# WRITTEN STATEMENT

# BY

# THE WELSH GOVERNMENT

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| **TITLE**  | **Six goals for urgent and emergency care and expectations for the system** |
| **DATE**  | **22 July 2021** |
| **BY** | **Eluned Morgan MS, Minister for Health and Social Services** |

I am pleased to update Members on our strategic plans for transforming access to urgent and emergency care, and our expectations of Health Boards, NHS Trusts and Regional Partnership Boards.

In line with Programme for Government commitments to provide effective, high quality and sustainable healthcare focused on prevention, integration, and access, we are committed to the provision of urgent and emergency care services in the right place, first time.

The pandemic has had a profound impact on society and on the NHS in Wales. COVID-19 will be with us for some time to come, so we must learn to live and work alongside it for the foreseeable future. The pandemic has also led to opportunities to improve the way in which we work, with greater use of technology and stronger collaboration.

We want the system to build on these developments in enabling people with urgent or emergency care needs to access the right treatment at the right time, in the right place.

This could be through a community pharmacy; video consultation with a GP – a model that has proven to be effective and will be enhanced / adopted further; accessing a minor injuries unit; the NHS 111 Wales website for symptom checkers and online advice; or dialling 111 for telephone advice. We are asking people who think they have an urgent care need to *help us, help you* by thinking about accessing these services before presenting at an Emergency Department or dialling 999.

We have developed ‘six goals for urgent and emergency care’ as expectations for the health and social care system, and to enable delivery of our Programme for Government commitments. Delivering all ‘six goals’ consistently and reliably through whole-system collaboration between Health Boards, NHS Trusts and Regional Partnership Boards, and partners across public services and the third sector, should enable optimal patient and staff experience, clinical outcomes and value.

Our ‘six goals for urgent and emergency care’ are:

1. Coordination, planning and support for people at greater risk of needing urgent or emergency care

2. Signposting to the right place, first time

3. Access to clinically safe alternatives to hospital admission

4. Rapid response in a physical or mental health crisis

5. Optimal hospital care following admission

6. Home-first approach and reduce risk of readmission

We will publish a ‘six goals’ policy handbook in the new term which will incorporate quality statements framed by each of the ‘six goals’. The quality statements will describe in detail the outcomes and standards individuals should expect when they may need urgent or emergency care.

This will include an expectation of Health Boards, NHS Trusts and Regional Partnership Boards to place greater emphasis on supporting independent living and well-being to prevent escalation of care to urgent primary care, ambulance, Emergency Department and hospital services.

It will also describe how we will enable delivery of the six goals through targeted national programmes, additional funding and enablers like digital change; workforce training and development; measurement for improvement; and behaviour change, communications and marketing.

£25m recurring national funding will support Health Boards and NHS Trusts to deliver the ‘six goals’. Some of this additional funding will support the development of three models of care alongside a range of other actions:

* + A national ‘111 First’ model – to signpost via 111 people who believe they need to access urgent or emergency care services to the right place, first time. This will include an enhanced online offer, seek to better manage demand in the community or schedule people into arrival time slots at the best place for their needs.
	+ ‘Urgent Primary Care Centres’ – to safely assess or treat people with urgent primary care needs quickly and effectively without the need for a GP appointment or presentation at an Emergency Department, enabling staff in those services to focus on people with complex or emergency care needs respectively; and
	+ ‘Same Day Emergency Care’ services to support people who need a face-to-face assessment, diagnostics and / or treatment to return home on the same day where it is clinically safe to do so.

Delivering these models reliably and providing safe care in the right place, first time should help to reduce pressures on GMS and Emergency Department staff. Given the ongoing challenges of the pandemic and the prospect of a difficult winter, this should be considered a priority by Health Boards.

This funding will complement £6m funding made available for Regional Partnership Boards in 2021/2022 for consistent delivery of ‘discharge to recover then assess’ pathways as part of a ‘home first approach’ to optimise outcomes and experience for people who have been admitted to hospital and need some additional support on their return to their local communities. Delivering these pathways consistently and reliably ahead of and during the winter period should be considered a priority by Regional Partnership Boards.

We will also establish a new national programme within the urgent and emergency care portfolio to support Health Boards and Regional Partnership Boards to deliver ‘goals five and six’. These goals focus on optimal hospital care from the point of admission and enabling people to return home from hospital when they are ready. We will seek to learn lessons from our successful COVID-19 vaccination approach to support consistent delivery in a programme led by the NHS Wales Delivery Unit in collaboration with partners.

Given the ongoing and exacerbated pressure on the urgent and emergency care system and the associated risk of harm to patients and staff, it is essential Health Boards, NHS Trusts and Regional Partnership Boards prioritise and accelerate delivery of the ‘six goals’ and the key actions I have described.

It is imperative all Health Boards, NHS Trusts and Regional Partnership Boards make concerted and rapid progress over the summer period. This will benefit the health and social care system and the quality of care provided as we approach winter.

I will update Members on progress and our broader winter delivery approach following the summer recess.

This statement is being issued during recess in order to keep members informed. Should members wish me to make a further statement or to answer questions on this when the Senedd returns I would be happy to do so.