

## **Inquiry into regulation of care for older people**

### **Chartered Society of Physiotherapy (CSP) Scotland**

The Chartered Society of Physiotherapy (CSP) Scotland has read with interest the Committee's report into the above Inquiry and is pleased to provide short written contribution in response.

#### **Physiotherapy and care for older people**

Physiotherapists support older people and their families and carers through care pathways, from living in their own home, to hospital admission, to supported return to living in their own home through to a decision to enter residential/nursing home care. Physiotherapists will be concerned with the individual's physical capabilities and what they wish to do, how they can function with a particular ability/disability and what support they might need. They are also able to holistically identify cognitive, social environmental and emotional barriers and address these, or signpost to appropriate services. Physiotherapy is primarily the use of physical means to restore reduced or impaired activity.

As people age their health is commonly affected by:

- a decline in free and independent movement because of stiffer joints or weakened muscles
- difficulties balancing and the anxiety and fear of falling, which prevents participation in usual activities
- the debilitating physical effects of stroke, dementia, Parkinson's disease and other long-term conditions.

Physiotherapy intervention can help people in such cases, by providing rehabilitation services to aid recovery after illness or injury, helping people remain active and independent, and improving balance and muscle strength to avoid falls – the biggest cause of hospital admissions for older people in Scotland. Physiotherapists work in hospitals, community settings and in patients' homes. They have core and advanced knowledge and skills in reablement through which they:

- prevent frailty through evidence-based exercise programmes
- restore independence through falls care pathways
- promote bone health and reduce accidents through encouraging physical activity and active lifestyles
- lead falls clinics where at risk people receive thorough assessment and tailored advice.
- identify underlying pathologies, including osteoporosis, and signpost to other specialists.

The potential savings from fragility fracture prevention alone are significant, with costs estimated by Age UK to be £4.6 million per day (£1.7 billion per year) for the UK health economy. Physiotherapists can lead and input into

many aspects of fragility fracture and falls prevention programmes, and physiotherapy should be part of these services across all settings.

### **Physiotherapy in residential care settings**

CSP Scotland promotes investment to support people to stay in their own home, and this is critical to the sustainability of the residential care provision. The reablement agenda is a vital element to supporting older people to remain in their own home if they so wish. However, if people require residential/nursing home care, physiotherapists can still work with individuals and staff to maximise an individual's independence, function and quality of life.

Physiotherapists are regulated by the Health Professions Council (HPC) and have a duty to maintain their skills and uphold professional standards of practice. As part of multi-disciplinary teams, physiotherapists can work with residential home staff to instil an enablement and empowering approach. As older people progress through the care pathway the approach of physiotherapists strives to ensure consistency of care and promotion of independence.

The CSP recognises the challenges placed on the residential care and nursing home sector in terms of meeting the demand for services, and would assert that well being, health promotion and preventative care must remain priorities in older peoples care. Reablement services present an opportunity for health and social care to work in an integrated way and successful services assist older people to maximise their capability on discharge from a hospital admission or following an acute event. However, reablement services provide many challenges. In both domiciliary and residential care, need access to rehabilitation to optimise function, improve quality of life, decrease level of care, and also enable discharge home or support transfer back from nursing to residential type care.

CSP Scotland supports the increased involvement of health professionals in the scrutiny of services and the testing of self assessment versus service-user assessment process. CSP Scotland recommends a baseline review to determine current provision and identify areas of good practice. Access to leisure activities and exercise should be included in such a review. Many homes provide a wide range of activities and excursions, whilst others may be more limited. Inspection and reporting should support quality standards.

### **Concluding comment**

CSP Scotland welcomes the above Health and Sport Committee Report and considers it to be an important contribution to ensuring quality care for older people in Scotland. The Society supports the contribution of health professionals in maintaining quality standards and the recognition of the professionalism and expertise they bring to the care of older people.

The Chartered Society of Physiotherapy Scotland