

**#rehab15**

**NHS**  
England

# Achieving the Vision.

**NHS England Regional  
Rehabilitation Leads**

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31st March 2015



# Regional Rehabilitation Leads

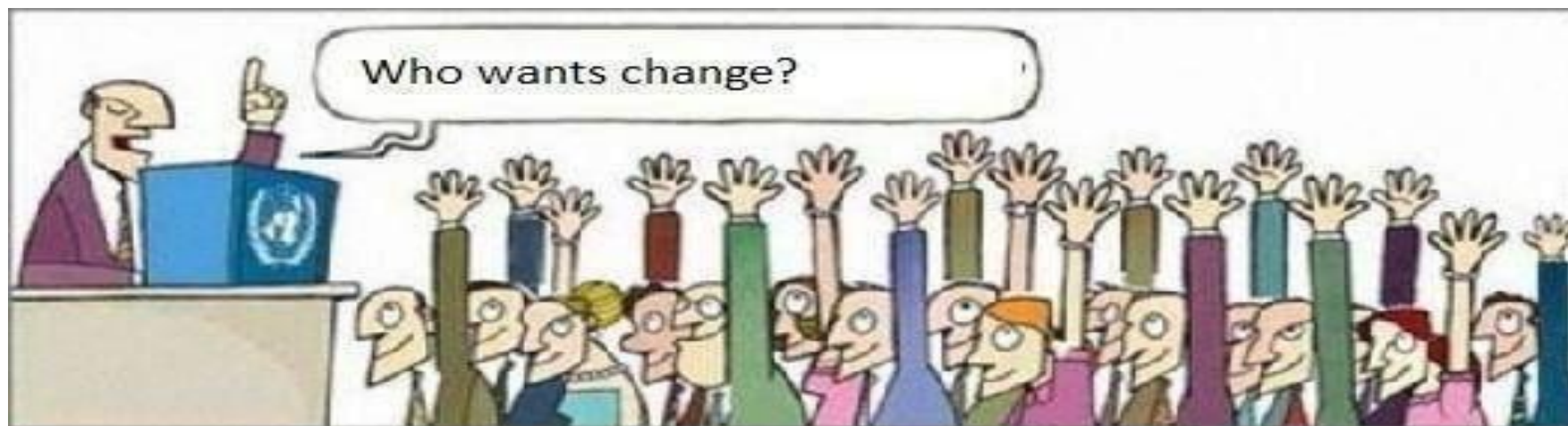
- Identify good practice in rehabilitation and effective models of service delivery.
- Gather data and evidence – soft intelligence, identification of service data collection and service evaluation.
- Promote and support adoption and dissemination
  - Engage with and link to SCNs and AHSNs
  - Support existing networks
  - Engage with LETBs
  - Make contact with CCGs in region – lead for commissioning rehabilitation services?

# Five Year Forward View

# Principles of good rehabilitation practice.

<p><b>Sustained action required to address demand.</b></p>	<p>Radical upgrade needed in prevention and public health.</p>	<p>Make use of a wide variety of new and established interventions to improve outcomes e.g. exercise, technology, Cognitive Behavioural Therapy.</p>
	<p>Support people to get and stay in employment</p>	<p>Instil hope, support ambition and balance risk to maximise outcome and independence.</p> <p>Use an individualised, goal-based approach, informed by evidence and best practice which focuses on people’s role in society.</p>
	<p>Patients gaining greater control of their care supporting self-management and self-care.</p>	<p>Support self-management through education and information to maintain health and wellbeing to achieve maximum potential.</p>
<p><b>Sustained action required to address efficiency.</b></p>	<p>Breaking down traditional barriers - GPs/hospitals, physical/mental health, Health/social care</p>	<p>Optimise physical, mental and social wellbeing and have a close working partnership with people to support their needs.</p>
	<p>Integrated out of hospital care: single point of contact, case management, risk stratification etc.</p>	<p>Recognise people and those who are important to them, including carers, as a critical part of the interdisciplinary team.</p> <p>Deliver efficient and effective rehabilitation using integrated multi-agency pathways including, where appropriate, seven days a week.</p> <p>Require early and ongoing assessment and identification of rehabilitation needs to support timely planning and interventions to improve outcomes and ensure seamless transition.</p>

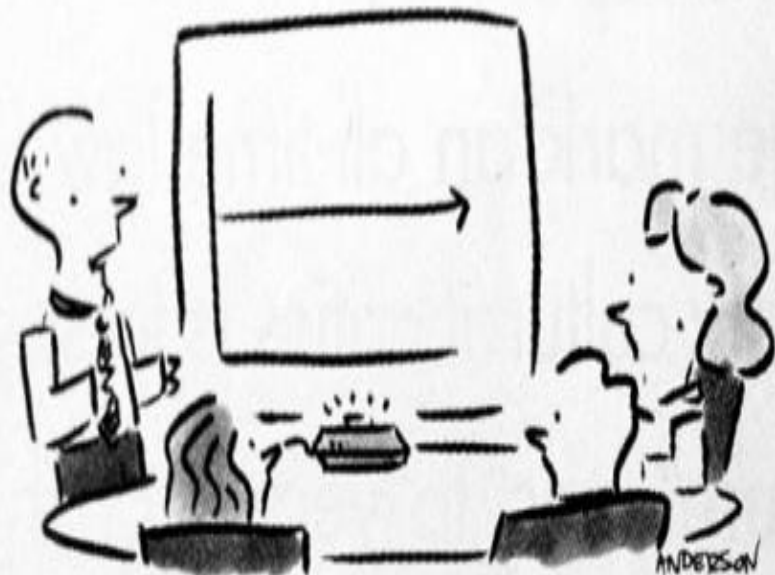
# Service re-design, development and change.



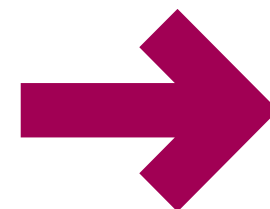
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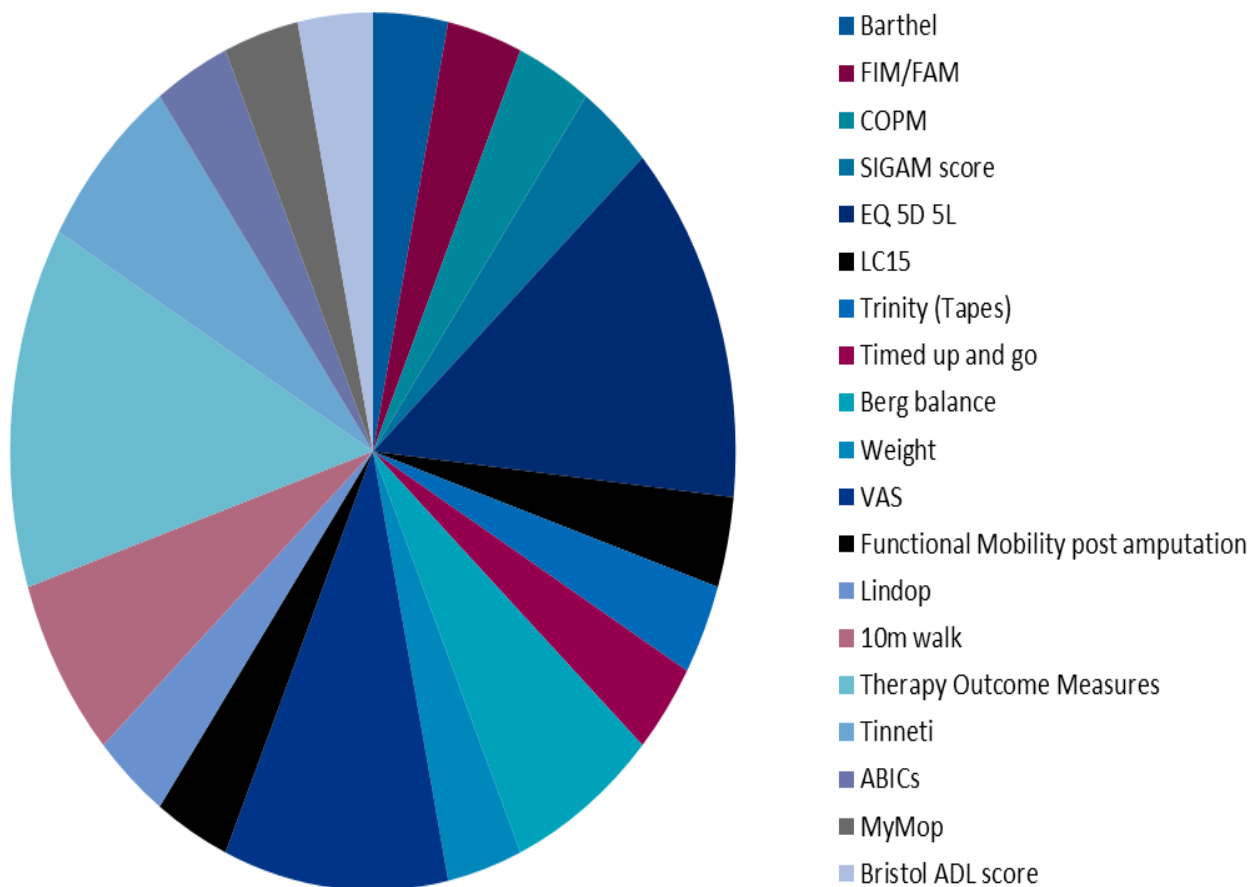
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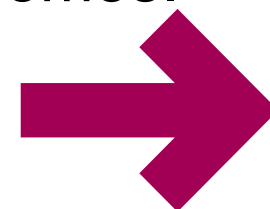
"After closer investigation, it's become clear that we need to enter more than one value."



# Demonstrating Effectiveness

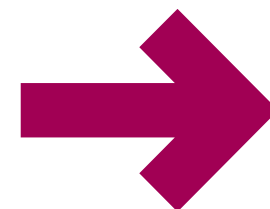


- There is an urgent need for consistent data sets to define citizen need and measure citizen outcomes.





“OK, I’ve shown you the ropes, given you the low down, and gotten you up to speed. All that’s left is actually training you.”



## Beyond Crisis: making the most of health higher education and research

At any one time our members will be educating more than 100,000 future health professionals, both in the UK and internationally

Across the UK, staff shortages are putting health and social care services under pressure, with England currently facing one of its most profound and sustained workforce crises in decades. In the 12 months to September 2014 alone the NHS recruited nearly 6000 overseas nurses to fill gaps; shortages of paramedics and prosthetists are so severe that they are now on the UK's Shortage Occupation List.

At the same time, we need to transform services in all UK home nations to meet the future needs of patients, delivering greater integration between health and social care, taking serious steps to prevent ill health and using IT to transform the delivery of care. This will largely depend not on new structures but on the people who work in health and social care, who will need to adapt to new roles and services and learn new skills in order to make these changes a reality.

There is no quick fix, the challenges we now face will take the best part of a decade to resolve. But there are actions in three areas that the next UK government and devolved administrations can take early in the parliament, even in the context of a challenging Comprehensive Spending Review (CSR), that will set us on the path to a system that will better serve our patients and staff.

1. Rethink workforce planning

2. Build on the talents of the existing workforce

3. Protect and grow research



Healthy  
Conversations



and the  
Allied Health  
Professionals  
#AHPhealthyconvos



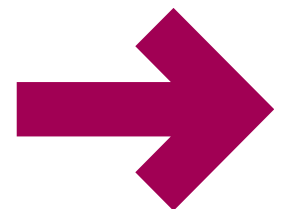


# Workforce Development & Planning

Transformational change and better integration of services will largely depend,

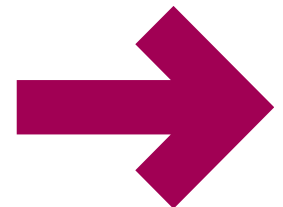
*“..not on new structures but on the people who work in health and social care, who will need to adapt to new roles and services and learn new skills”.*

[Source: Council of Deans for Health, March 2015]



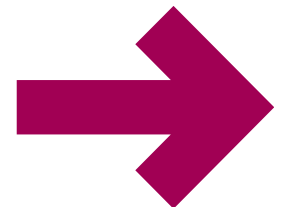
# Working in a different way

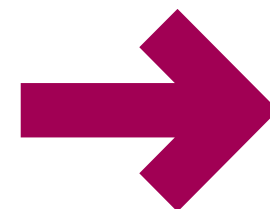
- Radical upgrade needed in prevention and public health
  - *Physical activity*
  - *Dietary habits*
- Support people to get and stay in employment
  - *Vocational rehabilitation*
- Patients gaining greater control of their care supporting self-management and self-care
  - *‘Caring to ‘enabling’*
  - *New skillsets e.g. motivational interviewing*



# The Leadership Challenge

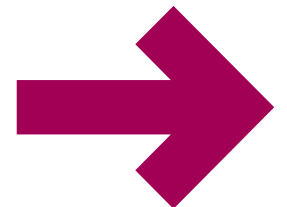
- “ AHPs are rarely the subject of major policy debates and there is concern that their contribution to care is often hidden, overlooked or potentially undervalued”  
*(Dorning & Bardsley, 2014)*
- Investment is needed in structured career pathways for the rehabilitation workforce
- We need to ensure that the rehabilitation voice is heard at ‘top table’ discussions
- Better still.....let’s see more rehab professionals sitting at the top tables!





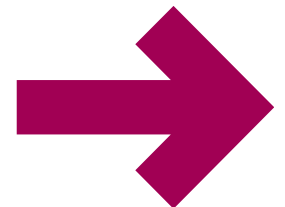
# Raising Awareness

- Rehabilitation as a philosophy of care across all pathways and health conditions which is essential to achieve the vision in the Five Year Forward View.
- Requires a shift away from focusing on the medical model; this alone will not deliver the return on investment and outcomes required.
- A bio psychosocial model will, and rehabilitation is the guiding philosophy to do this.



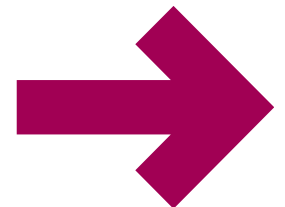
# Networks

- To disseminate best practice and to support adoption, networks are essential to deliver change at scale and pace.
- Networks support engagement, innovation, and improved patient outcomes



# National Framework for Rehabilitation

- Define what good looks like
- Have the tools to measure it
- Use this to continually drive rehabilitation across all pathways, for every episode of care to maximise mental and physical health, independence and occupation.



**Rehabilitation  
is everyone's  
business.**

**Thank you**

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