vale of Glamorgan has banned unhealthy food advertising on council-owned spaces.
- Social media advertising also needs regulation.

Practical steps:

- Invest in early years, including health visitors and early education.
- Support breastfeeding and maternal health.
- Reduce unhealthy food advertising.
- Improve housing and community infrastructure.

On how Labour can refresh itself after many years in power:

- A new intake of diverse candidates will bring fresh perspectives.
- Listening to communities is essential.
- Labour must continue engaging with people's lived experiences.

Further selected audience questions (not asked due to time constraints):

Q6 – Christy Hoskings, North Wales: Children's neurodevelopmental assessment waiting times are having a catastrophic impact on the wellbeing, education and life opportunities of children and young people in Wales. How does your party plan to respond to this crisis?

Q7 – Geraint Walker, South West Wales: Northern Ireland already runs an integrated health and social care system. What will your party do to make services in Wales more joined-up, and how will you use digital tools to improve care for patients and staff while delivering real, measurable improvements?

Q8 – Jake Smith, South East Wales: Unpaid carers save Wales over £10bn per year. How will your party ensure health and social care services provide effective support to unpaid carers so they can continue to save Wales billions while providing effective care to those who rely on them?

Q9 – Hannah Thomas, South West Wales: If health and care policies are not designed with equity at their core, they risk deepening existing inequalities. How will you ensure your manifestos actively promote equity, so that no group is unfairly disadvantaged?

Q10 – Filiz Celik, South West Wales: What approaches can we adopt to frame mental health in a way that emphasizes social and relational determinants of stress, alongside symptom management, to support a more holistic and sustainable service model?

Q11 – Matt Phillips, South East Wales: In the first year of the Senedd health and care accounted for 36% of the Government's revenue budget. This year it is just shy of 56%. What will it be at the end of the next Senedd term?