

FINANCE AND CONSTITUTION COMMITTEE

PRE BUDGET SCRUTINY 2021-22 SUBMISSION FROM THE ROYAL COLLEGE OF OCCUPATIONAL THERAPISTS

The Royal College of Occupational Therapists (RCOT) is the professional body for occupational therapists and represents over 33,000 occupational therapists, support workers and students from across the United Kingdom. Occupational therapists have a unique skillset offering support to people with physical and mental illnesses, long term conditions, and / or those experiencing the effects of aging.

The Royal College welcomes the Committee's call for views on the impact of COVID-19 on the Scottish Government's 2021-22 Budget, as part of its pre-Budget scrutiny. This response will focus on the following question by the Committee – *What should be the priorities in Budget 2021-22 in addressing the impact of COVID-19?*

The RCOT's response will focus on the following three areas:

- Rehabilitation
- Primary care
- Housing

Rehabilitation

The true health impact of COVID-19 continues to evolve across the UK. It has, however, highlighted how important access to high quality, person-centred community-based care is. The RCOT is expecting to see a high demand for rehabilitation services in the immediate future.

Some estimates state that nearly 50% of people who have been in hospital with COVID-19 are likely to need some form of rehabilitation as part of their recovery with a further 5% requiring more intensive rehabilitation. People who have had COVID-19, especially those who received intensive care treatment, are likely to have multiple rehabilitation needs, including emotional and mental health needs, respiratory problems, cognitive problems, fatigue and reduced mobility.

Further, we also need to acknowledge the need for rehabilitation is far bigger than those recovering from COVID-19:

- Many of the estimated 120,000 people in Scotland who were self-isolating a due to their age and/or underlying health conditions are likely to have rehabilitation needs;
- There will be a back log of people who were receiving rehabilitation before the pandemic but were not able to access their normal services;
- There will be individuals whose diagnoses and treatment were delayed by coronavirus and will require rehabilitation in future.
- There will be individuals who, prior to the pandemic, were already on waiting lists for rehabilitation.



There will be unprecedented pressure on local rehabilitation services, including on paid and unpaid carers. These invaluable services will not only help people regain their independence, but also reduce the need for ongoing support from health and social care services. We must also consider the need to support people to return to work after a period of ill-health. The importance of work to individual's health and wellbeing is well documented¹. Evidence shows that of people admitted to intensive care units (ICU) for 3 days or more, less than one-third will have returned to their baseline function after 6 months.²

We believe that occupational therapists are uniquely placed to help meet this challenge of fulfilling patient's emotional, cognitive, mental and physical health needs. Occupational therapy restores a person's quality of life, giving them back their independence and reduces the need for ongoing health and social care support. As a key health and care profession, occupational therapy is the bridge between getting people from hospital into their communities and getting on with "real" life again.

The COVID-19 pandemic has presented a unique opportunity to consider how rehabilitation services are structured, led, prioritised, and resourced in the future. The Scottish Government should consider the need for locality-based services which require less travel outwith communities. Using locally available services can support rehabilitation, and help older people remain connected to their communities by having locally produced meals and deliveries form local shops.

We have also seen the impact on social care services receiving hospital discharges to ensure capacity within the acute hospitals. Social care services need to be adequately resourced to support individuals in a timely way. Regardless of location or geography, people must have access to rehabilitation appropriate to their needs.

The Scottish Government should use the 2021-22 Budget to:

- Prioritise rehabilitation and provide greater investment to this area to ensure everyone who
 needs it has access to high quality, person-centred rehabilitation after discharge from
 hospital.
- New investment or service restructure should include expanding and retaining the
 occupational therapy workforce. Investment in occupational therapy is an investment in
 getting people from hospital into their communities and social groups and being able to get
 on with their real life.
- Social care systems and future delivery should be restructured to focus on a personal outcomes approach. Interventions should be focused around a "what matters to me" approach.

Primary Care

The primary care model in Scotland has started to change and look towards developing further in the future. In 2018, the revised Scottish GP contract set out additional provisions for pharmacy,

¹ http://www.healthscotland.scot/media/1256/inequality-briefing-2-good-work-for-all_sept2016_english.pdf

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5710341/ (Detsky et al, 2017)



musculoskeletal physiotherapy services and mental health support. This has improved multidisciplinary working and has integrated services, however, the RCOT believe this can be enhanced further. The pandemic has highlighted how important having multidisciplinary teams at all levels in the health care system is.

The RCOT wants to build on these positive changes and believe that occupational therapists should be based within GP practices as core members of multidisciplinary teams to empower people to manage their own health and independence by using tools and strategies to enable them to live independently. This will create a fundamental move to person centred care that is focused on what is important to the individual, which we believe is required in primary care. This change has already begun with pilot studies within NHS Lanarkshire, the results of which have revealed that having an occupational therapy service within GP settings can reduce the number of repeat appointments and prescriptions. Freeing up appointments and ensuring patients see the right health professional at the right time is something which is hugely important and all the more vital while primary care services adjust to the long lasting effects of the pandemic.

The Scottish Government should use the 2021-22 Budget to:

- Provide funding to expand the current NHS Lanarkshire to a cluster of GP practices in Scotland in order to measure the patient benefits of having direct access at a local level to occupational therapy services.
- Support vocational rehabilitation services which help people remain in or return to work after a period of ill-health.

Housing

The benefits of adapting the home are recognised as an effective way to improve the health and wellbeing of older people, and disabled adults and children. A more accessible home environment can improve independence, reduce risk and reduce reliance on assistance.³

Prior to COVID-19 there were already delays in the delivery of minor and major housing adaptations. However, during the pandemic adaptations were suspended which has had a negative impact on individuals requiring support. A longer wait for an essential adaption could make life much more difficult for that individual and increase the dependency of an individual on paid or unpaid support during the extended waiting period.

There is also significant local variation in the allocation of funding for adaptations, leaving people vulnerable to poor health outcomes, increased care needs, and higher demand upon health and care services. Steps should be taken to increase the efficiency of the adaptations process, by implementing the guidance within the RCOT report <u>Adaptations without delay</u>. The report set out a better way of defining assessment and delivery of adaptations based on complexity with an associated decision-making framework. The guide provides recommendations to reduce delays in the delivery of adaptations by providing tools that support a proportionate response. It also ensures the specialist skills of occupational therapists can be used to work with the growing number of individuals whose circumstances are complex. There are current examples of good practice in this area, for example in East Lothian, where occupational therapists are training and working

³ https://www.rcot.co.uk/adaptations-without-delay



alongside community care workers to specify and oversee the provision of adaptations for residents of all tenures in a timely and equitable manner. There is, however, more to be done, especially post-COVID to manage long term impacts of the disease on an individual's functional ability and independence.

To improve equity and consistency across tenure and postcodes, the Scottish Government should use the 2021-22 Budget to prioritise adaptations by increasing funding, to enable people to remain in their existing homes if their needs change as a result of age, illness or disability

About the College

The Royal College of Occupational Therapists (RCOT) is the professional body for occupational therapists Occupational therapists work in the NHS, Local Authority social care services, housing, schools, prisons, care homes, voluntary and independent sectors, and vocational and employment rehabilitation services.

Occupational therapy improves health and wellbeing through participation in occupation. The philosophy of occupational therapy is founded on the concept that occupation is essential to human existence and good health and wellbeing. Occupation includes all the things that people do or participate in. For example, caring for themselves and others, working, learning, playing and interacting with others. Being deprived of or having limited access to occupation can affect physical and psychological health.

Contacts

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