The Royal College of Nursing in Wales welcomes the opportunity to respond to the Welsh Government consultation on Together for Health – A Respiratory Delivery Plan.

The absence of any mention of nursing within this document is not only demoralising for our members it also undermines the credibility of the document’s plans and attempt at a holistic overview. The nursing profession has a large role to play at every stage set out in the plan from prevention and detection in primary care by practice and community nursing teams through to the delivery and coordination of treatments by Clinical Nurse specialists and Advanced practitioners.

Prevention

The Plan needs to acknowledge that prevention is critical in reducing respiratory disease in the Welsh Population. It is important that people are helped to be made aware how to live a healthy lifestyle, make healthy choices in order to minimise their risk of respiratory disease. Preventive Strategies for Respiratory conditions need to be designed with and implemented alongside those for other conditions such as cardiac, diabetes and stroke.

The Delivery plan should be more joined up with the other Delivery plans and especially for prevention, link closely with the Cardiac, Stroke and Diabetes Delivery Plans.

A number of factors in society affect the health and well-being of the individuals. This include social connections, relationships and networks, employment, the impact of the local economy, a person’s housing circumstances, their physical and social environment and their educational achievement. Many of the health behaviours that are significant to the development of chronic disease are associated with social and economic deprivation across all age ranges.

Tackling the problem of smoking is therefore complex and requires action at a number of levels. Whilst the document recognises states that levels of respiratory disease in areas of social deprivation are of particular concern the vision statement still focuses on people taking personal responsibility for their lifestyle choices. This is too simplistic an approach and is based on the premise that all individuals have complete control over their health related behaviours.

The RCN welcomes the link made to the Tobacco Control Action Plan, but are concerned that the ambitious targets set in the action plan for 2020 will not be achieved. Smoking rates among adults have reduced since 2003, but this reduction has slowed in recent years and has now stalled (results of the Welsh Health Survey 2012 show that the smoking rate in Wales has remains static since 2010.) Of significant concern however is that adults living in deprived communities are more
than twice as likely to smoke (34 per cent) as those living in less deprived areas (14 per cent). Prevention programmes to date have obviously failed to address this, and may have indeed contributed to the growing gap between life expectancy of those in our most deprived areas and those in more affluent areas. Public Health programmes must be ‘poverty proofed’ and as such the RCN would like to see more emphasis on what can be done to tackle the links between poverty and ill health in both this delivery plan and the forthcoming Public Health Bill.

In this section of the plan we would also like to see a distinction between reducing the numbers of those currently smoking and the need to prevent the uptake of smoking by young people. Both are necessary if we are to reach the ambitious targets set out in the Tobacco Control Action Plan. This is clearly recognised in the latest Chief Medical Officer’s report and should therefore be reflected in this document as well. School nurses have a key role to play here, in not only in prevention activities but also supporting young people who may have already started smoking to quit.

As members of the Tobacco Control Alliance we are aware that the Tobacco Control Delivery Board is not operating effectively. Ash Wales have called for a review of the Delivery Board to ensure that it has sufficient resources and operates at a suitably senior level and the RCN in Wales is fully supportive of this call.

Detecting Lung Disease Early

Prompt diagnosis of respiratory diseases is essential. Increased public awareness of the symptoms of lung diseases and the risks posed by smoking and delayed diagnosis or treatment is needed. This information should be available to the population of Wales as a whole rather than dependence on individual Health Boards to raise public awareness based on models of local prevalence.

There is a lack of focus in the document on the care and support to children with asthma. Paediatric nurses are key to supporting children with asthma to learn about and manage their condition. The involvement of these specialists early on will enable individuals to minimise the risk of developing long term complications and to manage their condition in a way that maximises quality of life and reduces dependence on the health system.

Delivering Fast, Effective Care/ Supporting Living with Diabetes

The outcomes and actions in these sections are laudible, and focus on ensuring that people with chronic lung disease have as few hospital admissions as possible, have quicker discharge and have services as close to home as possible. We have previously voiced concerns in responding to other Welsh Government Together for Health Delivery Plans that there are significant challenges regarding workforce

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issues. District Nurse numbers are declining and this is set to increase as significant numbers are set to retire in the next ten years, without any apparent national succession planning in place.

It is also widely acknowledged that there are medical recruitment problems in Wales which is one of the major drivers for current NHS reconfiguration plans, yet this is not acknowledged in the document. Consultant Nurses are ideally placed to offer nurse lead clinics close to people’s homes and with support could provide the clinical lead for a discrete geographical area.

Our members tell us that whilst there are Early Supported Discharge schemes in Wales as well as Pulmonary Rehabilitation schemes these are patchy and models differ depending on Health Board. We are also concerned that there is no dedicated pathway for the end of life care of individuals dying of respiratory diseases.

**Improving Information**

The provision of information should be an essential component of both the prevention and management of respiratory conditions. It is a positive development therefore that NWIS will develop IT systems to provide timely access to accurate, current clinical information critical for the efficient and effective management of people with respiratory disease. It is however equally important that resources are directed at prevention as well as management of the condition.

Information for the public needs to be accessible, clear and understandable.

**Targeting Research**

Will the proposed changes to the National Institute for Social Care and Health Research funded infrastructure and programmes have an impact on the activity proposed in this section?

**Working together**

The RCN is supportive of the formation of an All Wales Respiratory Services Implementation Group and are pleased that Health Boards will be required to produce a Local Delivery Plan. However these local delivery plans MUST be cognisant of the national indicators and performance measures and should be assessed at a national level rather than ‘self-assessed’ at a local level. Given the overlap between Delivery Plans, especially in relation to the prevention sections we would like further clarification on how Welsh Government, and the different All Wales Implementation Groups will work together to ensure synergy.