# WRITTEN STATEMENT

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# THE WELSH GOVERNMENT

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| **TITLE** | **Update on the Quality Statement for Respiratory Disease** |
| **DATE** | **23 February 2024** |
| **BY** | **Eluned Morgan MS, Minister for Health and Social Services** |

The Quality Statement for Respiratory Disease was published in October 2023 and sets out our expectations about how NHS services for common respiratory diseases, such as COPD and asthma, should be planned and delivered across Wales. It can be found at: [Quality statement for respiratory disease](https://www.gov.wales/quality-statement-respiratory-disease-html)

As set out in the National Clinical Framework, quality statements will be used by health boards and NHS trusts to support the consistent planning and delivery of high-quality healthcare services. The NHS planning framework requires all NHS organisations in Wales to use them in their strategic and operational planning processes. This is intended to ensure national expectations related to service quality are embedded in local planning processes.

The NHS Executive has established a national strategic network for respiratory conditions, which brings together expert clinicians from across Wales to improve service quality and provide expert advice about the delivery of respiratory care. The network oversees the national respiratory audit programme, which provides benchmarked data about the quality of respiratory disease care.

Wales is the only country in the UK to have a clinical audit programme for respiratory care delivered in primary care – this reflects a deliberate decision to focus on routine chronic condition management. The data is available on a monthly basis to health boards in Wales and is used to support service delivery.

The network has developed a digital platform to support NHS clinicians across Wales to deliver consistent, good-quality respiratory care. It includes extensive healthcare professional education across a range of conditions, including asthma, COPD, sleep apnoea, bronchiolitis, community-acquired pneumonia, tuberculosis and Covid-19 and interventions. These national pathways, guidelines and professional educational resources have been linked to improvements in healthcare delivery.

An example of how this new approach is working are the national pathways the network has put in place for COPD and asthma care. These set out advice on inhaler prescribing and supports better prescribing and a move away from the use of inhalers, which have an impact on climate change and global warming. Data shows Wales is ahead of the rest of the UK in the move to the use of inhalers which have a lower impact on climate change and global warming.

The NHS Wales respiratory toolkit has received support from professional bodies and won UK-wide awards.

Another example is how this new way of working supports transformation and recovery in NHS service delivery. Access to spirometry, a vital lung function test used in the diagnosis and managing of conditions such as COPD and asthma, has been variable across Wales for many years. The respiratory quality statement sets out the expectation this test should be available in the community to everyone over 12 who needs it. The network is working with health boards on their plans to improve provision of this vital lung function test. Work is also underway to integrate the testing devices with national digital systems so the results are automatically uploaded to a person’s clinical record and available to their clinicians.

Finally, the network has overseen the development and implementation of self-management support apps, which are being used by around 16,000 people with asthma (including children and young people) or COPD. There is emerging evidence these apps may support better disease management and reduce the use of NHS services. Health boards are working to evaluate the impact of the respiratory disease toolkit and its apps to determine their role in the future of NHS care.