

IMPROVING AMBULANCE CARE CLOSER TO HOME

Llais recently heard from the Welsh Ambulance Services NHS Trust (WAST) about how they're improving care for people in the community.

WAST is working closely with health boards to support people at home and reduce unnecessary hospital visits. This includes faster on-site care for urgent needs, help with evening and weekend discharges, and new care pathways to ease pressure on hospitals. A new digital platform, Civica, is supporting this work.

They've also introduced Advanced Paramedic Practitioners in Blaenau Gwent (highly trained paramedics), who can treat people at home or in GP surgeries, even prescribing medication when needed.

When someone calls 999, WAST now uses Rapid Clinical Screening to match each patient with the right kind of support—whether that's an emergency crew, a welfare responder, or a referral to a local health team.

WAST is also investing in Community Welfare Responders, who visit patients at home, provide real-time care and advice, and check in with clinical teams.

In mental health emergencies, a special response vehicle with a clinician and technician provides in-person care, to support both mental and physical health.

These changes show WAST's commitment to putting patients first and making sure people get the right care, in the right place, at the right time.



LLAIS REPRESENTATIONS MADE

Are families contacted before vulnerable patients are sent home from hospital?

WAST stated that contacting families before patients are sent home from hospital is part of Aneurin Bevan University Health Board's (ABUHB) discharge procedures. They explained that even though the responsibility for hospital discharge often falls outside the remit of WAST, they recognise the importance of their role in improving communication. This includes developing closer links with social services, who frequently become involved after patient discharge.

What happens if no paramedics are available when someone calls an ambulance?

WAST clarified that each call is reviewed by a clinician who determines the most appropriate response based on the individual's needs. This may include dispatching a Community Responder, St John's Ambulance, a Welfare Responder, a Paramedic, or a Rapid Response Vehicle. Once the individual is stabilised, they are referred to the most appropriate ongoing care service, such as a GP or community health team.

How are these changes affecting WAST's other work?

WAST explained that they are shifting focus from response times alone to the broader quality of care delivered. Although the 8-minute response benchmark has been a traditional metric, WAST is now working to set clearer, more meaningful goals with input from their quality team and clinical leaders. The aim is to improve overall care outcomes and provide a more holistic approach to service delivery.

