

SCOTTISH PARLIAMENT ELECTION 2021

The Royal College of Speech and Language Therapists asks the next Scottish Government and Parliament to establish a 'Right to Rehabilitation'

THE VISION

Establishing a right to rehabilitation would mean that every Scot with long-term conditions can live happier, more independent lives because they get quality rehabilitation when and where it works best for them – by right.

WHY DO WE NEED IT?

The COVID-19 pandemic and its after-effects mean more people need rehabilitation. All Scots living with Long Covid, Stroke, Dementia, Mental Illness, Parkinson's, Motor Neurone Disease, MS and many other long-term conditions need rehabilitation. Without rehabilitation, people are at risk of readmission to hospital, are more dependent on health and care services, and they and their families may struggle to return to work or live their lives to the full.

More than 20 third sector and professional health organisations – including The Health and Social Care Alliance – report that many people are doing without the rehabilitation they need to live the way they want to (see the *Right to Rehabilitation Coalition Briefing*).

The Social Care Review calls for a change on the narrative on social care to include “A vehicle for supporting independent living”; “Enabling rights and capabilities” and “Preventative and anticipatory”.

The review sets out the following vision: “Everyone in Scotland will get the social care support they need to live their lives as they choose and to be active citizens. We will all work together to promote and ensure human rights, wellbeing, independent living and equity.”

It goes on to say, “Elements of an ideal model of social care would include... funding for community rehabilitation, and a shift away from crisis intervention to a much earlier, more enabling, person-centred, model of care.”

The human rights-based approach recommended by the Review specifies, “People must be able to access support at the point they feel they need it.”

Recommendations on models of care say, “The Scottish Government should carefully consider its policies, for example on discharge arrangements for people leaving hospital, to ensure they support its long-held aim of assisting people to stay in their own communities for as long as possible”; and, “Investment in alternative social care support models should prioritise approaches that enable people to stay in their own homes and communities, to maintain and develop rich social connections and to exercise as much autonomy as possible in decisions about their lives.”

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REHABILITATION WHEN AND WHERE IT'S NEEDED:

- enables people to live independently, self-manage their long-term condition and support them to return to work
- improves physical and mental health and wellbeing
- reduces hospital admissions



WHAT WOULD IT INVOLVE?

- The Right to Rehabilitation being incorporated in a new national Health and Social Care Strategy.
- Leadership roles for allied health professionals, as the rehabilitation experts, on health boards and Health and Social Care Partnership Boards, would drive a 'whole systems' approach to meeting the rehabilitation needs of the local population.
- Employing more allied health professionals in the NHS and National Care Service – such as speech and language therapists, occupational therapists, physiotherapists, dieticians and podiatrists. Allied health professionals are the experts in rehabilitation. They help people back to health following injury or illness, and support people to manage long-term conditions, fulfil their potential and enjoy quality of life in their community.

HOW MUCH WOULD IT COST?

We don't know the costs of providing all the rehabilitation people need but we do know the costs of no or too little rehabilitation. These include unemployment, mental illness, social exclusion and higher dependency on public services.

HOW WOULD IT BE PAID FOR?

A Right to Rehabilitation would be paid for by the money saved on avoidable hospital and social care.

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