



Royal College of Nursing briefing for Second Reading of the Local Government and Cities Devolution Bill in the House of Commons

With a membership of around 425,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.

Background

The bill is a generic bill which provides for the Secretary of State to be able to make orders devolving powers to individual cities or combined local authorities on a range of areas, including health and social care, and proposes directly-elected metro mayors for such areas. Devolution presents opportunities and challenges for health and social care, including the potential to design bespoke services in close collaboration with clinicians, patients and the public, and to better tailor services to meet the needs of local health populations.

RCN Position

The RCN supports in principle measures to ensure that decisions about the provision of health and social care services are made at the most suitable levels. Clinical leadership will be key to developing solutions for devolving health and social care. The RCN is clear that senior nurses and clinicians must be involved in all decisions relating to system design and delivery under any new governance arrangements enabled by this bill.

We are aware of the benefits to be secured for patients and service-users from the removal of arbitrary barriers, such as those created by the distinction made between health services and social care services. However this position must be viewed against the backdrop of pressures currently being experienced across the health and social care landscape. The need to make savings and efficiencies whilst continuing to provide high-quality, cost-effective services for an ever growing population is already a significant challenge. The RCN believes most strongly that the fundamental principle underpinning the NHS, of ensuring access to free healthcare on the basis of clinical need must be maintained and not undermined by any changes brought about by this bill. Safeguards must be put in place to ensure that changes to services do not lead to unintended consequences, to the detriment of patient care.

The nursing workforce operates at the interface between the provision of free healthcare and means tested social care, and they will have a significant contribution to make to any proposals for integrating health and social care. The RCN supports any measures that will help to ensure that those in greatest need, often the frail elderly and those with long-term health conditions, are able to access the care and support that they need.

Lessons from on-going developments in England

It is possible that some areas opting for more powers will not choose to take on responsibilities for commissioning and delivering health and social care, however a precedent has been set by Greater Manchester, which will be given full control of a £6bn budget for health and social care.

While there are clear advantages for closer working between health and social care services, the RCN would urge caution in the creation of any new legislative or regulatory arrangements, since both health and social care across England are currently undergoing one of the most vigorous periods of innovation and experimentation since the formation of the NHS.

The successes and learnings from the experiment in Greater Manchester, and the experiences of the integration 'Pioneers'¹, and the NHS England "Vanguard" sites² piloting the new models of care set out in NHS England's Five Year Forward View, will all provide valuable insight and learning which can and should be used to inform any new structural or regulatory proposals. Similarly, any effects resulting from the recent application of the new 'NHS Success Regime'³ must be given due consideration when deciding how best to secure equitable, safe, and cost-effective health and care services now and in the future.

The RCN strongly supports the use of new and innovative approaches to meet the population's changing needs. However, the recent proliferation of differing programmes and pilot schemes across the country, operating simultaneously, carries the serious risk of confusion for service users, as well as the potential for duplication of services. Against this background we believe that any plans to devolve health and social care to cities or combined authorities must take into account the possible impact on patients, the public, and the health and care workforce.

Whatever the landscape, any new arrangements for the provision of health and care services must continue to meet national standards, and must ensure that those with health and care needs have equitable access to high-quality, safe, and cost-effective services. This will require clear and robust guidance, and attention must also be given to the impact of any new arrangements on national workforce plans and plans for funding, training and development of healthcare staff.

Engagement and consultation

One key piece of learning from both the Vanguards and the proposals for Manchester is of the need to engage all stakeholders as early as possible in any proposals for change. In the case of the Vanguards early staff engagement and involvement seems to have been a key factor in the success of the twenty-nine applicants; in the case of Manchester the lack of public and staff engagement has become a major issue of contention for the responsible authorities, and one that must be addressed as a matter of urgency.

The RCN looks forward to seeing in more detail individual area plans for devolving health and social care in due course, but would urge that staff are engaged and consulted as any plans are developed and progressed.

¹ <http://www.england.nhs.uk/pioneers/pioneer-communities/overview/>

² <http://www.england.nhs.uk/ourwork/futurenhs/5yfv-ch3/new-care-models/>

³ <https://www.gov.uk/government/publications/five-year-forward-view-the-success-regime-a-whole-systems-intervention>

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