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# **NHS Right Care Community Rehabilitation toolkit:** Physiotherapy Services Checklist

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# Introduction

The NHS Rightcare Community rehabilitation toolkit was developed in England. However the principles underpinning high quality rehabilitation apply equally across all four countries.

Across the UK there is currently significant variation in the provision and quality of rehabilitation across the whole patient pathway. This results in an over reliance on the most expensive parts of health and social care systems. These gaps in provision and quality are a particular issue for the increasingly complex patient population, presenting with more than one long-term condition. The significant reference to rehabilitation in the [NHS Long Term Plan](#), and a commitment of £2.8 billion ring-fenced is a unique opportunity to transform community services. In May 2020, the Welsh Health Minister announced £10 million for local boards to increase capacity in community-based services.

The CSP and other key stakeholders have worked with NHS Right Care to develop the [Community Rehabilitation Toolkit](#). The toolkit defines and describes the key priorities required to deliver high quality community rehabilitation services and provides specific guidance as to how a seamless pathway can be organised and commissioned.

Community rehabilitation is an important component of the NHSE Ageing well and community health programme. The key targets (#2hour2days) from the [NHSE Ageing Well and Community Health](#) programme have been included in the toolkit. These targets, specifically, provide opportunities to assess and benchmark current systems and identify areas for improvement.

Throughout the toolkit, the definition of community rehabilitation is deliberately broad; inclusive of all aspects of rehabilitation and reablement outside of the acute sector and of transition arrangements. There are contributions from a range of professionals (including the voluntary and exercise sectors), as well as health service and social care providers.

It will be commissioners and decision makers who will find the toolkit most useful. However, it is also an opportunity for physiotherapists to highlight their contribution to community rehabilitation. Based on the overarching principles within the toolkit, the CSP has developed a checklist for community physiotherapy. This will enable you to identify both the specific strengths of your services and the areas for improvement. This information will put you in a stronger position to engage in effective dialogue with community rehabilitation services commissioners and decision makers.

## Service Readiness Checklist

### 1. Population identification and segmentation based on symptoms, function and need

Does your service specification clearly define the scope of your service, and include:

- Waiting times
- Number of referrals made to service per annum  
(*diagnostic codes if possible*)
- Source of referral, e.g. GP, open access, self-referral
- Gender and age breakdown
- Referral criteria
- Employment status and work absence
- Assessment tools used (*e.g. measure of complexity*)
- Discharge reason

Can you describe how your physiotherapy service can contribute to the objectives such as the JSNA in England or Health and Social Care strategic plans in Scotland?

Can your patients, families and carers recognise their own signs of deterioration that could benefit from the input of rehabilitation services?

Is there a plan to train all staff to use the Community Services dataset (England)?

### 2. Supporting people to stay well and maintain independence

Is there a clear way for patients/the public/carers to access the service?

Do you maintain an up to date directory of local community services to signpost patients?

How do you develop and maintain relationships with these services? e.g. are there opportunities for joint training sessions?

Is there a system in place so these local community organisations can seek physiotherapy input or guidance to help support their clients if required?

Is there regular and ongoing training for the CR team in the principles of Making Every Contact Count/Brief Intervention Training?

### 3. Prevention of escalation and restoration of previous function

For patients at risk of deterioration, is there a system in place to enable rapid access for a rehabilitation assessment?

Is there a system in place to recall patients every six months for review of their rehabilitation needs?

Do you provide a patient passport to enable smooth transition between services?

### 4. Supporting the hospital/community interface

Do you have an easily accessible rapid response service, for when patients are in crisis?

Are there systems in place to ensure there is a smooth transition between acute and community services?

Are there systems in place to ensure access to specialist services? (e.g. *neuro rehab*)

Do you offer a seven day a week service and/or extended stay?

### 5. Integrated approach to community rehabilitation

Are there opportunities for services to host joint learning and pathway improvement discussions?

Is there support for the team to access the most up to date evidence of effectiveness?

Are there opportunities for staff to experience different elements of the pathway?

Do you have regular meetings /networking opportunities with those services from which you take referrals?

Have you considered the use of a single patient record across the whole pathway?

### 6. Match workforce to population needs

In order that workforce can be matched to population rehab need, have you recently undertaken a review of the existing physiotherapy workforce to understand skills availability and and maximise skill mix?

Does your service participate in regular multidisciplinary meetings?

Have all of your team gone through a job planning process to ensure that you can meet the needs of your population now and in the future?

### 7. Improving data for rehabilitation services

Have you an agreed set of outcome measurement tools, appropriate for the client group, that demonstrate the effectiveness of your service?

Does the service have the opportunity to participate in national audit?

Could you describe how your service uses the findings from national audit to look for opportunities to improve patient care, outcomes and service delivery?

Does your service contribute to the Community Services Dataset?

Is there a regular opportunity for you to share your improvement work with key stakeholders, e.g. decision makers and commissioners?

## 8. Timely access to technology, facilities and patient equipment

Do you have a system in place to ensure that patients have the right equipment, delivered in a timely manner, to enable them to maintain their level of function?

If a patient is transferred between settings, do you have a system in place to ensure that the supply of appropriate equipment is a priority?

## 9. Person-centred care

Do you regularly ask patients if they feel actively involved in shared decision making and are supported to self-manage their condition when appropriate?

Does your team have access to development and training opportunities in the most up to date person-centred care approaches?

Do you have a system for dealing with personal health budgets? (England)

## 10. Experience of care

Do you regularly collect, analyse and act on information from patients about their rehabilitation experience?

Do you use the experience of care feedback from patients and carers on an ongoing basis to improve and develop services?

Do you work with third sector organisations to engage and support patients to access services, particularly in more disadvantaged groups who may not be accessing services?



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## THE CHARTERED SOCIETY OF PHYSIOTHERAPY

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