

## Cafodd yr ymateb hwn ei gyflwyno i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Flaenoriaethau'r Chweched Senedd](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Sixth Senedd Priorities](#)

### HSC PSS 37

Ymateb gan: | Response from: [Senedd Pobl Hŷn Cymru](#) | [Welsh Senate of Older People](#)

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## Blaenoriaethau cychwynnol a nodwyd gan y Pwyllgor Initial priorities identified by the Committee

Mae'r Pwyllgor wedi nodi nifer o flaenoriaethau posibl ar gyfer ei waith yn ystod y Chweched Senedd, gan gynnwys: iechyd y cyhoedd a gwaith ataliol; y gweithlu iechyd a gofal cymdeithasol, gan gynnwys diwylliant sefydliadol a lles staff; mynediad at wasanaethau iechyd meddwl; arloesi ar sail tystiolaeth ym maes iechyd a gofal cymdeithasol; cymorth a gwasanaethau i ofalwyr di-dâl; mynediad at wasanaethau adsefydlu i'r rhai sydd wedi cael COVID ac i eraill; a mynediad at wasanaethau ar gyfer cyflyrau cronig tymor hir, gan gynnwys cyflyrau cyhyrsgerbydol.

The Committee has identified several potential priorities for work during the Sixth Senedd, including: public health and prevention; the health and social care workforce, including organisational culture and staff wellbeing; access to mental health services; evidence-based innovation in health and social care; support and services for unpaid carers; access to COVID and non-COVID rehabilitation services; and access to services for long-term chronic conditions, including musculoskeletal conditions.

### **C1. Pa rai o'r materion uchod ydych chi'n credu y dylai'r Pwyllgor roi blaenoriaeth iddynt, a pham?**

**Q1. Which of the issues listed above do you think should be a priority, and why?**

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Frontline health services must continue to be available in communities. A lack of GPs and nurse practitioners causes delays in accessing appointments and vital services for older people. Similarly, local pharmacies and pharmacy-delivered services must be retained to ensure that older people have access in their communities.

Hospital transport must be improved. Older people often experience difficulties owing to issues with non-emergency ambulance services and a lack of public transport routes to hospitals and health centres.

Older people must be treated with dignity, which includes being fully informed and involved regarding testing and treatment.

The care sector must be professionalised. Higher wages, professional training and a clear career path will encourage workers to choose the care sector and will improve the level of care provided.



Health and care services should be integrated. This will enable a clear pathway for users and professionals, providing an improved service and reducing the chance of older people's physical and mental health deteriorating.

## **Blaenoriaethau allweddol ar gyfer y Chweched Senedd**

### **Key priorities for the Sixth Senedd**

**C2. Yn eich barn chi, pa flaenoriaethau allweddol eraill y dylai'r Pwyllgor eu hystyried yn ystod y Chweched Senedd mewn perthynas â:**

- a) gwasanaethau iechyd;**
- b) gofal cymdeithasol a gofalwyr;**
- c) adfer yn dilyn COVID?**

**Q2. In your view, what other key priorities should the Committee consider during the Sixth Senedd in relation to:**

- a) health services;**
  - b) social care and carers;**
  - c) COVID recovery?**
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#### **Gwasanaethau iechyd**

##### **Health services**

The COVID restrictions have reduced access to frontline services in communities, especially for older people who are digitally excluded. Remote consultations present certain advantages in terms of time saving and convenience for those who are able and comfortable to access services in this way, but for many, face-to-face consultations are the only option. As we move out of the restrictions, a blended approach is essential, with the emphasis on the best option for each service user – remote consultations must not be the default.

Frontline services in communities are essential for older people to easily access healthcare. There must be a focus on investment to ensure sufficient GP and nursing cover in surgeries and health centres, as well as working more closely with community pharmacies to provide the necessary accessibility for all.

Transport must be improved, in particular, non-emergency ambulance services to enable older people with mobility issues to access essential health services. Many hospitals and health centres are not well-served by public transport, forcing older people to use taxis or to rely on friends and family in order to attend appointments.

#### **Gofal Cymdeithasol a gofalwyr**

##### **Social care and carers**

Health and care services must be integrated. Too often, older people are pushed from pillar to post, unable to access a clear care pathway.

The care sector must be fully professionalised. Currently, there is a high turnover of care staff, a lack of quality training and inequality in the standards of care received. A clear career path, higher

pay and access to training and professional qualifications would improve conditions for workers, raise standards of care and ensure staff retention.

NHS dignity standards should be adopted and maintained across the care sector.

## **Adfer yn dilyn COVID**

### **COVID recovery**

There must be an emphasis on providing more services in communities to ensure accessibility for all. Information on services available and which is the most appropriate must be widely available in all formats. The COVID pandemic has pushed information, advice and many services to online only, which has left digitally excluded older people isolated, unable to access the support and services that they need.

The pandemic has provided new opportunities for technology to improve access to health and care services, but advances must not be made at the expense of those who are unable to access online services. Moving forward, a person-centred approach must be adopted, focusing on the needs of the individual, not the convenience of providers.