

## REHABILITATION AND ENABLEMENT DEBATE, WED 9 NOV 2011

### Role of nursing in rehabilitation and enablement

Royal College of Nursing (RCN) Scotland broadly supports the motion for this debate and would like to highlight the importance of the nursing team in ensuring sustainable, high quality and effective community-based health and care services both now and in the future. Nurses are well placed to work alongside patients to nurture independence and self-care at home.

Nurses, for example, are crucial to the successful operation of the Adult Rehabilitation Framework, often taking on the role of co-ordinating care packages that ensure that discharge really works. Nurses also work alongside patient's families and carers to ensure they have the necessary support networks for the most successful rehabilitation possible.

In addition, productive and respectful relationships between nursing staff and their social care and third sector colleagues are essential to ensure seamless transfers to and from re-ablement services. Only strong professional collaboration will ensure that delayed discharges and unnecessary hospital admissions for older people continue to reduce.

Changing expectations and structures under the framework will require nurses and health care assistants to adapt and develop roles. The implications of these developments are influencing the Scottish Government's review of community nursing, which is shortly expected to set out the future path for community nursing development across Scotland.

### Nursing workforce cuts

However, our comments on the positive contribution of nursing staff and their colleagues to this agenda must be set in the context of the current public sector funding settlement and its impact on the workforce.

With staffing the highest individual revenue cost to boards and nursing staff accounting for 42% of the NHS workforce, the nursing workforce has become a prime focus of both planned and unplanned 'savings'.

The latest ISD workforce figures show that half of all nursing posts forecast to be lost in this financial year were removed within the first quarter of 2011-12 alone. Already the number of nurses in post in NHS Scotland is at its lowest point since 2006. We are concerned that this acceleration to the loss of nursing posts may be indicative of the financial pressures boards are facing on the ground, despite the comparatively positive NHS position in the Scottish budget.

### The Change Fund and integration

The Scottish Government has made a welcome financial contribution to encourage transformational change, with a £70m 'Change Fund' available this year to achieve a shift in the balance of care in older people's services – and commitments to the funding for a further three years. Rehabilitation and re-ablement is a strong theme within the individual Change Plans for 2010-11.

However, while the Change Fund is a welcome contribution, it is likely to fall far short of what will be necessary in the long-term to genuinely shift the balance of care and provide for our ageing population. Furthermore, partnerships were not required to explicitly comment on implications of their Change Plans on the local workforce.

Concerted efforts will be necessary to ensure that the Changes Plans deliver on the required shift in core budgets from institutional care to the community and that the significant workforce implications have been debated and planned for in the long-term.

In addition, whilst health portfolio revenue budgets have been relatively well protected from public sector cuts in the proposed 2012-13 budget and the 2011 Spending Review, those of the partners expected to engage with the NHS in increased integration (in particular local government, but also the third sector) have not. Given that demand is not reducing, and rehabilitation and re-ablement needs are likely to rise in the face of an ageing demographic, we are concerned that the NHS will be expected to pick up the burden of funding gaps from integration partners to ensure health and social care outcomes are met, particularly given the NHS role of providing services free at the point of need.

## Conclusion

RCN Scotland agrees that well-resourced and high quality local rehabilitation and re-ablement services are essential if the national and local Government are to promote independence and self-care among our older people, and ensure the productive engagement of adults in the workplace. Much good work is already underway, driven by the expertise, enthusiasm and positive relationships of frontline practitioners across sectors and their clients. Any reshaping of community health and social care services must now nurture, resource and build on this excellent local practice.

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