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Short briefing ahead of the Debate on the Health and Social Care Committee report: Hospital discharge and its impact on patient flow through hospitals on Wednesday 12th October

Allied Health Professionals (AHPs) including physiotherapists, occupational therapists, speech and language therapists, podiatrists, dieticians and radiographers have a key role to play in supporting timely discharge and effective patient flow through hospitals. Professor David Oliver, Visiting Fellow from The King's Fund has stated that

'AHPs are critical in getting patients back to their own home quickly from the front door of the hospital and ensuring good inpatient rehabilitation and discharge planning.'¹

As AHP professional bodies, we were pleased to provide written and oral evidence as part of the above inquiry. We warmly welcome a number of key recommendations within the committee report as discussed below;

Recommendation 7. The Welsh Government should increase funding for reablement and home therapy services and work with partners to establish a comprehensive wrap-around rehabilitation service.

Our members report that the main barrier for many services is the lack of capacity within the social care system to support frail, elderly patients in the community. However, as we highlighted in our evidence, limited capacity within community rehabilitation services in some areas is also a contributing factor. Rehabilitation cuts across the health and social care systems supporting people in different settings, and often reducing the need for care and hospital admissions. Our members tell us that despite the impact of high-quality rehabilitation on quality of life and long-term NHS and social care costs, community rehabilitation is often piecemeal and varies significantly depending where you live in Wales.

We warmly welcome this recommendation in addition to recommendation 2 – namely that the Welsh Government must ensure that the new Health & Social Care Regional Integration Fund is effective in identifying and mainstreaming successful projects which improve patient flow into

¹ <https://www.kingsfund.org.uk/about-us/whos-who/david-oliver>



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common practice across Wales. The quarterly status reports should therefore include an assessment of progress in developing and rolling out projects to improve patient flow.

We have long called for sustainable funding for rehabilitation and reablement and a move away from funding via short term monies such as the integrated care fund and transformation monies. It is essential that the Regional Integration Fund prioritises the identification and mainstreaming of such services to maximise people's ability to live as well as possible for as long as possible. We believe the proposal to include an assessment of progress in developing and rolling out projects to improve patient flow as part of quarterly reports would be very helpful.

We would further stress that the impact of AHPs in providing rehabilitation and reablement is far wider than its impact on hospital admissions. It keeps people mobile and independent with consequent impact on their mental wellbeing, their impact to work and participate in society and a reduces health inequalities. It is vital that every person has equal access to high quality, person-centred, community rehabilitation.

Recommendation 10. The Welsh Government should clarify its expectations about the availability of allied health professionals in different health and care settings, and set out how it will work with health boards to increase the presence of such professionals at the "front door" of services, particularly GP surgeries and A&E departments. In doing so, the Welsh Government should identify how any barriers to increasing allied health professional availability, including the need for any capital investment in estates or facilities, will be addressed

We are very supportive of this key recommendation. There are numerous examples of good practice in the availability of AHPs at the front door of services but a lack of consistency in roll-out across Wales. This is particularly true in primary care, where a particular AHP role may have emerged at cluster level, with demonstrable positive outcomes, but there is no scale or spread of this innovation, resulting in inequitable access across Wales.

It is vital that workforce planning takes account of the growing need for AHPs within primary care and at the front door of hospitals so we can realise the full potential of our professions. This should include pre-registration courses and also consideration of other routes into the professions such as apprenticeships. We also need to see investment in advanced practice roles in primary care and the development of appropriate career frameworks.



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Further information

We would be happy to provide further information if this would be of benefit. Please see below our contact details.

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