



	Iechyd Cyhoeddus Cymru Public Health Wales	Name of Meeting Quality, Safety and Improvement Committee Date of Meeting 24 February 2026 Agenda item: 5.6
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Winter/Seasonal Planning	
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Approval/Scrutiny route:	HPSS DMT – 10/02/2026
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<p>Purpose:</p> <p>This paper provides an update to the Quality, Safety and Improvement Committee on Public Health Wales coordinated response to winter planning for 2025/26. Planning for the 2025/26 winter seasons follows work undertaken for the Winter Pressures Summit held in March 2025.</p> <p>It outlines the contributions to the winter response and learning from the centralised programme established to co-ordinate.</p>
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Recommendation:				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Committee is asked to:</p> <ul style="list-style-type: none"> • Receive assurance that lessons-learnt activity has been undertaken and that insights—both system-wide and programme-specific—are being incorporated into planning for the 2026/27 winter season. • Note that, in response to positive feedback, Public Health Wales is enhancing its collaborative approach, with workstreams jointly planning future winter activity and adopting improved information-sharing mechanisms. 				



Link to Public Health Wales Strategic Plan

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to the following:

Strategic Priority/Well-being Objective	1 - Influencing the wider determinants of health
Strategic Priority/Well-being Objective	4 - Delivering excellent public health services
Strategic Priority/Well-being Objective	5 - Supporting a sustainable health and care system

Summary impact analysis

Equality and Health Impact Assessment	Not Applicable.
Risk and Assurance	Not Applicable.
Health and Social Care (Quality and Engagement) (Wales) Act	A number of the areas of activity planned have the potential to improve the quality of services, both with PHW and across NHS Wales.
Financial implications	There may be some financial implications identified as plans are further developed. This will be kept under review.
People implications	Not Applicable.



1. Purpose / Situation

This paper provides an update to the Quality, Safety and Improvement Committee on Public Health Wales' coordinated response to winter planning for 2025/26. It summarises organisational activity undertaken to prepare for and manage winter pressures, and presents the lessons learnt from establishing a centralised, cross-directorate winter programme.

Insights generated through individual programmes of work—such as vaccination delivery, IPC guidance, behavioural science, and communications—have been systematically captured and are now being used to inform planning for the 2026/27 winter period. The Committee is asked to receive assurance on progress and on how learning is being embedded into forward planning across the organisation.

Positive feedback on the centralised coordination model has identified the need for ongoing support of this type for future planning. Next steps include the adoption of a shared information-exchange model to improve cross-programme visibility, foster collaboration, and ensure a coherent organisational position for different workstreams now starting to engage in future planning.

2. Background

The Winter Pressures Programme was commissioned by the Chief Executive to co-ordinate activity across Public Health Wales, monitor progress, and enable the efficient provision of updates to Welsh Government on short notice given the wider policy focus on this area. Monthly cross-organisational meetings commenced in September 2025.

This is the third update provided to QSIC, aligned with the defined assurance cycle covering early planning, in-season activity, and end-of-season review.

3. Lessons Learned

A structured lessons-learned exercise was undertaken via a Microsoft Form circulated to members of the Winter Pressures Working Group. Responses were collated into a central log and analysed to identify themes relevant for future planning.

Two overarching themes emerged:

1. Benefits of a Centralised, Coordinated Approach

Feedback consistently highlighted that the centralised model delivered:



- improved visibility of winter activity across programmes
- earlier and more coherent planning cycles
- clearer communication channels and shared situational awareness

Workstream leads reported that planning could have benefitted from starting even earlier, and this insight is being incorporated into the 2026/27 planning timeline.

As a result of this positive feedback, winter planning for 2026/27 will be undertaken collaboratively across programmes using a shared information-exchange framework. This aims to strengthen alignment, avoid duplication, and ensure that insights from each programme directly shape organisational priorities.

2. Programme-Specific Insights Informing Future Planning

The lessons-learned process generated important programme-level insights that are now being actively incorporated into forward plans. Key examples include:

Staff Flu Vaccinations

- Clinic availability was constrained by occupational health capacity and staff sickness, leading to cancellations and the need for January “mop-up” clinics.
Learning: earlier scheduling and diversified delivery options will be explored for 2026/27.
- Data quality for staff vaccination uptake remains limited due to GDPR-related data-sharing issues.
Learning: a revised data-collection and governance approach will be developed with Health Boards.
- Flu champions were positively received and identified as a mechanism for early conversations with staff.
Learning: the role will be strengthened and deployed earlier next season.

Community Vaccinations

- Digital flu vouchers were well received and uptake exceeded expectations.
Learning: increased procurement volumes will be built into 2026/27 plans.
- Gaps in GP awareness of antiviral prescribing pathways were reported.
Learning: proactive engagement, including a pre-season webinar with All Wales GPs, is being planned.
- Vaccination reporting remains vulnerable to human error.
Learning: options to automate or simplify reporting processes will be reviewed.



Communications and Partnership

- The working group structure helped the Communications team understand organisational priorities and shape aligned messaging.
Learning: a dedicated winter communications lead will be appointed for 2026/27.
- The Winter Wellbeing paper should form the foundation for seasonal communications planning.
Learning: early planning and joint messaging with Health Boards and Welsh Government will be prioritised.
- Partners appreciated parallel forecasting work undertaken by Public Health Wales and Welsh Government, though clarity on WG expectations was sometimes lacking.
Learning: earlier, formalised communication channels will be established.

Strengthened Cross-Workstream Planning for 2026/27

Reflecting both internal and external feedback, Public Health Wales will adopt a formalised cross-workstream planning model for the 2026/27 winter season. This approach will:

- integrate programme insights from this year's lessons-learnt work
- ensure workstreams collectively agree priorities, dependencies, and timelines
- promote consistent organisational messaging
- reduce duplication and inefficiency
- enhance readiness through earlier planning cycles

Information-sharing, previously identified as a key enabler of success, will be embedded as a standing component of winter preparedness governance.



4. Well-being of Future Generations (Wales) Act 2015

This work has been put together following the five ways of working, as defined within the sustainable development principle in the Act, in the following ways:

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Hirdymor **Long Term** *The programme addresses long-term health outcomes by focusing on upstream prevention (e.g. fuel poverty, falls prevention).*
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Atal **Prevention** *Emphasis is placed on reducing avoidable admissions and health deterioration through vaccination, IPC, and community-based interventions.*
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Integreiddio **Integration** *The programme aligns with national health and social care objectives and supports cross-sector collaboration.*
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Cydweithio **Collaboration** *Developed through engagement with internal directorates and external partners including Welsh Government, health boards, and local authorities.*
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Cynnwys **Involvement** *Informed by lived experience research (e.g. housing and warmth studies) and behavioural insights to shape public messaging and service design.*

5. Recommendation

The Committee is asked to:

- **Receive assurance** that lessons-learnt activity has been undertaken and that insights—both system-wide and programme-specific—are being incorporated into planning for the 2026/27 winter season.
- **Note** that, in response to positive feedback, Public Health Wales is enhancing its collaborative approach, with workstreams jointly planning future winter activity and adopting improved information-sharing mechanisms.

Appendix One

Winter Pressures 2025

HPSS Directorate Operations Team

Directorate	Division / Programme	Summary of Activity	Planning / Timeline	Intended Impact
HPSS	HARP	Updated ARI IPC guidance for winter; no major changes required.	Aug–Sept	Up-to-date IPC guidance for consistent winter response.
HPSS	HARP	Provision of IPC guidance and support to NHS Wales.	Continuous	Improved infection prevention across care settings.
HPSS	HARP	Participation in WG winter preparedness and PPE meetings.	Ongoing	Stronger system coordination and situational awareness.
HPSS	HARP	Collaboration with NHS P&I on HCAI reduction and AMR improvement.	Ongoing	Better QI outcomes and reduced HCAs.
HPSS	HARP	Summer IPC Forum delivered.	June 2025	Shared learning informing winter planning.
HPSS	HARP	UTI & deterioration webinar series.	Sept 2025	Improved community capability to avoid admissions.
HPSS	HARP	Advisory note to WG on WHC for HCAI/AMR goals.	Ongoing	Supports national quality improvement direction.
Operations & Finance	Communications	National flu vaccination campaign.	Sept 2025– Early 2026	Higher uptake and improved targeting of lower-uptake groups.
Operations & Finance	Communications	Preventative behaviours campaign.	Oct–Feb	Reduced respiratory illness transmission.
RDD + Others	Data Science	Updated 2018 Winter Health Report.	May–Nov 2025	Updated evidence base for partners.
NQIG	—	Staff flu vaccination programme.	Jul–Oct 2025	Higher staff uptake; improved access routes.
NQIG	—	Development of mask use trigger guidance.	Autumn 2025	Clear, timely escalations reducing infection spread.
NQIG / HWB	Core Group	Falls-prevention system approach.	From June 2025	Fewer falls, improved independence.
HWB	Help Me Quit	Staff training, app launch, new campaign.	Q3	Increased smoking cessation engagement.
HWB	NERS	Promotion and adherence improvements.	Evidence review + Oct	Improved NERS completion and physical health.



Directorate	Division / Programme	Summary of Activity	Planning / Timeline	Intended Impact
HWB	PCD Prevention	Warm Wales evaluation; financial wellbeing review.	2025–2026	Better understanding of winter health and financial risks.
HWB	Greener Primary Care	Climate resilience framework for primary care.	Ongoing	Improved preparedness for adverse weather.
HWB	Nutrition & Obesity	Updated winter health content.	Aug–Nov 2025	Improved winter health behaviours.
Policy & International Health	Specialist Projects	Low-income household winter conditions report.	Autumn 2025	Evidence for fuel-poverty and housing policy.
Policy & International Health	Behavioural Science Unit	Updated winter preventative health report.	Early Autumn 2025	Behaviour-informed actions to reduce pressures.
Policy & International Health	Behavioural Science Unit	Flu vaccination intervention planning with HBs.	Awaiting scheduling	Better-designed interventions for staff uptake.
HPSS	VPDP	Enhanced real-time flu surveillance using WIS.	Sept–Nov	Accurate uptake monitoring; VE contribution.
HPSS	Health Protection	Winter surge capacity and business continuity plan.	Ongoing	Safe management of seasonal demand.