EDITORIAL

No time for gloating over halt to reforms

I despair of politicians. While health professionals await the fall-out of delays to the Health and Social Care Bill – the inevitable knock-on effect on progress, not to mention the spiralling costs of the legislative process – each of the three main parties is claiming success at some level.

The Liberal Democrats demand gratitude for forcing their Conservative coalition partners to make key amendments to the Bill; the Conservatives say the 'fundamentals' of their plan are 'as strong as they have ever been', while the NHS rethink is proof that they can listen and learn; and Labour's response predictably amounts to 'I told you so: you can't trust the Tories with the NHS'.

'In the meantime we face a two-tier NHS as some areas forge ahead but others lag behind'

Of course, health professionals will be glad the Health Bill is not being pushed through in the face of widespread opposition. A total of 11 of the 13 demands made by the NHS Future Forum have been accepted by the government, including a dilution of Monitor's role in promoting competition.

GP commissioning consortia will be renamed 'clinical commissioning groups', involving patients and carers, plus 'a wide range of doctors, nurses and other health and care professionals'; and the fixed 2013 deadline for the commissioning hand-over to GPs is to be scrapped, with prime minister David Cameron promising that groups would not take control until they were 'good and ready'.

In the meantime, we face a two-tier NHS, as some areas forge ahead with the commissioning agenda, while others lag behind, leaving frontline health professionals to explain why patients face a blatant postcode lottery.

Now is not a time for politicians to gloat or squabble but for cross-party co-operation to ensure the NHS does not flounder while ministers score political points.

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ROSEMARY COOK

Make a renewed commitment to quality

Reports keep emerging about poor care, or even outright abuse, of patients by nurses. The most vulnerable – older people, those with disabilities and those in long-term care – have been the least protected when they most need to be.

Television companies don't seem to find it hard to find examples to expose, or to infiltrate their undercover reporters into the setting to make the programme. The enquiries into the Stafford hospital care scandal continue, with lack of basic nursing care under the spotlight. And now an editorial in the *BMJ* claims that 'we need to talk about nursing' – mirroring the title of Lionel Shriver's chilling, disturbing book about a psychopathic teenager who ruined a family.

Of course, many would claim that these cases are the minority, the aberrant few at the far end of the professional spectrum, who let down nursing. But we should never be afraid to ask – are they really? Or do many of us have experiences, maybe not as dramatic, but nevertheless painful, of colleagues falling well below expectations?

On the other hand, I recently had the experience of watching dozens of nurses – experienced enough to be cynical if they wanted, but choosing not to be – proudly displaying their commitment to the profession, their patients and the standards of care that we would all want for ourselves.

They were the QNI's new Queen's Nurses, at our awards ceremony. What was even more touching was the appreciation of relatives and friends who had come to see them receive their badges. It was clear they had no trouble believing in the concept and purpose of the QN title.

They were proud to see nursing expectations set out in this way and to hear the demand for high standards of care and commitment to a collective cause, to which their daughter, son, wife or husband had responded.

To some, the QN title is irrelevant. But I believe that there is something powerful about making a renewed commitment to the profession of nursing, and demonstrating that commitment daily, within a community of like-minded people across the country.

Rosemary Cook, director, Queen's Nursing Institute

IN MY VIEW

Nurses must lead change at local level

As a former district nurse, I understand the pressures the everyday caseload brings. I also know that district and community nurses often feel isolated from the primary care team. However, nurses have a once-in-a-lifetime opportunity to make the most of the current direction of travel in the delivery of healthcare.

Although GPs are being given more power to make decisions through commissioning consortia, nurses have a significant role to play, especially if they start to engage with community-led initiatives. These are often in areas that might seem peripheral but where evidence shows they play a vital role in prevention and wellbeing.

The Leg Club model is a good example. Care is delivered in a community setting and patients are encouraged to become more engaged in their treatment. More nurses are becoming involved in running Leg Clubs and the number of clubs is growing every year.

Leg Clubs have allowed nurses to challenge the traditional clinical role of the district nurse and instead create a role where they become more involved in the community they serve and are able to support patients in shared decision making. This matches the government's desire for greater individual and community involvement in the provision of health and social care.

Estimates put the cost of treatment for leg ulcers at £168–198 million a year. Given that many lower limb problems become evident in later life, and with the rise in the number of people over 65 in the UK, lower limb problems will increase in number over the coming years.

Our own evidence suggests there is a considerable cost saving per patient treated: the cost of a home visit by a community nurse is around eight times the cost of treatment within a rural Leg Club. In addition outcomes, in terms of healing rates, are better.

This is a convincing argument for any commissioning consortia but nurses must step up and meet the challenge in areas where provision of such services is light.

Ellie Lindsay, founder and lifetime president, The Lindsay Leg Club Foundation