

Sixth Senedd Legacy Report

April 2026



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Sixth Senedd Legacy Report

April 2026



About the Committee

The Committee was established on 23 June 2021. Its remit can be found at:
www.senedd.wales/SeneddHealth

Current Committee membership:



**Committee Chair:
Peter Fox MS**
Welsh Conservatives



Mabon ap Gwynfor MS
Plaid Cymru



James Evans MS
Reform UK



John Griffiths MS
Welsh Labour



Lesley Griffiths MS
Welsh Labour



Joyce Watson MS
Welsh Labour

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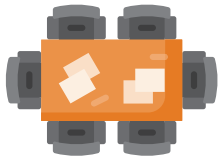
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engage with stakeholders across Wales, including engagement activities with stakeholders in their own communities.Page 21

Recommendation 9. Our successor committee should consider undertaking inquiry work in the areas we have identified in this report and, in particular, should follow up the recommendations in our reports on unpaid carers and general practice with the incoming Welsh Government as part of its programme of early business.Page 27

Recommendation 10. We draw the attention of our successor committee to the report of the Family-Friendly and Inclusive Parliament Review, and the recommendations addressed specifically to Senedd committees, especially Recommendation 31 which calls on every committee to include routinely scrutiny of equality evidence in its inquiries.Page 27

The Committee in the Sixth Senedd



HOW MANY FORMAL COMMITTEE MEETINGS WERE HELD?

100



HOW MANY WITNESSES GAVE EVIDENCE TO THE COMMITTEE?

386



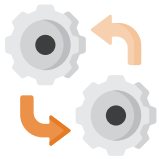
HOW MANY STAKEHOLDER EVENTS/ VISITS WERE UNDERTAKEN?

12



HOW MANY BILLS WERE CONSIDERED BY THE COMMITTEE?

2



**HOW MANY LEGISLATIVE CONSENT
MEMORANDA (LCM) WERE
CONSIDERED BY THE COMMITTEE?**

14



**HOW MANY REPORTS WERE
PRODUCED?**

49



**HOW MANY INQUIRIES WERE
UNDERTAKEN?**

19



**HOW MANY RESPONSES TO
CONSULTATIONS WERE RECEIVED?**

823

1. Introduction

- 1.** The Health and Social Care Committee was set up by the Senedd to look at policy and legislation, and to hold the Welsh Government to account on specific issues. This includes the physical, mental and public health and well-being of the people of Wales, including the social care system.
- 2.** In this report, we provide a brief overview of the work we have undertaken throughout the Sixth Senedd. We also make recommendations and suggest areas of priority for our successor committee in the Seventh Senedd.
- 3.** Further detailed information about our work during the Sixth Senedd can be found on [our website](#).

2. Committee Strategy for the Sixth Senedd

4. At the start of the Sixth Senedd, we asked people and organisations to tell us what they considered to be the most important issues affecting health and social care. This consultation ran between July and September 2021, and 139 responses were received.

5. We used these responses to develop a strategy for the Sixth Senedd, which was published in December 2021.

6. The strategy set out an ambitious vision for health and social care over the five years from 2021 to 2026, and how Committee members would work together. It identified cross-cutting themes that would be embedded across our work, and identified priority issues.

Our vision for health and social care

7. Our vision for the five years from 2021 to 2026 was a post-COVID reset, which would result in:

- All people in Wales living longer and healthier lives.
- A health and social care system that is working more effectively than it was before the pandemic.
- People who use health and care systems knowing which services to access to meet their needs, and having a more positive experience.

8. Achieving this vision would require:

- Better integration between health and social care.
- Progress in reforming social care, including greater sustainability of social care services.
- Increased levels of health literacy and signposting between services.
- Improved access to mental health services, especially for young people and people with the most acute needs.
- Progress in addressing workforce shortages across health and social care, including the development of the primary care workforce and

services so that people are able to access appropriate expertise close to home.

- Higher morale across the health and social care workforce.
- Improved self-management and self-care of chronic conditions.
- Improved standards and practice in relation to women's health.

9. We also identified the following cross-cutting themes, which ran through all of our work:

- Putting people at the heart of health and social care.
- Innovating for improvement.
- The health and social care workforce.
- Health inequalities and inequities.
- Delivering a post-pandemic reset.

10. We conducted an interim review of our Strategy in June 2023, and produced a [report](#) containing a number of conclusions about our focus for the remainder of the Senedd.

11. The strategy has been a very useful guide throughout this Senedd, helping to shape our work programme while also enabling us to be flexible and respond to emerging issues. We suggest that our successor committee considers adopting a similar approach.

Recommendation 1. At the start of the Seventh Senedd, our successor committee should consider developing a strategy to inform its early priorities and work programme. To inform this work, it should consider conducting stakeholder and public engagement activity. It should also consider reviewing its strategy periodically during the Seventh Senedd.

3. Policy Scrutiny

12. We have undertaken a wide range of inquiries covering issues within our remit. These have largely been driven by the priorities identified in our Committee Strategy.

13. A list of the policy inquiries we undertook during this Senedd can be found at **Annex 1**. Our work has included longer-term thematic work, spotlight work and follow-up work. In addition to our inquiries, we also held general scrutiny sessions with Welsh Government Ministers, as well as public bodies and offices that fall within our remit, and received a number of technical briefings on matters of interest.

Thematic work

14. Some of our inquiries have been pieces of longer-term, thematic work, which have given us the opportunity to gather substantial evidence and explore the issues in depth before making recommendations.

15. Our thematic inquiries have included:

- the impact of the waiting times backlog on people in Wales;
- hospital discharge and its impact on patient flow through hospitals,
- mental health inequalities;
- gynaecological cancers;
- supporting people with chronic conditions;
- prevention of ill health – obesity;
- future of general practice in Wales; and
- support for unpaid carers.

Spotlight work

16. Some of our inquiries have been shorter, more narrowly focused pieces of work aimed at considering the main issues quickly and identifying actions required from the Welsh Government to improve a particular policy or service.

17. Our spotlight inquiries have included:

- [endoscopy services](#);
- [dentistry](#); and
- [ophthalmology services in Wales](#).

Follow-up work

18. In June 2025, following concerns raised by stakeholders about the lack of progress in implementing the recommendations of our 2023 report [Unheard: Women's journey through gynaecological cancer](#), we agreed to hold a formal scrutiny session with the Cabinet Secretary for Health and Social Care and the Minister for Mental Health and Wellbeing.

19. We sought [a written update on progress from the Welsh Government](#) in advance of this meeting, which we shared with stakeholders for their views. [Seven responses were received](#).

20. Following the scrutiny session with the Cabinet Secretary and Minister, the Committee produced a [follow-up report](#), containing a further nine recommendations aimed at improving gynaecological cancer services for women in Wales. We believe this is a matter that our successor committee should keep under review.

NHS Waiting Times monitoring reports

21. On 26 April 2022, the Welsh Government published a plan for transforming and modernising planned care and reducing waiting lists. The Welsh Government's plan includes five key ambitions for reducing waiting lists. The Committee agreed to monitor progress towards these ambitions, and has [published termly monitoring reports](#).

22. As well as monitoring general progress with waiting lists, these reports have identified a range of important issues that the Committee has subsequently followed up with the Welsh Government either in correspondence or through pieces of short inquiry work, such as the inquiry into [ophthalmology services in Wales](#).

23. We believe these monitoring reports have been a valuable tool in this Senedd, and **we believe our successor committee should consider publishing such reports in the Seventh Senedd.**

General scrutiny

24. During the Sixth Senedd, we held a number of general scrutiny sessions with the Cabinet Secretaries and Ministers whose work fell within our remit.

25. We also held a number of scrutiny sessions with relevant office holders and organisations, including:

- **Digital Health and Care Wales** – this was a joint scrutiny session with the Public Accounts and Public Administration Committee to look at the progress of the organisation in its first year. Our joint report made 16 recommendations to the Welsh Government and DHCW.
- The **Welsh Ambulance Services University NHS Trust** – this was a general scrutiny session with the Chief Executive and Chair of WASUT and the Executive Director of Paramedicine. Our report made 7 recommendations, in response to which the Welsh Government launched a new ambulance performance framework in June 2025.
- **Llais Cymru** - this was the first general scrutiny session with representatives of Llais Cymru since it was established in April 2023. We questioned them on a range of areas including social care, issues relating to health services, patients' views on general practice and NHS Wales complaints.

Recommendation 2. Our successor committee should aim to balance, as far as possible, consideration of new priorities, responding to topical issues and undertaking follow-up work. It should tailor its approach to the consideration of each inquiry according to the particular topic and in line with its strategic objectives.

4. Legislative Scrutiny

26. In addition to our programme of policy and financial scrutiny, two Bills, seven Legislative Consent Memoranda and fourteen supplementary Legislative Consent Memoranda have been referred to us for scrutiny. We have also undertaken two post-legislative scrutiny inquiries.

Primary legislation (Bills)

27. Our role in relation to primary legislation is to consider the general principles of any Bills referred to us (Stage 1 scrutiny) and dispose of any amendments tabled to those Bills during the first amending stage (Stage 2 scrutiny). During this Senedd, two Welsh Government Bills were referred to us for consideration:

- The Health Service Procurement (Wales) Bill; and
- The Health and Social Care (Wales) Bill.

28. The Committee has no control over the timing of the introduction of Bills and, although we are consulted by the Business Committee on the proposed timetable for each Bill at Stages 1 and 2, our influence is limited.

29. Of the two Bills that we considered, we had to work to an expedited timetable for scrutiny of the Health Service Procurement (Wales) Bill. This constrained our approach to scrutinising the technical and complex issues surrounding the Bill, and put pressure on us and stakeholders in the health and social care sectors.

Legislative Consent Memoranda

30. During the Sixth Senedd, seven Legislative Consent Memoranda (LCM)¹ and eighteen supplementary Legislative Consent Memoranda (sLCM) were referred to the Committee for consideration. Details of the LCMs considered by the Committee can be found in **Annex 2**.

31. The timing and timescales for LCMs and their consideration by Senedd Committees can be complex. But over the course of this Senedd we have seen

¹ When the UK Parliament wishes to legislate using a UK Bill on a subject matter which has been devolved to the Senedd, convention requires it to receive the consent of the Senedd before it may pass the legislation in question. Standing Order 29 sets out the process to be followed, which involves the tabling of a legislative consent motion seeking the Senedd's agreement to what is included in the UK Bill within devolved areas.

too many examples of committee scrutiny of LCMs (including important opportunities to engage with stakeholders) being limited by restricted timetables and short notice periods for extended reporting deadlines. In the case of the Mental Health Bill, short reporting deadlines meant that we were unable to consider three of the memoranda laid for that Bill. Similarly, the timing of the reporting deadlines for Memorandum No. 4 of the Terminally Ill Adults (End of Life) Bill and the LCM for the Medical Training (Prioritisation) Bill meant that we were unable to consider either of them.

32. The incoming Welsh Government and the next Senedd Business Committee must be more mindful of this in the Seventh Senedd, and ensure that the maximum time possible is made available for committee scrutiny of LCMs prior to their consideration by the Senedd.

Recommendation 3. The incoming Welsh Government should take the necessary steps to provide as much notice, and as much time for scrutiny, of LCMs as possible.

Recommendation 4. The Business Committee in the Seventh Senedd should be more mindful of the impact that restricted reporting deadlines and short notice periods for extensions to those reporting deadlines have on the ability of Senedd Committees to undertake detailed and meaningful consideration of LCMs.

Post-legislative scrutiny

33. During this Senedd, we have undertaken a number of important pieces of post-legislative scrutiny:

- **Social Services and Wellbeing (Wales) Act 2014** - in a concurrent meeting with the Public Accounts and Public Administration Committee, we held an evidence session with academic experts to discuss the evaluation of the Act, next steps and any areas in need of further attention. Following the meeting, the Committees wrote jointly to the Deputy Minister for Health and Social Services to highlight issues raised during the evidence session.
- **Nurse Staffing Levels (Wales) Act 2016** - we carried out post-legislative scrutiny of the Act to consider its operation and effectiveness; further actions that may be needed; progress in developing the evidence base to extend the Act to further settings; and the extent to which the Act was 'future-proof'.

- **Minimum unit pricing for alcohol in Wales** – we undertook a short inquiry which looked particularly at the extent of public understanding of minimum unit pricing; its impact in Wales; whether it should continue; and if so, whether any changes were needed to increase the minimum unit price.

34. Post legislative scrutiny is an important part of the wider legislative process, providing the opportunity to consider the implementation of the legislation in question (including whether the financial and other impact assessments that accompanied the Bill were accurate) and to assess whether the legislation is having the intended effect. We encourage our successor committee to consider including post-legislative scrutiny as one of its priorities for the Seventh Senedd.

Recommendation 5. Our successor committee should consider including post-legislative scrutiny as one of its priorities for the Seventh Senedd.

5. Financial scrutiny

35. We have scrutinised the Welsh Government’s draft budget for the health and social care Main Expenditure Group (MEG) each year of this Senedd. Our scrutiny has been informed by consideration of the cross-cutting themes outlined in our Sixth Senedd strategy, as well as evidence provided by the Welsh Government and evidence gathered by the Finance Committee as part of its own scrutiny of each draft budget (including consultation and engagement on potential areas of priority).

36. Over the years, we have sought to pursue key themes and follow up on previous recommendations. Key themes we have identified during our scrutiny have included:

- increased investment in prevention;
- health boards’ financial planning and performance;
- the implications of short term funding cycles for strategic planning and sustainability;
- the need for capital investment in buildings, equipment and digital systems;
- social care, including access to respite for unpaid carers, the real living wage, and the need for parity of terms and conditions between the social care and NHS workforce;
- funding for palliative and end of life care.

37. For the last few budget rounds, we have raised concerns about NHS planning and transparency, particularly the absence of key documents such as the NHS Planning Framework and Health Board Allocation Letter, which were not published ahead of the Committee’s budget scrutiny session. As stated in our report on the 2026-27 Welsh Government draft budget,

“These documents have a central role in guiding how health boards plan and deliver services.

Without sight of them, it is difficult to assess how the draft budget aligns with actual service delivery needs. Their absence means that the Welsh Government is setting a draft health

budget without publicly available information on priority areas for investment; expected service delivery outcomes; and distribution of funding across health boards.”²

38. We draw these points to the attention of our successor committee and the incoming Welsh Government, and ask that these important documents are made available to our successor committee at the same time as the other draft budget documentation, or as close to this time as reasonably possible, to allow their full consideration.

Recommendation 6. The incoming Welsh Government should ensure that key financial documents, such as the NHS Planning Framework and Health Board Allocation Letter (or equivalents), are made available to our successor committee at the same time as the other annual draft budget documentation.

² [Report on the Welsh Government’s Draft Budget 2026-27](#), Health and Social Care Committee, December 2025

6. Pre-appointment hearings

39. Welsh Ministers and the Senedd agreed to introduce pre-appointment scrutiny by Senedd committees of certain public appointments which are of significant public interest or which will have a significant impact on the public. The aim is to further improve the scrutiny and transparency of the public appointment making process.

40. Pre-appointment scrutiny generally takes the form of a public pre-appointment hearing with the preferred candidate. For appointments to these agreed roles, it is for the relevant committee to decide whether or not it wishes to carry out a pre-appointment hearing.

41. During the course of the Sixth Senedd, we have held 11 pre-appointment hearings. A full list can be found in **Annex 3**.

42. In addition, in November 2021, we held a post-appointment hearing following the decision of the then Minister for Health and Social Services to appoint an interim Chair to Cwm Taf Morgannwg Health Board. While we recognised that we had no formal role in the appointment of the interim Chair we felt it was important, given the significance of the role, for us to have an opportunity to explore with them their priorities for the role and how they intended to lead the health board during their term of office.

43. We believe these pre-appointments hearings are a valuable part of the overall public appointments process, and encourage our successor committee to continue with them.

Recommendation 7. Our successor committee should consider continuing to hold pre-appointment hearings with the Welsh Government's preferred candidates for relevant health and social care public appointments.

7. Engagement activity

45. In keeping with our commitment to put people at the heart of health and social care, we have sought to hear directly from the people who are affected by policies or decisions. This has included focus groups, stakeholder roundtable events, video recordings, face-to-face interviews and Committee visits.

46. This engagement activity has provided invaluable access to the lived experiences of the participants, helping us to understand the challenges they face and the things that matter to them. We are deeply grateful to all those individuals who gave their time to talk to us over the course of this Senedd.

Recommendation 8. Our successor committee should continue to undertake informal engagement activity as part of its inquiry work to supplement formal evidence gathering. It should tailor its approach to reflect the particular inquiry and target audience, and should continue to seek new and innovative ways to engage with stakeholders across Wales, including engagement activities with stakeholders in their own communities.

Citizen engagement

47. Citizen engagement has supported the Committee's work throughout the Sixth Senedd. Across multiple inquiries, the Committee gathered lived-experience evidence through case studies, focus groups, advisory groups and interviews. This approach ensured that people's lived experiences directly informed the scrutiny of health and social care policy in Wales.

48. The Committee commissioned citizen engagement for the following eight inquiries:

- Impact of the waiting times backlog on people in Wales who are waiting for diagnosis or treatment
- Mental Health Inequalities
- Dentistry
- Gynaecological cancers
- Supporting people with chronic conditions
- Prevention of ill health – obesity

- [The future of general practice in Wales](#)
- [Improving access to support for unpaid carers](#)

49. Key areas of this work included mental health inequalities and gynaecological cancers.

Mental Health Inequalities

50. The Committee's inquiry into [Mental Health Inequalities](#) began with a series of focus groups to understand the lived experience followed by an advisory group, which worked to inform the Committee throughout key inquiry milestones. These activities captured the voices and input of people with lived experience and those facing barriers related to socioeconomic status, community background, and access to services.

51. Members of the advisory group played a key role in shaping the Committee's work. Their insights influenced the Committee's recommendations and the Welsh Government's response. During the plenary debate, their contributions were directly quoted, reinforcing the importance of lived experiences in policymaking. Following this, the Welsh Government Minister met with the group privately, providing them with an opportunity to feed directly into the government's work on improving mental health policies.

Gynaecological Cancers

52. Recognising the sensitivity of these discussions, the Citizen Engagement Team conducted face-to-face, one-to-one interviews with participants. Patient testimony was central to the inquiry, highlighting delays in diagnosis and challenges with communication.

53. The firsthand testimonies gathered during the inquiry had a significant impact on the Committee's final report, with women's experiences referenced and quoted throughout the report.

54. The Welsh Government responded to the report, accepting 18 recommendations, accepting two recommendations in principle and partially accepting four recommendations.

55. The women who took part in the videos were referenced and quoted by Members during the debate. In his introduction to the debate, the Chair of the Committee said:

“Speaking personally, I’ve been a Member for 13 years and sat on several different committees and been involved in dozens of inquiries, but I would say that the evidence that I heard through the brave women who spoke to us was the most powerful and emotional evidence that I have come across in my 13 years as being a Member here.”

56. The work carried out through this engagement was widely recognised and was nominated for the 2024 Moondance Cancer Awards in the Patient and Public Participation and Involvement category. This award acknowledges projects that have demonstrated meaningful public and patient involvement in shaping cancer services and influencing improvements across the cancer pathway.

Unpaid Carers – Improving Access to Support

57. Drawing on work completed in the Fifth Senedd, the Committee focused on Improving access to support for unpaid carers. The engagement approach required in-depth interviews with unpaid carers from across Wales. In addition, focus groups aimed to consolidate individual views and explore potential solutions. Engagement found many unpaid carers were unaware of available support, struggled to access Carer’s Assessments and faced limited or unsuitable respite. Participants also reported challenges navigating complex processes and said clearer, easier-to-understand information would help them access support, to which the Committee responded with a full and easy read engagement findings report. A final report was published at the end of this Senedd.

Areas of Research Interest

58. In conjunction with the Senedd’s Knowledge Exchange Team, we opened two Areas of Research Interest (ARI)³; one on health literacy, the other on innovation for improvement, both of which had been identified in our Strategy for the Sixth Senedd.

Health Literacy

59. Health literacy is about an individual’s ability to find, understand, and act on health information, to know which health services to use, when to use them, and to be active partners in their care. It is also how relevant organisations meet those

³ An ARI is an opportunity for academics, researchers and experts to share their research and expertise on a given topic with the Senedd.

needs, enabling individuals to access, understand and use health information and services.

60. We published our ARI in August 2022 and subsequently asked Dr Emily Marchant from Swansea University, supported by Professor Tom Crick, to produce a piece of work in this area.

61. Dr Marchant produced two reports for the Committee:

- [Health, Education and Prosperity for All: Wales as a Health Literacy Testbed](#), December 2023; and
- [School-based health literacy for children and young people in Wales](#), April 2023.

62. Both reports were considered by the Committee, and their insights helped to shape our future inquiries.

Innovation for improvement in healthcare

63. In April 2024, we launched a second ARI, to help better understand how the NHS could harness the power of emerging technologies to improve patient diagnosis, treatment and care.

64. In October 2024, we held a stakeholder event, which brought together relevant health researchers to give presentations and take part in Q&A sessions on topics including use of AI and innovation in healthcare. We also held a research marketplace, which provided an opportunity for people to exhibit and demonstrate latest technologies to their peers and Senedd Members.

8. Priorities for the Seventh Senedd

65. We recognise that our successor committee will determine its own work programme for the Seventh Senedd. However, we ask its members to consider the following matters, in addition to any other issues raised by stakeholders or Members as part of its strategic planning process.

Follow-up work

66. Throughout the Sixth Senedd, we have undertaken work on important and timely matters, and produced detailed reports which made constructive and considered recommendations.

67. We particularly encourage our successor committee to consider undertaking follow-up work in the areas listed below as a matter of priority in its early business programme:

- **Support for unpaid carers** – to seek a response from the incoming Welsh Government to our report published in March 2026, and to follow-up the recommendations in that report during the Seventh Senedd;
- **General practice** – to seek a response from the incoming Welsh Government to our report published in March 2026, and to follow-up the recommendations in that report during the Seventh Senedd.

68. In addition, we encourage our successor committee to consider undertaking follow-up work at the appropriate time in relation to the following areas:

- **Ophthalmology services** – to continue the work we began in relation to secondary eye care services and, in particular, to follow-up the recommendations made in our report;
- **Gynaecological cancers**, particularly the recommendations in our follow-up report;
- Social care, particularly work on the **National Care Service** and the **Real Living Wage** for social care workers.

Areas of concern and key themes

69. Throughout the course of our inquiry work, there have been a number of key areas of concern that have arisen repeatedly in evidence that we wish to encourage our successor committee to consider, namely:

- recruitment and retention of the health and social care **workforce**, including planning for the future;
- the availability and robustness of **data** in most aspects of health and social care;
- the limiting effect that a lack of progress with implementing the **digital transformation agenda** has had on health and social care services.

Key themes

70. **Prevention** has been a key theme throughout our inquiry work, and we have heard much about the importance of shifting from a healthcare system which focuses on treating illness to one that focuses on improving health and wellbeing outcomes and reducing inequalities for people and communities in Wales.

71. Another key theme has been the move to **provide care closer to home**. This ‘community by design’ model is the long-term plan of the Welsh Government and NHS Wales, and aims to improve flexibility and access (and be more convenient) for patients, reduce the need for hospital visits and allow for better management of long-term chronic illness.

72. Lastly, is the importance of work to **reduce health inequalities**, and the actions and responsibilities associated with this at national, regional and local levels.

73. All three of these agendas will require strong commitment and focus from the incoming Welsh Government, as well as its health and care partners, and all are areas that our successor Committee will wish to follow closely.

Other issues

74. Finally, we wish to draw the attention of our successor committee to two other issues that have been brought to our attention as part of our legacy work, and ask them to consider undertaking inquiries into both issues at the appropriate time.

75. The first is a request from the [Petitions Committee](#) for our successor to undertake a review, after 12 months, of the '[Call4Concern](#)' patient and family-initiated escalation approach across NHS Wales⁴ (this approach is intended to align with the principles of Martha's Rule in NHS England). The second is a joint request from BMA Cymru Wales and RCN Wales for our successor to undertake an inquiry into corridor care.

76. More broadly, we wish to ask our successor committee to give consideration to ways of working with the Petitions Committee in the Seventh Senedd to ensure that the very important issues raised in that forum by petitioners are able to be considered by the next committee with responsibility for health and social care.

Recommendation 9. Our successor committee should consider undertaking inquiry work in the areas we have identified in this report and, in particular, should follow up the recommendations in our reports on unpaid carers and general practice with the incoming Welsh Government as part of its programme of early business.

Family-Friendly and Inclusive Parliament Review

77. At the beginning of March 2026, the report of the Family-Friendly and Inclusive Parliament Review, '[A Senedd for All](#)', was published. Drawing on evidence and analysis of the Senedd's culture, rules and systems, it makes recommendations to strengthen the Senedd's role as a fully representative and inclusive democratic institution. A number of those recommendations are directed at committees in the next Senedd, and we wish to take this opportunity to highlight those.

Recommendation 10. We draw the attention of our successor committee to the report of the Family-Friendly and Inclusive Parliament Review, and the recommendations addressed specifically to Senedd committees, especially Recommendation 31 which calls on every committee to include routinely scrutiny of equality evidence in its inquiries.

⁴ Petition P-06-1570

Annex 1: Policy inquiries

The table below list the policy inquiries we undertook the Sixth Senedd. Further information about each inquiry is available on our website.

Inquiry	Completion date
Health and Social Care: Priorities for the Sixth Senedd	December 2021
Scrutiny of the Welsh Government's Health and Social Care Winter Plan 2021 to 2022	May 2022
Impact of the waiting times backlog on people in Wales who are waiting for diagnosis or treatment	September 2022
Hospital discharge and its impact on patient flow through hospitals	October 2022
Endoscopy services: follow up inquiry	April 2023
Evaluation of the Social Services and Wellbeing (Wales) Act 2014	May 2023
Mental Health inequalities	May 2023
Dentistry	June 2023
Scrutiny of Digital Health and Care Wales	August 2023
Nurse Staffing Levels (Wales) Act 2016: Post-legislative scrutiny	April 2024
Gynaecological Cancers	May 2024
Welsh Ambulance Services University NHS Trust - General Scrutiny	August 2024
Supporting people with chronic conditions	April 2025
Minimum unit pricing for alcohol in Wales	June 2025
Prevention of ill health-obesity	October 2025
Ophthalmology Services in Wales	November 2025
Gynaecological Cancers: Follow up report	January 2026
The future of general practice in Wales	March 2026
Improving access to support for unpaid carers	April 2026

Ongoing scrutiny themes	Completion date
Innovation for improvement in healthcare	March 2026
NHS Waiting Times Monitoring Reports	March 2026
Health literacy	March 2026
General scrutiny of Ministers with responsibility for health and social care	March 2026
The impact of the COVID-19 pandemic, and its management, on health and social care in Wales-Sixth Senedd	March 2026
Health and social care workforce	March 2026
Women and girls' health	March 2026
Common frameworks-Sixth Senedd	March 2026
Social care and social services	March 2026
Follow up on Fifth Senedd Health, Social Care and Sport Committee recommendations	March 2026

Annex 2: Legislative scrutiny

The table below lists the Bills we scrutinised during the Sixth Senedd. Further information about each Bill is available on our website.

Bills	Completion date
Health Service Procurement Bill	April 2023
Health and Social Care (Wales) Bill	March 2025

The table below lists the Legislative Consent Memorandums and Supplementary Legislative Consent Memoranda that were referred to us for scrutiny during the Sixth Senedd.

Legislative Consent Memorandum	Completion date
Legislative Consent: The Nationality and Borders Bill	February 2022
Legislative Consent: Health and Care Bill	April 2022
Legislative Consent: Tobacco and Vapes Bill (2024-2025)	June 2025
Legislative Consent: Mental Health Bill	June 2025
Legislative Consent: Employment Rights Bill	August 2025
Legislative Consent: Terminally Ill Adults (End of Life) Bill	February 2026
Legislative Consent: Medical Training (Prioritisation) Bill	February 2026

Annex 3: Pre and post - appointment hearings

Pre and post-appointment hearings	Completion date
Post-appointment hearing for the interim Chair of Cwm Taf Morgannwg University Health Board	November 2021
Pre-appointment hearing for the Chair of the Citizens' Voice Body	March 2022
Pre-appointment hearing for the Chair of the Welsh Ambulance Services NHS Trust	August 2022
Pre-appointment hearing for the Chair of the Powys Teaching Health Board	September 2022
Pre-appointment hearing for the Chair of Cwm Taf Morgannwg University Health Board	March 2023
Pre-appointment hearing for the Chair of Betsi Cadwaladr University Health Board	January 2024
Pre-appointment hearing for the Chair of Swansea Bay University Health Board	April 2024
Pre-appointment hearing for the role of Chair of Hywel Dda University Health Board	April 2024
Pre-appointment hearing for the Chair of Cardiff and Vale University Health Board	July 2025
Pre-appointment hearing for the Chair of Velindre University NHS Trust	July 2025
Pre-appointment hearing for the Chair of Aneurin Bevan University Health Board	February 2026
Pre-appointment hearing for the Chair of Social Care Wales	March 2026