Right to Rehab Coalition (RTRC)

A Right to Rehabilitation

#righttorehab

Rehabilitation is central to a sustainable health and social care system. It enables people to recover, stay independent, return to work, and prevents avoidable deterioration. Early access reduces hospital admissions, shortens length of stay and delays or prevents reliance on social care. It supports healthier communities and reduces long-term system costs.

A sustainable health service needs a Right to Rehabilitation

A Right to Rehabilitation is essential for Scotland's ambition to shift care into communities, reduce pressure on acute services and support healthier, more independent lives. Delivering it requires strategic leadership, clear access routes, dedicated investment, robust data and a workforce planned for the future.

Scotland faces rising demand from an ageing population, repeated winter pressures and increasing complexity of need. Current service models are heavily oriented toward crisis response, yet the biggest gains lie earlier in the pathway. Rehabilitation is the mechanism that makes this upstream shift possible.

Scotland's NHS is already under pressure from demographic change. Projections suggest that by 2034 Scotland's NHS could be managing around 1,300 extra unplanned hospital admissions every week due primarily to an ageing population, much of which could be mitigated by early intervention and community-based care including rehabilitation.

Despite this, access remains inconsistent, delayed or unavailable. Services are fragmented across health, social care and the third sector, with limited strategic oversight. National data on rehabilitation activity is almost non-existent. Allied health professionals, who form the backbone of community rehabilitation, have limited presence in strategic decision-making structures.

In 2024/25 more than 720,000 hospital bed days were occupied by patients who were medically ready for discharge, costing NHS Scotland at least £440 million in hospital bed costs alone. These delays also reduce capacity for planned care and contribute to inefficiencies across the system.[2]

Health and social care accounts for Scotland's largest area of public spending, with approximately £19.5 billion budgeted for 2024/25.[3]

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Scotland's long-stated ambition to move care into communities cannot be delivered without a coherent national investment in rehabilitation. Investments that reduce avoidable admissions and delayed discharges can shift spending from expensive inpatient care toward more preventative, community-based interventions.

Calls to Action

To embed a meaningful **Right to Rehabilitation**, Scotland requires clear national direction. The following actions form the core of a deliverable, system-wide approach.

1 A Rights-Based Framework for Rehabilitation

- Recognise rehabilitation as a core entitlement within health and social care. No one should be denied access or be assessed as having 'no rehab potential'.
- Embed national standards reflecting lived experience and service-user priorities.
- Guarantee timely, coordinated access for all who can benefit.

2 Strategic Leadership

- Appoint an executive-level rehabilitation strategic lead in every health board and health and social care partnership.
- Coordinate local planning and implementation of a national rehabilitation strategy.
- Establish national oversight with transparent reporting and accountability.

3 A Single Point of Access

- Create a single, accessible referral route for all rehabilitation services across health, social care and the third sector.
- Maintain UpToDate mapping of local services in health, social care and the third sector providers.
- Implement consistent triage and signposting to appropriate person-centred pathways.
- Reduce waiting times, repeated assessments and fragmented journeys.

4 Investment and System Incentives

- Introduce ring-fenced Scottish Government investment to expand community rehabilitation and shift the balance of care.
- Link local targets or outcomes to prevention, early intervention and supported discharge.
- Align financial and operational incentives so that early intervention, preventative care and community rehabilitation become standard practice.

5 National Data and Transparency

- Develop standardised national data collection on rehabilitation activity, waiting times, outcomes and unmet need.
- Publish comparative data to support improvement and planning.
- Integrate rehabilitation metrics into existing national performance and workforce planning frameworks.

6 Workforce Planning for Population Need

- Undertake long-term multidisciplinary workforce modelling across the NHS, social care and the third sector to meet rehabilitation needs.
- Expand education, training and recruitment supply based on projected need rather than current service configuration.

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A Human Rights Approach to Access

Rehabilitation supports autonomy, independence and participation in society. It should therefore be approached not as a discretionary service but as a core component of the right to health.

A human rights approach means:

- Access to rehabilitation should depend on need, not geography or local pressures. There should be options for self-referral and access should not have to depend on diagnosis.
- A single point of access. Services should be coordinated across sectors, bringing together health care, local authority services and the third sector – enhancing provision and reducing duplication and delay.
- People should have clarity on what to expect from rehabilitation through national service user standards, such as those endorsed by the Right to Rehab Coalition.
- Service-user standards on what people should expect from rehabilitation. The national adoption of standards, such as those endorsed by the Right to Rehab Coalition, to strengthen consistency and accountability across Scotland.

Why Community Rehabilitation?

Community rehabilitation is a core component of Scotland's health and social care system. It supports the national ambition to shift the balance of care from acute hospitals into community and primary care, enabling prevention, recovery and independent living.

Community rehabilitation is the planned, coordinated delivery of person-centred, goal-focused rehabilitation in non-acute settings. Its purpose is to prevent deterioration, restore or optimise function, and reduce avoidable reliance on hospital and long-term care.

Good Community Rehabilitation:

- Is delivered as close to home as possible, including people's homes, community clinics and primary care settings.
- Supports prevention, early intervention, recovery and reablement.
- Enables supported discharge and reduces avoidable hospital admissions.
- Is multidisciplinary and integrated, involving allied health professionals, nursing, social care and third-sector providers.
- Is shaped around individual goals, independence and participation in daily life.
- Functions as a system enabler, supporting hospital flow, healthy ageing and sustainable services in health and social care.

Community rehabilitation underpins Scotland's commitment to preventative, person-centred care and is essential to a sustainable health and social care system.

Summary

A Right to Rehabilitation is essential for Scotland's ambition to shift care into communities, reduce pressure on acute services and support healthier, more independent lives. Delivering it requires strategic leadership, clear access routes, dedicated investment, robust data and a workforce planned for the future.

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These actions are achievable and align with long-standing policy goals. Rehabilitation is not an additional service. It is the foundation of a sustainable health and social care system.

The Right to Rehab Coalition brings together over twenty organisations from across health and social care in Scotland who are committed to ensuring everyone has the rehabilitation they need.

1 Long term service demands Public Health Scotland 2024.
2 Delayed discharge census figures Public Health Scotland 2025.
3 Scottish Budget Scottish Government 2025.

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