

## **Tell the NHS Ten Year Plan what matters to you**

Karen Middleton, chief executive of the CSP, today called on everyone working with and within the NHS in England to contribute to their new *Ten Year Plan*. Your participation can make sure the NHS prioritises rehabilitation, early intervention and prevention over the next decade.

NHS England is setting out its ambitions for service improvements for the next ten years, and a detailed strategy for how to achieve these over the next five. The CSP is working hard to ensure the physiotherapy workforce is listened to as the Plan is developed.

Now NHS England is asking patients, staff and professional networks to contribute their own ideas, experiences and insights. The voices of CSP members need to be part of this.

### **The consultation – the CSP's view**

The CSP is asking for significant developments in rehabilitation, early intervention and prevention. A commitment to make these services core values underpinning the Plan would not only improve our health and wellbeing – it is a financial imperative. NHS and social care costs are spiralling due to a failure to provide adequate rehabilitative and preventative care.

The consultation covers a number of areas. Here are some key CSP messages for the Plan:

#### **Staying healthy**

A society-wide increase in physical activity would reduce health inequalities and improve mental and physical health. The physiotherapy workforce has an important role to play – as a source of expertise for the public and colleagues on physical activity for people with long term conditions.

The CSP believes the Ten Year Plan should include commitments for:

- All healthcare professionals to share a goal of supporting patients to be mobilised as soon as they can be, and equipped with the training needed to support this;
- All people who seek advice or treatment from the NHS for physical or mental health issues to be provided with physical activity advice to support ongoing self-care.

### Community-based rehabilitation services

NHS England is interested in improving cancer, cardiovascular and respiratory services. In ten years' time, we should expect that everyone with heart disease, stroke, COPD and cancer – in addition to hip fracture – be provided with rehabilitation compliant with NICE recommendations.

But we also want rehab pathways to be developed to move beyond this, with: community services developed around patients' specific symptoms and needs, not their condition; continuity of services from hospital to home; and patients able to re-access rehabilitation services as necessary, rather than having to go back to the start of a pathway for a referral.

This needs investments for expansion. Rehabilitation services are over-stretched and there are major gaps and inconsistencies in current care for patients. In ten years' time we need to be directing a far greater proportion of the NHS resources on supporting people to recover and rehabilitate, and services that meet people's needs outside of hospital and in their own homes.

This could be achieved through:

- A new approach to community rehabilitation pathways for major conditions, which guarantees continuity of care and allows patients to move between disease-specific rehabilitation teams and expert-generalist rehab services;
- A review of tariff and commissioning practices and pump-prime funding, so that the community rehabilitation element of care is properly budgeted for and incentivised.

### Workforce

The physiotherapy workforce needs to grow, within broader changes to our health and care workforce. Growth is required across all professions, but with nurses, physiotherapists, other AHPs & non-medical professionals and support workers forming a larger part of the workforce.

The good news is physiotherapy has the potential to be a workforce solution like never before. Our workforce is expanding, with a 40% increase in England student places between 2015/16 and 2018/19.

As important as expanding supply is investment in the existing workforce. The health system's skills requirements are changing – with staff needing to work at the height of their capability, support multiple long term conditions, and increase capability for self-care. The Plan must focus on the continuous professional development of the non-medical workforce: with prioritisation for transformative roles enabling shifts towards prevention, early intervention and rehabilitation.

This could be achieved through a system-wide review of overall levels of investment in training and development across the medical and non-medical workforce, leading to resource distribution more in line with system need and patient demand.

### Primary care and aging well

Physiotherapists working in first contact practitioner (FCP) roles are tried and tested within primary care. The Plan should ensure everyone in England has access to a FCP from their GP – so that a majority of musculoskeletal (MSK) issues are dealt with entirely within primary care.

FCP roles should also be developed further. FCPs could provide physical activity advice to people with other long term conditions, and identify and work those at risk of frailty and falling.

**This could be achieved by** the national roll out of FCP roles as part of an integrated MSK pathway, and a review of the role of beyond MSK. **Making** FCPs accessible from general practice should be made a part of NHS planning guidance, with financial systems put in place to incentivise improvements MSK care and multi-disciplinary working in primary care.

### *Good practice and barriers*

The consultation also asks for examples of good services or ways of working that should be spread across the country, and barriers to improved health and care outcomes.

### *What happens next?*

As many members as possible need to respond to the NHS England consultation. NHS England's full [consultation questions](#) and [feedback form](#) are available online – deadline 30 Sept. The Ten Year Plan is due to be published in November.

For more information about how the CSP is responding to the Plan, or discuss developing a response for yourself, your employer or professional network, please contact [Robin Hinks](#), [CSP Research and Policy Officer](#).