

Rural and remote areas are often known for their open space, less crowded streets and cleaner air. While this has many benefits, it can prove challenging in some cases for both staff and patients trying to deliver and access health and care services.

This briefing considers the key issues affecting the provision of health and care in rural and remote areas across the UK and sets out the next steps for the RCN.

This briefing does not consider the specific impacts of COVID-19 on rural health provision but rather the general and systematic issues faced. However, we understand that the pandemic could have exacerbated many of these issues and that this must be fully explored and understood.

### What are the issues?

Rural and remote communities and areas across the UK are diverse. However, rural populations can face common challenges in accessing timely and appropriate health and care services and there are some common issues affecting service delivery in these areas.<sup>1</sup>

While overall health outcomes can appear to be better in some rural areas than urban areas, the way that data on population health and deprivation is collected and measured can mask pockets of significant deprivation and health inequalities.<sup>2</sup>

### Loneliness and isolation

Loneliness and social isolation can have significant impacts on physical and mental health and wellbeing.<sup>3</sup> In rural and remote areas, a range of factors can exacerbate loneliness and/or social isolation, such as the dispersed nature of populations and a lack of or limited availability of transport.<sup>4</sup>

### Demographics

Rural areas also typically have higher populations of older people<sup>5</sup> and the population aged 65 and over is projected to grow by around 50% in rural areas by 2039<sup>6</sup>. Long term conditions and multi-morbidity is more prevalent in older people<sup>7</sup>, yet simultaneously, access to appropriate health and care services can be more limited than in urban areas.

### Distance and transport

Significant distances between health services and facilities in rural and remote areas can increase the time and cost of journeys for patients, their families and staff. This can be compounded by a lack of adequate, affordable or available transport<sup>8</sup>: 41% of people living in rural areas do not have access to their nearest hospital within an hour's travel by public transport or walking, compared with 6% of users living in urban areas.<sup>9</sup> This situation has been made worse by cuts to rural transport services - between 2010/11 and 2016/17 it is estimated that £103 million was cut from bus support across England and Wales.<sup>10</sup>

<sup>1</sup> PHE (2019) An evidence summary of health inequalities in older populations in coastal and rural areas; <https://www.gov.scot/publications/rural-scotland-key-facts-2018/>; <http://www.publichealthwalesobservatory.wales.nhs.uk/rural-health/>;

<http://www.publichealthwalesobservatory.wales.nhs.uk/rural-health>  
<sup>2</sup> LGA and PHE (2017) [https://www.local.gov.uk/sites/default/files/documents/1.39\\_Health%20in%20rural%20areas\\_WEB.pdf](https://www.local.gov.uk/sites/default/files/documents/1.39_Health%20in%20rural%20areas_WEB.pdf)

<sup>3</sup> <https://www.campaigntoendloneliness.org/threat-to-health/>

<sup>4</sup> <https://www.rsonline.org.uk/how-to-combat-rural-loneliness>

<sup>5</sup> <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/august2019>; DEFRA, 2018 DEFRA. Statistical Digest of Rural England.

<sup>6</sup>

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/ageing/articles/livinglongerhowourpopulationischangingandwhyitmatters/2018-08-13>

<sup>7</sup> <https://www.kingsfund.org.uk/projects/time-think-differently/trends-disease-and-disability-long-term-conditions-multi-morbidity>; [https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/later\\_life\\_uk\\_factsheet.pdf](https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/later_life_uk_factsheet.pdf)

<sup>8</sup> <https://bettertransport.org.uk/sites/default/files/research-files/The-Future-of-Rural-Bus-Services.pdf>

<sup>9</sup> [https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/later\\_life\\_uk\\_factsheet.pdf](https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/later_life_uk_factsheet.pdf)

<sup>10</sup> Equates to 32% reduction in budget overall; [www.bettertransport.org.uk/buses-crisis-2017](http://www.bettertransport.org.uk/buses-crisis-2017)

Large geographical distances and dispersed populations are also challenging for rural emergency services, and response times can be significantly longer. A BBC investigation in 2018 found that for some rural areas in the UK, it took over 20 minutes on average for ambulance services to reach a patient, compared with responses in under five minutes in urban areas.<sup>11</sup>

For nursing staff, the distance between patients and services can increase travel time and transport costs.<sup>12</sup> Greater distances between specialist and emergency services can also contribute to feelings of professional isolation, increased clinical responsibility and a broader work profile, while distance and remoteness can also serve as barriers to accessing training and development opportunities.<sup>13</sup>

### Broadband and mobile network

There have been improvements in expanding broadband and mobile coverage across the UK, but many rural and remote areas and populations still struggle with a lack of access or limited access. For example, 4G mobile coverage in rural areas of the UK was 40% below urban coverage in 2019 and 5% of the UK gets no mobile reception at all.<sup>14</sup> In 2018, 7% of premises in rural areas of England were not able to access a decent broadband service (calculated as delivering a download speed of at least 10Mbit/s and upload speed of at least 1 Mbit/s), compared with just 1% in urban areas<sup>15</sup>; in Wales it is 3%<sup>16</sup>; and 6% in Northern Ireland.<sup>17</sup> In Scotland it is estimated that 40,000 homes are unable to access a decent broadband service.<sup>18</sup>

<sup>11</sup> <https://www.bbc.co.uk/news/health-47362797>

<sup>12</sup> Nuffield Trust (2019) <https://www.nuffieldtrust.org.uk/news-item/the-costs-of-delivering-health-care-in-rural-areas>

<sup>13</sup> <https://www.nursingtimes.net/roles/hospital-nurses/health-care-challenges-in-rural-areas-physical-and-sociocultural-barriers-01-01-2003/>

<sup>14</sup> <https://www.ofcom.org.uk/about-ofcom/latest/media/media-releases/2019/latest-uk-broadband-mobile-coverage-revealed>

<sup>15</sup> <https://www.gov.uk/government/statistics/rural-broadband>

<sup>16</sup> <https://www.ofcom.org.uk/about-ofcom/latest/media/media-releases/2018/getting-rural-areas-connected-in-wales>

Digital and mobile technologies can play an integral part in the provision of health and care services in rural and urban areas.<sup>19</sup> However, inadequate broadband and mobile phone network risk being major barriers to the implementation and expansion of these services.

But the lack of or limited access to broadband and mobile coverage in many rural and remote areas are major barriers to the implementation and expansion of these services. It can also prevent people in those areas from accessing essential health information and services and could even exacerbate issues such as social isolation.

Nursing staff working in rural and remote areas have highlighted the challenge posed by the lack of poor quality broadband and mobile network coverage.<sup>20</sup> This hinders access to online referral services, records and other information systems, and can also prevent staff from accessing essential training and professional development. Furthermore, lack of broadband and mobile network access can be a barrier for health and care staff to disseminate important health information to individuals and communities.

## Rural health across the UK

### Scotland

#### *Workforce*

In June 2019, the Health and Care (Staffing) (Scotland) Act gained Royal Assent, setting out requirements for safe staffing across both health and care services and most clinical professions.

<sup>17</sup>

[https://www.ofcom.org.uk/data/assets/pdf\\_file/0027/186408/connected-nations-2019-ni-report.pdf](https://www.ofcom.org.uk/data/assets/pdf_file/0027/186408/connected-nations-2019-ni-report.pdf)

<sup>18</sup>

[https://www.ofcom.org.uk/data/assets/pdf\\_file/0028/186409/connected-nations-2019-scotland-report.pdf](https://www.ofcom.org.uk/data/assets/pdf_file/0028/186409/connected-nations-2019-scotland-report.pdf)

<sup>19</sup> RCN Scotland report 'Going the Extra Mile' (2015)

<https://www.rcn.org.uk/about-us/policy-briefings/sco-pol-going-the-extra-mile>

<sup>20</sup> RCN Congress 2019 Rural Health resolution debate

The RCN anticipates that the implementation of the legislation will address issues related to the provision of nursing services in all areas, including rural. We are currently working with the Scottish Government to shape legislative guidance as it works towards its intended schedule for full implementation in late 2020.

In 2019 the Scottish Government published its Integrated National Health and Social Care Workforce Plan. It deals with issues of supply and demand, with the aim of ensuring an appropriate and sustainable workforce now and for the future. The Plan recognises that there are specific challenges to recruitment in rural and remote areas and commits to developing better understanding of these and taking action to address them. It contains several specific measures related to rurality, including increasing access to pre-registration nurse training courses for people from more remote, rural and island communities and investing in district nursing<sup>21</sup>. RCN Scotland is working with the Scottish Government and others to take forward the implementation of the plan.

### *GP and Community Nursing*

The new (2018) General Medical Services contract envisages GPs acting as 'Expert Medical Generalists' within Multi-Disciplinary Teams (MDTs) in which community-based nurses will play a crucial part. As the contract continues to roll out, we expect to see MDTs and nurses within them supporting positive health outcomes across rural and urban areas.

### *Technology*

With the aim of supporting the delivery of more effective, person-centred care in people's own homes, mobile technologies are increasingly important tools for community-based nursing teams, including district nurses and health visitors.

The Scottish Government's (2018) Digital Health and Care Strategy focuses on increasing the use of digital technologies in health and social care. In the overall context of shifting the balance of care to community settings, on-the-ground investment and implementation of digital technologies within primary care must be a priority and RCN Scotland continues to advocate for this.<sup>22</sup>

### England

Around 9.5 million people in England live in rural areas.<sup>23</sup> There are many affluent rural areas and overall, health outcomes are better in rural areas than in urban ones.<sup>24</sup> However, it has been argued that limitations in the available data can mask pockets of significant deprivation, poverty, and health inequalities in rural areas, resulting in some rural areas being overlooked in the existing measurements of need.<sup>25</sup>

A 2017 study on health and wellbeing in rural areas in England highlighted the issue of limited access to services which promote and maintain good health and wellbeing such as leisure, community support, and health information.<sup>26</sup> It also highlighted that poverty, a lack of

<sup>21</sup> NHS Scotland & COSLA Dec 2019 An Integrated Health and Social Care Workforce Plan for Scotland

<sup>22</sup> RCN (2017) 'Principles for a technology-enabled health and social care service' <https://www.rcn.org.uk/about-us/policy-briefings/principles-for-a-technology-enabled-health-and-social-care-service>; RCN Scotland report 'Enhanced care in the palm of their hand: Developing mobile technologies for Scotland's district nursing teams' (2017) <https://www.rcn.org.uk/about-us/policy-briefings/sco-pol-enhanced-care-in-the-palm-of-their-hand>

<sup>23</sup> DEFRA Statistical Digest of Rural England January 2019 Edition [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/775109/01\\_Statistical\\_Digest\\_of\\_Rural\\_England\\_2019\\_January\\_edition.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/775109/01_Statistical_Digest_of_Rural_England_2019_January_edition.pdf)

<sup>24</sup> Including child mortality and life expectancy [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/834244/Health\\_September\\_2019.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/834244/Health_September_2019.pdf)

<sup>25</sup> [https://www.local.gov.uk/sites/default/files/documents/1.39\\_Health%20in%20rural%20areas\\_WEB.pdf](https://www.local.gov.uk/sites/default/files/documents/1.39_Health%20in%20rural%20areas_WEB.pdf); <https://www.rsnonline.org.uk/if-prevention-is-better-than-cure-what-more-can-be-done-to-prevent-rural-ill-health>

<sup>26</sup> LGA and PHE 2017 Health and Wellbeing in rural areas <https://www.local.gov.uk/health-and-wellbeing-rural-areas>

adequate and affordable housing<sup>27</sup> and opportunities for employment can also exacerbate health inequalities in rural areas.

### *Funding*

A review by the Nuffield Trust (2019) found that rural and remote areas in England with unavoidably small NHS trusts generally have high cost pressures, longer waiting times, more delayed transfers of care, higher average unit costs and face significant financial pressures. It argued that while there have been efforts to distribute funding fairly with some adjustments to the funding formula for rural contexts, the way that the NHS distributes funding does not adequately cover these extra costs.<sup>28</sup>

Local Authorities (LA) have a key role to play in providing health and care services to rural and remote areas. However, successive years of cuts to LA budgets and in particular to the public health budget, have resulted in cuts to key prevention services including school nursing, health visiting, smoking cessation, drug and alcohol treatment and sexual and reproductive health.<sup>29</sup> Financial pressures have also impacted on other essential services delivered by LAs, including public libraries and rural bus networks.<sup>30</sup> Furthermore, with only 49% of households in the most rural areas having access to a regular bus service<sup>31</sup> the lack of access to adequate transport is a significant challenge.

While residents in rural areas have much longer journey times to access GP and

hospital services than urban dwellers,<sup>32</sup> some rural areas have seen significant reductions in their local bus support of up to 76%.<sup>33</sup> The UK Government will be accountable for delivering on its commitments to restore and invest in local bus services and more broadly to invest in rural areas as part of a 'levelling up all parts of the United Kingdom'.<sup>34</sup>

### *Workforce*

Even before the outbreak of COVID-19 and the resulting strain on the health and care workforce, across all parts of England health and care services were suffering from a shortage of Registered Nurses with 38,785 vacant nursing posts in the NHS alone.<sup>35</sup> Community settings have been badly affected by the workforce crisis with community nursing roles decreasing by 6.3% between September 2009-January 2020. District nurses are key to the delivery of safe and effective care across the UK and play an essential role in rural and remote communities, yet over the last decade the number of district nurses has reduced by 42.2%.<sup>36</sup>

Sparser smaller populations, lower unemployment rates, and a typically older population pose challenges for the recruitment, retention and development of an adequate health and care workforce in rural areas.<sup>37</sup>

But these challenges have not been adequately considered in planning processes to date: an analysis of Sustainability and Transformation Plans (STPs) in areas with significant rural populations highlighted a lack of

<sup>27</sup> For example, house prices are around 26% higher in rural areas and there is much less housing association and council housing

<sup>28</sup> <https://www.nuffieldtrust.org.uk/news-item/rural-and-remote-health-services-lose-out-on-nhs-funding>

<sup>29</sup> <https://www.ippr.org/blog/public-health-cuts#announce-of-prevention-is-worth-a-pound-of-cure>

<sup>30</sup> [https://www.local.gov.uk/sites/default/files/documents/5.40\\_01\\_Finance%20publication\\_WEB\\_0.pdf](https://www.local.gov.uk/sites/default/files/documents/5.40_01_Finance%20publication_WEB_0.pdf)

<sup>31</sup> Department for Transport National Travel Survey 2014-15. <https://www.gov.uk/government/statistical-data-sets/nts08-availability-and-distance-from-key-local-services>

<sup>32</sup> <https://www.gov.uk/government/statistics/journey-time-statistics-access-2014>

<sup>33</sup> <https://bettertransport.org.uk/sites/default/files/research-files/The-Future-of-Rural-Bus-Services.pdf>

<sup>34</sup> Conservative Party Manifesto 2019 [https://assets-global.website-files.com/5da42e2cae7ebd3f8bde353c/5dda924905da587992a064ba\\_Conervative%202019%20Manifesto.pdf](https://assets-global.website-files.com/5da42e2cae7ebd3f8bde353c/5dda924905da587992a064ba_Conervative%202019%20Manifesto.pdf)

<sup>35</sup> This represents a vacancy rate of 10.7%

<https://digital.nhs.uk/data-and-information/publications/statistical/nhs-vacancies-survey/february-2015--december-2019-experimental-statistics>

<sup>36</sup> <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/january-2020>

<sup>37</sup> Green, A., et al., Rural Workforce Issues in Health and Care. 2018

[https://www.ncrhc.org/assets/downloads/20181012\\_Rural\\_Workforce\\_Issues\\_in\\_Health\\_and\\_Care-min.pdf](https://www.ncrhc.org/assets/downloads/20181012_Rural_Workforce_Issues_in_Health_and_Care-min.pdf)

connections between 'rural' issues and workforce planning and that these were not routinely considered in STPs.<sup>38</sup>

The NHS Long Term Plan (2019) acknowledged that smaller acute hospitals who serve rural populations face specific challenges, including workforce, and that many of the national standards and policies were not appropriately tailored to meet their needs. It committed to working with trusts to develop a new operating model for these types of organisations, and how they work more effectively with other parts of the local healthcare system.<sup>39</sup>

The Interim NHS People Plan (2019) also acknowledged the specific recruitment and retention challenges faced by smaller acute trusts and general practice serving rural or coastal populations, and included a proposal to develop appropriate workforce models for these.<sup>40</sup> While we await the final 'People's Plan', it will only be applicable to the NHS. This reflects a broader issue wherein health and care services and the thousands of staff who work in them which are outside of the NHS (including social care and a range of community health and care services) are too often excluded from discussions about planning, funding and delivering health and care services in England. This has been evident in the response to the COVID-19 outbreak, during which there has been criticism of the Government's delay in recognising, addressing and protecting services and staff delivering health and care services outside of the NHS, particularly social care.

A broader national workforce strategy is needed which covers the health and care workforce across all services, settings and locations in England both in and outside of the NHS. This must take account of and

address the specific workforce trends, needs and challenges in rural areas.

### **Northern Ireland**

Health outcomes in rural areas of Northern Ireland are broadly higher than in urban areas, with the only lower outcomes in comparison being ambulance and fire response times.<sup>41</sup>

The debate about rural health care provision is linked to the transformation of health and social care, along with the associated discussion about the size and configuration of acute hospital services across Northern Ireland.

In terms of funding allocation, Northern Ireland takes account of rurality in the allocation formula, which since 2005 has had an adjustment for economies of scale.<sup>42</sup> Additionally, the 2016 Rural Needs Act (NI) for Public Authorities places a statutory duty on local authorities to consider rural needs in their planning and policy development.<sup>43</sup>

However, Northern Ireland is facing significant nursing workforce challenges - as of March 2020 there were 2,044 registered nursing vacancies, which is a rate of 10.7%.<sup>44</sup> Recent data from the Nursing and Midwifery Council also showed that Northern Ireland was the only country in the UK to lose nurses rather than gain them between April and September 2019.<sup>45</sup>

There are also particular concerns in Northern Ireland about workforce provision to remote and rural areas.<sup>46</sup> As in the rest of the health service, remote and rural areas face higher costs and specific challenges relating to recruitment and retention.

<sup>38</sup> Ibid

<sup>39</sup> <https://www.longtermplan.nhs.uk/publication/nhs-long-term-plan/>

<sup>40</sup> [https://www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan\\_June2019.pdf](https://www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan_June2019.pdf)

<sup>41</sup> Department of Health <https://www.health-ni.gov.uk/publications/health-inequalities-annual-report-2019>

<sup>42</sup> <https://www.nuffieldtrust.org.uk/files/2019-01/rural-health-care-report-web3.pdf>

<sup>43</sup> <https://www.rcpch.ac.uk/resources/workforce-census-focus-northern-ireland-2019>

<sup>44</sup> <https://www.health-ni.gov.uk/articles/staff-vacancies>

<sup>45</sup> <https://www.nursingtimes.net/news/workforce/northern-ireland-only-uk-country-losing-nurses-reveals-new-nmc-data-17-12-2019/>

<sup>46</sup> <https://www.rcpch.ac.uk/resources/workforce-census-focus-northern-ireland-2019>



Following unprecedented industrial action undertaken by nursing staff in Northern Ireland at the start of 2020, nurses in Northern Ireland accepted a government offer for pay parity and safe staffing. The RCN will be monitoring the Government's progress in implementing the full measures set out in the agreement to ensure that there is safe staffing across all health and care services in Northern Ireland.

### Wales

Nearly 20% of the Welsh population live in communities of less than 1,500 people<sup>47</sup>. While overall health outcomes appear generally good in rural Wales, poorer health outcomes can be masked by favourable averages. Rural Wales suffers from significant rural poverty relating to the limited employment opportunities, access to services and a lack of public transport.

The Mid Wales Healthcare Collaborative was established in 2015 to ensure the rurality of Mid Wales does not hinder access to services<sup>48</sup>. In 2018 the Collaborative transitioned to the Mid Wales Joint Committee for Health and Social Care and is supporting the Welsh Government's long-term vision, 'A Healthier Wales: Our Plan for Health and Social Care', focusing on prevention and well-being.

### Workforce

The nursing workforce in Wales faces widespread and well recognised shortages, this is exacerbated in rural areas. The Welsh Government and/or NHS Wales have historically failed to publish national figures for nursing vacancies using an agreed definition of what constitutes a vacancy, whilst these

figures are published in the other countries of the UK. In 2019 the RCN Wales estimated that there were approximately 1,600 Registered Nurse vacancies. Rural areas experience a high vacancies rate. The Welsh Government's Train, Work, Live initiative and Rural Health and Care Wales (RHCW) organisation promote research and work in the field of rural health and social care in Wales, with the aim of addressing the workforce shortages.

### Community Nursing

Community nurses provide a vital service to those in rural Wales, covering a sparse location and population demographic. Community nurses provide complex care packages at a patient's home, provide post-surgery treatment and promote independence. Nevertheless, the number of Registered Nurses with the Specialist Practitioner Qualification (SPQ) or Community Masters has remained static despite increasing demand. With the static commissioning of district nursing, a significant proportion of district nurses are over the age of 50. There is a serious case to be made for increasing the education places for district nurses commissioned by the Welsh Government to ensure the workforce is available to care for the aging population in rural Wales.

### Broadband and Service provision

Across rural Wales there is poor quality and access to broadband which has been reported to affect the seamless transfer of patient's data across organisational borders and people's ability to take part in telemedicine<sup>49</sup>. 29% of Welsh homes and businesses were able to access an ultrafast fixed broadband speed in

<sup>47</sup> <https://senedd.wales/laid/20documents/cr-ld11310/cr-ld11310-e.pdf>

<sup>48</sup>

<http://www.midwalesjointcommittee.wales.nhs.uk/sitesplus/documents/1158/23%20October%202014%20-%20WIHSC%20Mid%20Wales%20Healthcare%20Study%20Report%20-%20English.pdf>

<sup>49</sup> [https://gov.wales/sites/default/files/statistics-and-research/2019-05/summary-statistics-for-welsh-economic-regions-wales-338\\_0.pdf%20English.pdf](https://gov.wales/sites/default/files/statistics-and-research/2019-05/summary-statistics-for-welsh-economic-regions-wales-338_0.pdf%20English.pdf)  
<http://www.midwalesjointcommittee.wales.nhs.uk/sitesplus/documents/1158/Agenda%20Item%204%20MW%20Strategic%20Intent.pdf>

September 2018, significantly lower than the UK rate of 49% and across Wales download speeds vary widely<sup>50</sup>.

### *Transport*

Public transport in rural Wales is infrequent, inadequate and often more expensive than elsewhere. In Mid Wales there are over 48,000 registered patients that would have to travel more than 30 minutes to attend a GP appointment and to return home, not including waiting time and time spent with the health professional.<sup>51</sup> The National Development Framework 2020-2040 aims to address the lack of transport in rural communities in recommending that decisions on regional economic development and transport infrastructure and services should be made at all levels and consider the needs of all parts of Wales.

### *Welsh Language/Education*

Approximately 28.3% of the Welsh population can speak Welsh<sup>52</sup>. In order to provide quality health and social care in Wales, a bilingual workforce in urban and rural Wales is desirable. The language care is delivered in is integral both to the experience of care (e.g. dignity, compassion etc), the quality of clinical care and health outcomes for the patient. The importance of the language of care to health outcomes can be seen in fields such as speech therapy and counselling but is equally important where healthcare professionals are relying on speech with the patient and family to make an assessment, explain a treatment or medication regime or seeking to gain consent for a course of action.

<sup>50</sup> [https://gov.wales/sites/default/files/statistics-and-research/2019-05/summary-statistics-for-welsh-economic-regions-wales-338\\_0.pdf](https://gov.wales/sites/default/files/statistics-and-research/2019-05/summary-statistics-for-welsh-economic-regions-wales-338_0.pdf)

<sup>51</sup>

<http://www.midwalesjointcommittee.wales.nhs.uk/sites/plus/documents/1158/23%20October%202014%20-%20WIHSC%20Mid%20Wales%20Healthcare%20Study%20Report%20-%20English.pdf>

For our members to feel confident in speaking Welsh professionally and supporting colleagues to do so nursing education through the medium of Welsh and the availability of educational resources in Welsh must be increased.

### **What is the RCN calling for?**

Rural health care provision varies across the UK, so different countries and contexts will require different approaches. Notwithstanding this, there must be equality of access to health and care services across the UK, including in rural and remote areas.

This will require sensitive and appropriate models of service provision and delivery, based on a robust understanding of the needs of rural and remote populations.

It is crucial to capture data which accurately reflects the disparities and health inequalities within rural populations, in order to determine effective rural health and care strategies.

Targeted innovation and investment are needed to overcome key barriers – notably the limited or lack of affordable transport and broadband and mobile network access and to tackle issues such as isolation and loneliness.

Achieving safe staffing across all settings and services in the UK means having enough nursing staff with the right skills and knowledge, in the right place, at the right time. The RCN is calling for safe and effective staffing to be enshrined in law in all parts of the UK, as it is in Wales and Scotland. That means moving with urgency in England and Northern Ireland, where no law currently exists.

<sup>52</sup> <https://stats.wales.gov.wales/Catalogue/Welsh-Language/Annual-Population-Survey-Welsh-Language/annualpopulationsurveyestimatesofpersonsaged3andoverwhosaytheycanspeakwelsh-by-localauthority-measure>

Legislation would support greater accountability for safe and effective staffing across all sectors and settings, including in rural areas.

Achieving safe staffing levels for all areas in the future requires significantly increased investment in nursing education to ensure that there is an adequate and sustainable domestic supply of registered nurses.

Across the UK, the RCN will ensure that our work to secure appropriate recognition for nursing (reflected in investment and support for the nursing workforce across the UK) and safe staffing in all settings and areas, reflects all settings including rural and remote.

Additionally, across all parts of the UK we want to see:

- Health and care services workforce planning undertaken alongside and integrated with service and finance planning. This integrated planning should be based upon a detailed understanding of the needs of local populations. In rural areas, this will require adequate measures of inequality and deprivation to ensure that funding and provision is equitable and appropriate.
- The needs and specific challenges facing rural areas, including those relating to the recruitment, retention and development of the health and care workforce, must be considered when planning, budgeting and designing services in rural areas. This will necessitate meaningful representation of rural areas in planning and commissioning.
- Sustained investment is needed to overcome specific issues affecting health and care service provision and access in rural areas, particularly supporting rural

transport and access to mobile and digital services.

- Nursing staff working in remote and rural areas should be adequately supported to provide the best possible patient care. This must include access to appropriate training and development, guidance, support and career development opportunities.

### What can RCN members do?

The RCN works with government, think tanks and other stakeholders to ensure the voice of nursing is heard. You can get involved in policy development by taking part in surveys, workshops, seminars and briefings.

You can send this briefing to your elected representatives to ensure that politicians and councillors understand how rurality affects health outcomes and the specific challenges for nursing in rural and remote areas.

If you work in a rural or remote area and would like to share your experience please contact the Policy and Public Affairs Team at [papa.ukintl@rcn.org.uk](mailto:papa.ukintl@rcn.org.uk).

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