

Analysis of the consultation documents for specific Trusts, which have so far been available to RCN Policy Unit indicate a number of emerging themes in a variety of areas:

The Case for Change

In every case, financial deficits are given as the primary reason for

acute Trust's consultation on its service review and strategy for reconfiguration:

This document highlights posts which may be removed as a result of reviewing skill mixes, restructuring roles and departments and introducing new ways of working...The changes being proposed will bring efficiency and improvements in the Trust resulting in an overall better experience for patients and stakeholders

The Effects of restructuring and at-risk strategies on nurses at NHS Trust level

On the basis of the limited amount of information and data so far available to the Policy Unit a number of key features and themes appear to be emerging from the financial recovery and service reconfiguration plans. The following appear to be priority issues for consideration by the RCN and it's representatives:

- € A potential threat to a significant and disproportionate number of nursing posts at AfC Band 7 and 8 posts at-risk as a result of skills mix reviews. This would indicate that nurse practitioner posts and nursing specialities are being consistently put at-risk as organisations seek to rationalise management functions.
- € Specialist nurse practitioner posts being replaced or adapted to take on increasing managerial roles as a result of skills mix reviews and the need to cascade down management responsibilities.
- € In acute services, even allowing for their relative domination of the workforce budget, the proportion of nursing posts at risk is significantly greater than any other discipline.
- € The threat to posts within nursing directorates is not limited to AfC grades 5 and above with posts in all grades at risk, especially as result of service reviews which result in ward closure and hospital

- € reduce post-registration commissions by 10-20%

Furthermore, some SHAs make a statement regarding the requirement for NHS Trusts and PCTs to realise the outcomes of the “AfC benefit acquisition plans”.

Effects of recovery plans and restructuring on services to patients

The main effects of the recovery plans on services to patients have included:

- € Increasing distances and travel times to services, especially in rural areas, where services and facilities have been closed, consolidated on specific sites or relocated in rural areas, further exacerbated where Ambulance Trusts are reducing non-emergency services. (United Lincolnshire Hospitals Trust/ Gloucester)
- € Loss of or reduced access to specialist services as senior nursing practitioners and Modern Matron posts are reduced. (Queen Mary’s Sidcup/ North Tees and Hartlepool NHST)
- € Loss of access to local specialist services due to site closures and service consolidations. (North Staffs NHS Trust/ Kingston PCT)
- € Failure to meet 18 week waiting list targets due to a need for all services to meet cost improvement targets. Pioneer Trusts have already identified extensive waiting times of up to 9 months for some diagnostic and specialist services and concerns are expressed that cost improvement plans will make it impossible for Trusts to meet 18 week waiting time targets until 2009/10. (HSJ 5th April 2006)
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