

## **SHEILA CRON**

### **Former Head of Nursing for Health Improvement and Inequalities, Perth & Kinross Community Health Partnership**

I am disappointed, but not surprised, about the lack of progress with this agenda. This is huge, against a backdrop of budget cuts and competing priorities within the Health and Social Care integration agenda. There are many areas I could comment on, but three key areas are:

#### ***Continuity of Care and Information Sharing***

Different IT systems across Health and Social Care are long standing. Whilst much is being done to resolve this, better use of one-to-one contact between practitioners in the prison and health services using skype, written summary reports, planning meetings etc., should be utilised, especially prior to release into the community. To inform this planning **all** staff require a better understanding of the expertise available.

#### ***Understanding nursing roles***

Not easy to achieve, nurses in prison cannot just swap places with staff in a hospital ward or community. To begin with, as mentioned, not all staff would be comfortable working within a prison environment. There are benefits to nurses from within prisons having some 'time out' within a hospital/community environment to gain insight to the services 'out there', as well as educating their counterparts on their own roles and constraints within the prison service. This would improve nursing skills, expertise, feeling valued and inclusion in the wider NHS. Short-term funding is required for extra staff, but well worth it to improve better all-round understanding and care for patients.

#### ***Inequalities***

I am glad the report highlights issues with release from prison, homelessness and GP registration. These issues **increase** inequalities for people. Nursing teams set up to support people leaving prison are being depleted due to budget cuts, reducing the 'one stop shop' approach to steer ex-prisoners through the labyrinth of services they require. Nursing expertise is being lost, which can support the education of GPs to the needs of this group of people and contribute to information sharing and continuity of care.

To make progress in this agenda, please consider the good practice highlighted in this RCN report and build on the nursing expertise we have.

**Sheila Cron**

**Former Head of Nursing for Health Improvement and Inequalities  
Perth & Kinross Community Health Partnership**