Royal College of Nursing Response

Welsh Government Consultation Document: A Framework for Delivering Integrated Health and Social Care for Older People with Complex Needs

The RCN is supportive of new ways of working if the change has at its heart the provision of better, faster and fairer services to the people of Wales. Our public sector is facing significant challenges with real time budget cuts and an ageing population with increasingly complex needs to serve. It is key that at this time reform is seen not as change for change sake and adding further layers of bureaucracy. Reorganisation can distract strategic attention away from actual improvements in services and leave those on the ground feeling that they have to achieve the same role in uncertain circumstances with different resources. The challenge for the Government of Wales is to streamline the structure of public service whilst promoting a clear shared vision. Our national government needs to set coherent foundations, we expect service providers to ensure that those using public services experience seamless, quality provision that meets their needs. The RCN expects that the laws and systems that the Welsh Government propose are joined up too, otherwise our service providers are being set up to fail.

The RCN believes that all sections of the public should be able to access services seamlessly when they need them, and not have to be passed back and forth between agencies whilst they argue who should provide the service and as is more often the case – who will pay for it. Public sector reforms must address this issue, but not only should people be able to access services smoothly they must also be able to be confident that they are accessing high quality, safe and appropriate services – delivered by people with the right expertise.

It is not organisational structures that ensure better integrated working, it is about the people within those organisations and the way they work with each other. It is paramount that professional relationships are built on recognising the distinct knowledge and expertise that we all bring to the table. This culture of respect needs to be throughout organisation, from frontline staff through to managers and leaders.
Our politicians must put in place the right conditions to underpin this through policies, processes, and governance and accountability systems.

Senior nurses such as Ward Sisters/Charge Nurses and District Nurses often tell us of the frustrations caused by delays in assessment processes and delays in transfers of care. It is vital that multi-professional assessments are not seen as social care assessments with a ‘contribution’ from health. All partners should contribute equally to a holistic assessment.

Patients left inappropriately in hospital care (particularly and most frequently older people) very quickly grow physically and mentally dependent. Often older people will lose permanently the abilities to maintain themselves in the space of only a few weeks. Despite this many older people are kept inappropriately in hospitals because social care workers are either unable to attend meetings and complete their part of the multi-professional assessment or an argument is ongoing about whether the budgetary responsibility for the patient lies with social care or health.

The level of unmet social care needs is a major concern to the RCN. In England the RCN has responded to the Commission on Funding of Care and Support. In composing our response the RCN established an 8 member expert panel and also conducted in 2011 a member wide survey. This highlighted how often the NHS is burdened by the implications of unmet care needs. Social Services are too often are delaying assessing the patient for care or setting the eligibility criteria in such a way as to be able to refuse care.

“Social care services are desperately underfunded for the valuable work they do which is impacting on the service that our clients are receiving” RCN member Social Care Survey 2011

It is important to understand that this is not a criticism of individual social workers. Capacity is limited in social services and if there is no statutory timescale resources are unlikely to be forthcoming. The lack of ‘out-of-hours’ social services provision has
an extremely negative impact on patients left inappropriately in healthcare settings over the weekend and bank holidays.

“[social care] is hugely understaffed putting families and children at great risk. When social workers leave, they are often not replaced for weeks sometimes months and families and professionals have no social worker to correspond with” RCN member Social Care Survey 2011

We therefore welcome an approach that enables health and social care partners to provide a co-ordinated, consistent system of care for older people.

As the consultation document rightly points out in point 3 at the bottom of page 5, moving to an integrated approach means that responsibilities are sometimes not clear. The RCN would therefore demand that the Welsh Government ensures that local partners have in place all the leadership and support mechanisms are in place for staff to deliver safe, dignified and ever more complex integrated care.

Accountability and supervision for care staff should be provided by appropriate practitioners in their own field, regardless of whether ultimate management of the service is undertaken by a member of staff from a different professional background. For nurses, we expect clinical supervision to be delivered by nurses working as Advanced Practitioners (Level 7), at a minimum. To ensure the safety and ongoing development of care services, professional staff will need easy access to such professional guidance and supervision, however collaborative teams are configured.

Registered nurses must retain ongoing accountability for all nursing tasks they delegate to other staff, such as health care support workers. As such, to ensure the safety of both service users and staff, it is crucial that the frameworks for integrated care delivery set out by partner organisations clearly enable nurses to continue to oversee and supervise the support workers carrying out these tasks. The accountability structures of local partnerships must demonstrably embed clinical governance into their operation.
Partners will want to ensure that in both the planning and delivery of services, staff such as nurses and health care support workers have access to fully funded and high quality education and development opportunities. These will need to fulfil mandatory training requirements, as well as the continuous professional development opportunities required to build the core competencies needed to deliver integrated care. Resource allocations in these circumstances will clearly need to include funding for adequate backfill to allow staff to attend training.

We welcome the Welsh Governments requirement for local partners to assess their current situation in line with laid down criteria; however the timescale for doing this is very tight. Local partners must understand the local issues they need to address and the needs of the community in redesigning the service. The RCN would expect nursing staff to be fully involved with this and in subsequent decisions around the provisions of services. Whilst there are clear time pressures it is important to spend time establishing the right foundations for integrated working.

There is considerable emphasis in the consultation document on people being enabled to take more responsibility and control for themselves and their health. The Royal College of Nursing believes that the debate about encouraging self care is complex and there is a balance to be made between empowering people to take responsibility and frightening vulnerable people into believing that they shouldn’t be bothering the health service. It is therefore important that we get the balance right, nurses play a vital role in delivering community services and are perfectly placed to work in partnership with their patients, families and communities to develop new service models.

The RCN is pleased to see that the document asks local partners to set out how they will build an appropriate workforce across all partners to enhance the citizen’s experience. The RCN has consistently called for an all Wales workforce planning mechanism for the development of the NHS Wales health care workforce. The shift of focus of care to the community will require significant investment in the education
and training of staff to work in an environment that is very different to the hospital setting. Many of the new services will require the use of new technology through the use of telehealth and other virtual health developments. This will either require training of existing staff which has a significant resource impact OR the staff will need to be recruited from areas where those skills already exist. If this happens then there is a danger that this will lead to a drain of expertise from existing services with that expertise, thereby shifting gaps in staffing from one speciality or location to another.

These solutions will require robust medium and long term planning of the health care workforce. In addition to the development of the skills for individuals in new and specialist roles, this planning information should feed all the way through to the number of pre-registration nursing, therapist and medical practitioner places commissioned for education and training to ensure the maintenance of a safe and effective workforce which can deliver on the proposed plans.

ABOUT THE ROYAL COLLEGE OF NURSING (RCN)

The RCN is the world’s largest professional union of nurses, representing over 400,000 nurses, midwives, health visitors and nursing students, including over 23,000 members in Wales. The majority of RCN members work in the NHS with around a quarter working in the independent sector. The RCN works locally, nationally and internationally to promote standards of care and the interests of patients and nurses, and of nursing as a profession. The RCN is a UK-wide organisation, with its own National Boards for Wales, Scotland and Northern Ireland. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing.
The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.