[Hansard](https://hansard.parliament.uk/) Services and National Heatwave Emergency

Ambulance Services and National Heatwave Emergency

Volume 718: debated on Wednesday 13 July 2022

JUL

**[Wes Streeting - (Ilford North) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4504)**

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*(Urgent Question):*To ask the new Secretary of State for Health and Social Care if he will make a statement on ambulance services and the declaration of a national heatwave emergency.

**[The Minister of State, Department for Health and Social Care - (Maria Caulfield)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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Our ambulance service performs heroics every single day, and I put on the record my thanks to every single one of its staff for their dedication and hard work. We have a duty to support this vital service and give it the resources it needs.

The latest figures from the NHS in England show that ambulance service response time performance has improved month on month, and that ambulance hours lost are also improving month on month. However, we fully acknowledge the rising pressures facing the service, and there are three significant factors influencing the situation. First, bed occupancy is currently around 93%, which we would normally see during winter. Secondly, there are high rates of hospital covid admissions—whether “with covid” or “because of covid”—and that puts pressure on A&Es’ ability to admit patients. Thirdly, void beds are running at roughly 1,200, partly due to a 16% increase in the length of stays. Delayed discharges are another significant influence, but they remain flat. We also have record numbers of calls to the ambulance service—100,000 more compared with May last year. There is therefore significant pressure on the system.

We also have to be mindful of the weather in the coming days. We do have a heatwave plan for England, which was published earlier this year—I am sure the hon. Gentleman has read it—and we also have the hot weather plans that NHS trusts have put in place. In addition, we are providing sector-specific guidance setting out the best way to protect people who may be at risk. We are also supporting the service more widely to make sure it has the resilience it needs. We have allocated £150 million of extra funding for the ambulance service this year, and we are boosting the workforce too. The number of national 999 call handlers had risen to nearly 2,300 at the start of June, which is a considerable increase on the previous September, and we are on track to train 3,000 paramedic graduates a year nationally every year until 2024. On top of this, we have invested £50 million in NHS 111 to help give extra capacity to the service.

I will be meeting all 11 ambulance trusts over the coming days to make sure that they have the capacity and the resilience they need not just to deal with the pressures now, including with the warm weather, but to prepare for the forthcoming winter pressures that we know are inevitable. This is an important issue that I take extremely seriously, and I will keep the House updated as the situation develops.

**[Wes Streeting](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4504)**

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Thank you, Mr Speaker, for granting this urgent question, but what a disgrace that the Secretary of State is not here. Our NHS is going through the biggest crisis in its history, every ambulance service is on the highest level of alert, patients are forced to wait hours in pain and discomfort, and he is yet to say a

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word about any of it. The Home Secretary was not at the Home Affairs Committee this morning, and the Health and Social Care Secretary is not here this afternoon. This is not even a Government in office, let alone in power.

One person who is still in office, however, is the Minister. Her boss resigned saying he could not put loyalty above integrity any longer. Well, the Minister obviously made a different choice. Can she say whether any further meetings of Cobra are scheduled beyond the meeting held on Monday? As we saw during the pandemic, public health emergencies require clear communication from Government. Can she tell the House what the consequences of a national heatwave emergency would be for schools, public transport services and other public services, and what guidance will be provided to the general public? What assessment has she made of the suitability of care homes to protect residents from the extreme heat, and what contingencies are in place should further measures be necessary?

Every ambulance service is now on the highest level of alert, so what is the Secretary of State doing about it? The Minister talks about targeted help for ambulance services—she is going to be hitting the phones this week; presumably the Secretary of State is too busy—but, as I think she acknowledged, this is a crisis across the health service. Last month, a crew in the west midlands waited 26 hours outside A&E because clinical staff were not available to hand over to. What are the Government doing to provide additional support to A&Es during this heatwave? These pressures are not new. Average waiting times for stroke and heart attack victims are one hour. Patients in the north-east were told to phone a friend or call a cab rather than rely on emergency services. Is it not the case that, although extreme weather is of course putting further pressure on our emergency services, it is 12 years of Conservative underfunding that has left them unable to cope?

In conclusion, if people such as the Home Secretary and the Health Secretary cannot be bothered to turn up to do their jobs and are not interested in the business of running this country because they are too busy making endorsements for fantasy candidates with far-fetched promises, perhaps it is time they step aside so that Labour can give Britain the fresh start it needs.

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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Can I say how disappointed I am at the Shadow Secretary of State’s response? If he is not happy that a female Minister with over 20 years’ experience in the NHS is able to answer a question on NHS waiting times, I find that very disappointing.

As I said in the debate a few weeks ago, I do not want to bring politics into health because I think it is too important, but if the shadow Secretary of State wants to play politics, I will give him politics. If we look at Wales, where Labour runs the NHS service, we see that the ambulance service and A&E departments are facing exactly the same pressures. Only 51% of red calls in Wales are being seen in eight minutes; the target is 65%. If he looks at the call time for strokes, he will see that only 17% of those people are being seen in time. Those numbers are falling month on month, whereas in England our responses are improving month on month. On the four-hour wait in A&E in Wales, 34.9% of people have been seen within four hours.

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*indicated dissent.*

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The hon. Gentleman shakes his head, but he stood at the Dispatch Box just now and said that Labour would do better. It is not doing better in Labour-run Wales; it actually has either similar response times or worse response times.

I have set out a plan. It is clear that the hon. Gentleman has not read the heatwave plan for England, which was published earlier this year, because he would have the answers there. We are making sure that all NHS trusts are prepared. I am happy to work with each and every Member across this House to make sure that the ambulance service, our A&Es and hospital trusts have the support that they need, but if all he wants to do is play politics, I think that is extremely sad.

**[Mark Pritchard - (The Wrekin) (Con)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=1576)**

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Would the Minister like to put on record her thanks to all the hard-working ambulance crews of the West Midlands Ambulance Service, particularly those working throughout the county of Shropshire? Does she agree with me that this is not just about ambulances, but about local authorities—in my case, Shropshire Council and the borough of Telford and Wrekin—working alongside acute trusts such as the Shrewsbury and Telford Hospital NHS Trust? A collective effort is required, not a single effort by a single ambulance service.

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I thank my right hon. Friend, who is absolutely right, because a number of factors are influencing the wait times at A&E. While delayed discharges are not increasing, there are still a significant number of them, which means that the NHS and local authorities have to be working together. That is why we have created the integrated care boards, which Opposition Members voted against, to better co-ordinate care between health and social care so that we can have better systems in place to discharge patients sooner. As I have said, we have 1,200 void beds, which is either due to infection control measures because of covid rates increasing or because patients cannot be discharged. I will be meeting every single ICB in the coming days, because as part of our winter preparation, we need to improve co-ordination in those areas.

**[Daisy Cooper - (St Albans) (LD)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4769)**

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Last October, I revealed through a parliamentary written question that every ambulance service in England was at the highest alert level. We are now nine months on, and we are in that situation again. We are facing warnings of extreme weather this weekend. The Government need to reinstate the funding for discharge packages into social care homes. We need primary care to be used to stabilise people in communities, and we must be using first responders from the fire service. Will the Minister agree to convene an urgent meeting of Cobra today to protect patients and paramedics, who are really operating at the brink?

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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I say to the hon. Lady that we have put additional investment this year—over £150 million of extra funding—into ambulance services to help them meet demand, because they do have significant demand. The rates we are seeing at this time of year are the sorts of rates we would normally see in winter, and we are doing exactly as we would then. We have our heatwave

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plan, which was published earlier this year, and we are confident that we are working with all NHS trusts, and all the ambulance trusts too, to make sure they have the support they need. Can I gently say to her that this is not just about funding? This is about bringing care together to ensure that hospital beds are freed up so that when ambulances arrive at A&E they can unload their patients. As I said to the shadow Secretary of State—I am not sure if he is going to take me up on this—I am happy to work with every single Member across this House to make sure that we support our emergency services.

**[Scott Benton - (Blackpool South) (Con)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4793)**

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I welcome the reassurance the Minister has provided regarding capacity and resilience planning over the coming weeks. A&E services at Blackpool Victoria Hospital have been under significant pressure of late, and the planned £15 million Government-funded improvements to increase capacity there frankly cannot come soon enough. Will the Minister meet me to discuss the progress of these plans to ensure that patients can see the benefits as soon as possible?

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I thank my hon. Friend, who has been campaigning vigorously for better healthcare provision in his local area. I am very happy to meet him to discuss those plans, and I recognise that there is an urgency about that. I can reassure him that six areas of the country account for about a third of the handover delays, and we are specifically focusing our efforts on them. This is about relieving the pressures in the system, whether through more capacity at A&E so that patients can be seen more quickly once they arrive by ambulance, or support for the ambulance service itself. I am very happy to meet him to discuss the problems in his local area.

**[Grahame Morris - (Easington) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=3973)**

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Despite the promises and assurances that the Minister set out in the heatwave plan and in her response, I am very disappointed that previous promises made in the House by the Minister, that she would speak with North East Ambulance Service whistle-blower, Paul Calvert, my constituent, have not been honoured. If Ministers will not engage with those who identify ongoing problems and learn lessons to fix our failing ambulance service, how can we expect the ambulance service to respond to an acute crisis such as the current heatwave?

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The North East Ambulance Service is one of three areas of concern in terms of performance. I reassure the hon. Member that I have met the families, and offered other families a meeting, to discuss the matter. In relation to his constituent, there is a tribunal ongoing. It is difficult for me to meet him while that is ongoing. Once that is over, however, I would be happy to meet his constituent to discuss the issues that he raised as a whistle-blower.

**[Theresa Villiers - (Chipping Barnet) (Con)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=1500)**

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The Minister will be aware that the chances of recovery for those who suffer a stroke are greatly improved if they get specialist care within the first half hour, 45 minutes or so. So will she do everything she can to address administrative blockages and other delays, to ensure that people get the chance of life-saving treatment at the earliest possible stage?

Column 339is located here

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Yes, and I thank my right hon. Friend for raising that point. Different response times are required, depending on the reason for the call. Strokes would be a C2 emergency, for which the target is 18 minutes. The latest figures we have are from May, when we were performing better than in April. The figures are not where we want them to be, but we are seeing month-on-month improvements. For C1 and C2 cases, which need urgent treatment as soon as possible, particularly for strokes, every minute counts and we want to see further improvements in those times.

**[Barbara Keeley - (Worsley and Eccles South) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=1588)**

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The *Manchester Evening News* is reporting that the North West Ambulance Service has raised its operational pressure level to “critical incident” level, which indicates a potential for failures as ambulance services try to cope with extreme pressure. A&E departments at the Royal Bolton and Stepping Hill Hospitals have admitted that they are extremely busy, with long queues of ambulances at some times. The Minister did not even mention social care in her response, which we know is so broken that it adds to delays and discharges. Twelve years of Conservative mismanagement and neglect have left those services, on which my constituents rely, so vulnerable. What does the Minister have to say to the patients suffering as a result?

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I am sorry that the hon. Lady did not hear my response. I specifically mentioned social care as well as the integrated care boards that we have set up to bring health and social care together—I think Labour Members voted against that. As I said, one factor affecting ambulance delays is the bed occupancy issue. Part of that—not all of it—is about delayed discharges and lengths of stay are 16% higher. We have a plan for fixing social care and it is unfortunate that Labour Members voted against it.

**[Alex Chalk - (Cheltenham) (Con)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4481)**

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Cheltenham General Hospital’s A&E was saved from a trust plan to close it, thanks to the fantastic support of more than 20,000 of my constituents. Does my hon. Friend agree that, in addressing the enormous challenge of the demands we face, capacity is important as well as flow through the system? In the light of that demand, the decision of the trust, and indeed the Government, to keep Cheltenham’s A&E open has been vindicated.

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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I am pleased that my hon. and learned Friend is already seeing the benefits of the A&E in Cheltenham staying open. He is very modest—I am sure he played a significant part in ensuring that it stayed open. This is absolutely about capacity and there is no magic bullet that will make the pressures on the ambulance and emergency services any easier. This is multi-faceted and capacity at A&E is crucial. I am meeting the ambulance trusts to find out where good practice is making a difference, so we can help to share that across the country.

**[Taiwo Owatemi - (Coventry North West) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4779)**

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In June, a 59-year-old man collapsed in the West Midlands, going into cardiac arrest. Neighbours called an ambulance, but it took 90 minutes for one to arrive—six times longer than it should have taken. Sadly, the man soon passed away. We see this time and again across my region, where ambulance waiting times are among the

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worst in the country. When will the Government provide the much-needed extra support to stop horrific incidents such as that reoccurring?

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I am sorry to hear about the sad death of the hon. Member’s constituent. Her region is one of the six areas that have the worst handover times and at which we are targeting support. I would be happy to meet her and update her on the specific support that we are offering her region.

**[Barry Gardiner - (Brent North) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=146)**

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When discussing ambulance response and waiting times, the Minister kept using the phrase “month-on-month” improvements. Can she specify which months? She will know that it depends on which month you choose as your baseline—if it was the worst month in recorded history, it is not difficult to show month-on-month improvements.

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When we look at our figures, of course we look month on month, but we also compare them with previous years. As I said in my opening remarks, we are seeing an increase in calls—over 100,000 more compared with May 2019. The hon. Member shakes his head, but those are the facts. We are comparing month on month and comparing with previous years. We are seeing an improvement in response times and in the amount of ambulance hours lost to ambulances queuing at A and E.

**[Chi Onwurah - (Newcastle upon Tyne Central) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4124)**

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Of the 22,000 people who visited Newcastle’s Royal Victoria Infirmary A&E in May, 13%—more than 3,000 people—faced a wait of more than four hours. In the last month, people were facing waits of seven hours, and constituents with rapid heart fluctuations were told that they faced a wait of 11 hours for an ambulance and that they needed to get a cab. Is not it negligent of the hon. Lady’s Government to leave our NHS unable to protect my constituents, particularly facing a heatwave, and what is she going to do to ensure that they have the resources necessary?

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As I explained in answer to the shadow Secretary of State, these are problems facing all devolved nations. I highlighted the four-hour waits in Wales, but in Scotland there are similar pressures—in Ayrshire there is a three-hour wait. These problems are not specific to any one Government. I have set out what we are doing to help all ambulance trusts and regions of the country. We have put in funding to support the ambulance service and to support NHS 111 to try to take some pressure off the ambulance service.

We are looking at the novel approaches that in some parts of the country are working well—whether that is having GPs in A&E to try to take pressure off people who are waiting a long time or having paramedics in GP surgeries. Whatever works we will look at, to help to take pressure off the system.

**[Tony Lloyd - (Rochdale) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=450)**

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Rochdale is especially vulnerable because its A&E was closed many years ago. It means people are dependent on an ambulance service that is not in crisis because of the heatwave; it has been in crisis for some considerable time. We do not need blandishments. Why does it take a crisis for the Minister to come before the House to explain what has not yet happened?

Column 341is located here

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We are not waiting for a crisis. I have set out the funding that we have put in place this year—£150 million extra funding for the ambulance service—and highlighted how we are boosting the workforce. In case the hon. Gentleman did not hear my opening remarks, there were nearly 2,300 more 999 call handlers at the start of June, and we have invested £50 million in NHS 111 capacity, to help us reduce demand. We have been doing this. There will be pressures on the ambulance service and our emergency services at times. We saw that with covid and the heatwave this week will put pressure on the NHS. There will also be pressures in winter. Opposition Members may think there is some magical way to avoid pressures, but there is not. We need to provide resources and capacity to ensure that the service can meet that demand.

**[Hilary Benn - (Leeds Central) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=413)**

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Further to the question about strokes, as we know, every minute counts. The Minister just told the House that in not every case is the ambulance response meeting the 18-minute time that she said is the target. Given that, what advice would she give to members of the public who think that a loved one has had a stroke? Should they ring 999 and hope that the ambulance will turn up within the 18 minutes? If not, should they put the person in a car or taxi and take them to A&E? When they arrive at A&E and say, “I think my loved one has had a stroke”, what confidence might they have that they will be seen quickly, given that time is of the essence?

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As someone who has suffered a stroke myself, I am very aware of the urgency of seeing stroke patients on time. I am not going to give clinical advice at the Dispatch Box. It is important that, if a person suspects a stroke is occurring, they dial 999 immediately. The ambulance callers will normally stay on the line with that person, advise them on what to do, depending on their symptoms, and get an ambulance to them as quickly as possible. Once they arrive in hospital, if a stroke is suspected, they will be seen immediately—we are not seeing reports of stroke patients being delayed once they are in hospital. It is crucial that those patients are seen urgently, and the advice is to dial 999 and clinical advice will be given to them over the phone.

**[Steve McCabe - (Birmingham, Selly Oak) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=298)**

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The West Midlands Ambulance Service says that it has been at resource escalation action plan 4—the highest level of alert—for several months now, which is almost unprecedented. Has the new Secretary of State spoken to the chief ambulance officer for the west midlands yet about that terrible situation?

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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The hon. Gentleman is absolutely right: ambulance trusts are under record pressures, the sorts of pressures that we would normally expect in winter. We are seeing them in the summer months, which is usually their down time, a fact that is extremely concerning for the months ahead as we head into winter.

As I said, I will meet all 11 ambulance trusts over the coming days. In the first few days of his appointment, the Secretary of State has already been out with ambulance crews to hear from them directly about the pressures they are facing. I hope the hon. Gentleman is reassured that we are both taking the issue extremely seriously.

Column 342is located here

**[Margaret Greenwood - (Wirral West) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4400)**

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This is a situation that my constituents are desperately worried about. We know that ambulance waiting times were not being met before the pandemic, so this problem has a long background to it, as the Minister knows. We also know that there has been a crisis in A&E waiting times, and in my own hospital of Arrowe Park—a hospital in my constituency—in May this year, almost half of patients had to wait more than four hours.

Given that this problem has been a long time in the making, that the Government have known about it, and that one senior leader in the north of the country who does not want to be named has described the situation as “dire” for staff and patients, can the Minister tell us what the Government are going to do as a matter of urgency to sort it? My constituents are desperately worried about this issue. I have constituents who have lost people because of—well, we cannot say “because of”, but in circumstances that have involved very long ambulance waits, so this issue could not be more important to them. I would like an answer about what the Government are going to do urgently.

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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There are two aspects to that question. In terms of urgency, we have procured a contract with a total value of £30 million for an auxiliary ambulance service, which will provide national surge capacity if needed to support the ambulance response during periods of increased pressure. That capacity is there, should we need it.

The hon. Lady also talked about long-term plans. We have been investing in the ambulance service since 2010. I talked about the extra paramedics: we are training 3,000 graduates every year to 2024 in order to increase our capacity. We have also made significant investments in the workforce, with an almost 40% increase since February 2010, so we are improving. Sometimes, those changes take time to come through, but we are investing in the workforce, providing more funding and training more paramedics, and we also have an auxiliary ambulance service procured should we need it.

**[Naz Shah - (Bradford West) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4409)**

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“24 Hours in A&E” used to be a reality TV programme; now, it is Government policy. Can the Minister tell me why this Government have presided over a watering down of standards that will see the zero tolerance for 12-hour waits in A&E and the 30-minute standard for ambulance handover delays scrapped?

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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The reason I am standing at this Dispatch Box is my experience of working as a nurse in A&E under the last Labour Government. I believe it was them who introduced the four-hour target. *[Interruption.]* Does the hon. Lady want to listen to my response? Those targets looked good on paper but were very often just driven as tick-box exercises.

I used to look after patients. I remember an elderly gentleman who was waiting for over four hours on a hospital corridor when I was a nurse under the last Labour Government. He was lying there on his trolley, wanting to go to the toilet, and all we could do was wheel a curtain around him on a busy hospital corridor so that he could do so. That was the experience under the last Labour Government, so I will not take any lectures from Opposition Members about performance.

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**[Matt Rodda - (Reading East) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4654)**

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I urge the Minister to consider the position again - and consider declaring an emergency. I especially want to draw her attention to issues in the South Central Ambulance Service area, where there are long-standing, severe pressures, particularly around recruitment and retention of staff—linked to the high cost of living in central and southern England—and areas of very high house prices where NHS staff pay has not kept up with the local labour market. In particular, I draw her attention to the additional enormous pressure of the heatwave in the south of England and London, where temperatures are particularly high. I hope she will look at this issue on a national basis, but also consider the particular problems that exist in our parts of England.

[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)

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I have set out to hon. Members the work we are doing to increase capacity in the ambulance service, including £150 million in funding, training more paramedics, and increasing the workforce by 40%. We published the heatwave plan for England earlier this year—the shadow Secretary of State, the hon. Member for Ilford North (Wes Streeting), was not sure whether he had read it, but I urge all Members to do so. We are watching this issue on a daily basis. It is not just about the heatwave; it is about covid pressures, enabling hospitals to discharge patients, the winter pressures that will come later this year, and making sure we have resilience in the system.

**[Mary Kelly Foy - (City of Durham) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4753)**

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I have heard from one of my constituents who suffered a stroke and was left to wait for nearly two hours for an ambulance, and is now severely disabled. That issue is being seen repeatedly across the country, so can the Minister tell me what she is doing now, urgently, to make sure that when my constituents in Durham need an ambulance urgently, they get one? The plans she has outlined and the investment she has spoken about are obviously not good enough.

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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We are working urgently on this issue—as, I am sure, are the health services in Wales and Scotland, which are facing the same problems. We are all working hard to address them. As I have said, we have procured a contract with a value of £30 million for an auxiliary ambulance service to increase capacity, should we need it. I will be meeting all ambulance trusts in the coming days to make sure we have the resilience we need, not just to catch up with some of the pressures that existed before covid or to deal with the pressures that those trusts are facing now, but to future-proof them for the coming winter months.

**[Matt Western - (Warwick and Leamington) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4617)**

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Joyce, a 96-year-old survivor of the Coventry blitz, sadly fell in her care home back in April, and lay in agony screaming for 10 hours. At the time of the 999 call, there were 63 people awaiting ambulances, and on that day, over 1,100 hours were lost due to hospital handover delays. Clearly, a major factor in those delays is the handover capacity in our A&E services and in wards. The Government have had 12 years to sort out the issue of social care, so does the Minister support the calls from various leadership candidates to make tax cuts and remove the national insurance increase that was supposed to support social care?

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**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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I am not sure whether that means the hon. Gentleman is now supportive of the social care levy, which is there to pay for improvements to social care. This Government are making those changes and bringing forward the integrated care boards that are bringing health and social care together to deliver on those delayed discharges. I have been very honest: delayed discharges are having an impact on bed capacity and a knock-on effect on our ambulance services. If the hon. Gentleman has changed his mind and now supports the social care levy, I welcome that news.

**[Dame Diana Johnson - (Kingston upon Hull North) (Lab)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=1533)**

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With the greatest of respect to the Minister, I cannot fathom why the Secretary of State for Health and Social Care is not at the Dispatch Box when we are facing such a perfect storm. Given that the Home Secretary failed to turn up to the Select Committee on Home Affairs this morning, may I ask the Minister whether this is the Government’s new approach: that members of the Cabinet no longer turn up to be accountable and so that scrutiny can happen in this House?

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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I can reassure the right hon. Lady that I am the Minister responsible for ambulances, which is why I am standing here at the Dispatch Box. The Secretary of State has been out on visits this morning, meeting clinical teams; it is important that he hears at first hand from those who are on the frontline. I got into politics to make sure that those of us who work on the frontline—*[Interruption.]* The right hon. Lady rolls her eyes; maybe she does not have much respect for those of us who worked on the frontline. We are dealing with this situation, and will be supporting the ambulance service over the coming months. The right hon. Lady’s response is extremely disappointing.

**[Mr Speaker](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=467)**

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I granted the urgent question because the shadow Secretary of State tabled it and normally we would expect a Secretary of State to come. I recognise that they may be busy in other areas, but it is something we ought to be aware of. More and more, we are seeing fewer Secretaries of State across all Departments, not just this one.

**[Helen Morgan - (North Shropshire) (LD)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4934)**

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Last Friday, I passed by Royal Shrewsbury Hospital. It is in a neighbouring constituency, but it serves my constituents. It was not a particularly bad day, but there were eight ambulances with their doors open in the heat, waiting to transfer patients. This is not a new situation and I have repeatedly raised the issue in this place: on my first day in Parliament with the Prime Minister; with the Secretary of State for Health in an Adjournment debate; and in a Westminster Hall debate with the hon. Member for Charnwood (Edward Argar). All those people have now resigned. Shrewsbury and Telford Hospital Trust has declared its fifth critical incident this year. When will the Government end the chaos and infighting, and start taking steps to prevent avoidable deaths in Shropshire and across the country?

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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I can reassure the hon. Lady that the hon. Member for Telford (Lucy Allan) has been working very hard behind the scenes to get more investment into that local hospital. We will be making announcements shortly on future funding for hospital trusts.

Column 345is located here

**[Jim Shannon - (Strangford) (DUP)](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4131)**

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The Minister and the Government were able to respond to the covid-19 pandemic and showed that resources could be made available. Can I ask the Minister this question in a positive fashion? Is it possible to use some of the very successful covid-resourced helplines for people to contact to provide short-term advice on heat-related issues, rather than perhaps ringing, as they often do, the GP out of hours? What else can the Minister’s Department do to take pressure off A&E and out-of-hours GP surgeries?

**[Maria Caulfield](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=4492)**

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The hon. Gentleman makes a very constructive suggestion—one of the first of the afternoon, if I may say so. There were lessons during covid that are being rolled out across emergency services. We are looking at best practice in those parts of the country where response times are better to see if we can share it. I am very keen to look at any option that relieves the pressure. We are investing in 111, which enables people to have alternative ways of getting urgent care directed to them. We are looking at 111 being able to make direct referrals as well, so there are a number of options. I am happy to take suggestions from any hon. Member if they are keen to see those happening in practice.

**[Mr Speaker](https://hansard.parliament.uk/search/MemberContributions?house=Commons&memberId=467)**

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You have tempted me and I should not really, but it would be very helpful if you reopened Chorley A&E for 24 hours rather than 12 hours. It would reduce the number of ambulances queueing at Preston and Wigan, and we would have more ambulances on the road.