

## **POLITICAL PARTY MANIFESTOS 2010**

### **1. SUMMARY OF KEY PLEDGES RELATING TO PALLIATIVE AND END OF LIFE CARE**

The three largest political parties have launched their manifestos for the election. Key pledges relating to palliative and end of life care include the following:

#### **LABOUR**

- Free one-to-one nursing for all cancer patients
- A guarantee to provide palliative care at home for everyone who wants it
- Building a National Care Service (NCS) free at point of use, with a Commission in the next Parliament to decide how this should be funded

#### **CONSERVATIVES**

- Will introduce a new per-patient funding system for all providers of palliative care
- £10m for children's hospices
- Will set up 24/7 urgent care service including GP out of hours, and an 'urgent care' national telephone number
- Voluntary funding for social care: people will have the option of making a one-off insurance payment of £8,000 to pay for residential care, and a 'top-up' option to receive care in their own home

#### **LIBERAL DEMOCRATS**

- No express references to palliative or end of life care, but related pledges include using funds set aside for the Personal Care At Home Bill to fund a week's respite care for the 1 million carers who spend 50 hours a week providing care
- Will establish an independent commission, with cross-party support, to develop proposals for long-term care of older people.

All 3 main parties want to give more control to people over their health and social care, including integrating services and enabling people to control their budgets, and also want to provide more care at home and in the community. This suggests that the personalisation agenda will be a priority whichever politicians are in power after the election.

## 2. THE MANIFESTOS IN DETAIL

### LABOUR

#### Palliative & end of life care

- All cancer patients to be offered 'one-to-one dedicated nursing' and everyone to receive palliative care in their own homes  
Exact wording: *"We will offer more personal healthcare. All cancer patients will be offered one-to-one dedicated nursing for the duration of their care and we will work with Marie Curie Cancer Care and other providers to guarantee everyone who wants it the opportunity to receive palliative care in their own home at the end of their lives."* (p.34)
- 'Support' will be offered to independent providers of end of life care  
Exact wording: *"We will support an active role for the independent sector working alongside the NHS in the provision of care, particularly where they bring innovation – such as in end-of-life care and cancer services, and increase capacity."* (p.32)
- Promises a 'major expansion' of care available at home and in community (p. 33) including "greater use of tele-care and personal nursing" (p. 46)
- Introduction of a National Care Service (NCS) for social care (p. 45):
  - From 2011, 400,000 people with the greatest needs will receive free care at home
  - They will create a 'national physio support service' helping people regain confidence after a crisis or the first time they need care.
  - From 2014 the costs of residential care will be capped so that peoples' homes and savings are protected from care charges after two years.
  - The NCS would be fully functioning 'after 2015', when a Commission would have determined the best way to pay for it.
- Everyone with a long-term condition will have the right to a care plan and an individual budget. (p. 34)

#### Health (general)

- All hospitals will become Foundation Trusts by giving those which already have the status incentives to take over others which are underperforming. Trusts will "be given the freedom to expand their provision into primary and community care", and to increase their private services where consistent with NHS values and lead to investment back into the NHS. (p. 32)
- Cancer guarantee - Cancer patients will see a specialist within two weeks of GP referral and receive tests results within a week of seeing their doctor. (p. 33)
- Dementia – "Better services for those with dementia and Alzheimer's so that every area of the country has access to psychological therapy, counselling and memory clinics." (p. 46)
- Right to see a doctor offering weekend and evening appointments and new ways of making appointments incl. a new national '111' telephone number (p. 33)
- Nurses - "We will expand the role of NHS nurses, particularly in primary care, in line with the best clinical evidence. And across the NHS we will extend the right for staff, particularly nurses, to request to run their own services in the notfor-profit sector." (p. 32)

#### Voluntary sector (general)

*"Britain has among the highest levels of voluntary membership in the world. We strongly value the independence of the voluntary and community sector, including its campaigning role, and will act to*

*maintain it. There will be greater support for third-sector organisations in competing for public-sector contracts, ensuring there is a level playing field with the public and private sectors.” (p.51)*

Labour will

- Promote “greater public involvement in the way that National Lottery proceeds are spent on good causes.” (p.50)
- Put the Commission for the Compact on a statutory footing and ensure greater support for the Compact at local level
- Expand Community Interest Companies and third sector mutual organisations through support from the Co-operative Party, Business Link, enterprise education and the Regional Development Agencies
- Reiterates a previous commitment to fund the Social Investment Bank through £75 million of dormant accounts money.
- Introduce a National Youth Community Service, with all young people contributing at least 50 hours by age 19

## **CONSERVATIVES**

### **Palliative & end of life care**

- Introduce a per-patient funding system for all providers of palliative care, and £10 million per year to support children’s hospices  
*“We will provide £10 million a year beyond 2011 to support children’s hospices in their vital work. And so that proper support for the most sick children and adults can continue in the setting of their choice, we will introduce a new per-patient funding system for all hospices and other providers of palliative care.” (p. 148)*
- 24/7 urgent care services throughout England  
*“We will commission a 24/7 urgent care service in every area of England, including GP out of hours services, and ensure that every patient can access a GP in their area between 8am and 8pm, seven days a week. We will introduce a single number for every kind of urgent care – to run in parallel with the emergency number 999.” (p. 147)*
- Personalisation and joining up health and social care  
*“Where possible we want to devolve control over health budgets to the lowest possible level, so people have more control over their health needs. For people with a chronic illness or a long-term condition, we will provide access to a single budget that combines their health and social care funding, which they can tailor to their own needs” (p. 148)*
- Social care reform – People can pay voluntary one-off insurance payment of £8,000 to ensure their homes won’t be used to be pay residential care (p. 148)
  
- General commitment to *“support older people to live independently at home and have access to the personal care they need.”* And to *“work to design a system where people can top up their premium – also voluntarily – to cover the costs of receiving care in their own home.” (p. 148)*
- General commitment to supporting carers *“We will support carers, and those they look after, by providing direct payments to help with care needs and by improving access to respite care.” (p. 148)*

## Health (general)

- A promise to 'back the NHS':  
*"We will back the NHS. We will increase health spending every year. We will give patients more choice and free health professionals from the tangle of politically-motivated targets that get in the way of providing the best care. We will give patients better access to the treatments, services and information that improve and extend lives, boost the nation's health, and reform social care."* (p. 145)
- Pledge to increase health spending in real terms every year.
- Will cut NHS administration costs by a third
- Will convert the DH into Department for Public Health with emphasis on prevention and health promotion
- Give patients the power to choose any healthcare provider that meets NHS standards (at NHS prices) including independent, voluntary and community sector providers
- Expand tariffs and payment by results systems
- Give GPs the power to:
  - hold patients' budgets and commission care on their behalf
  - have their pay based on the quality of their results
  - putting them in charge of commissioning local health services (p. 146)
- Publishing performance data of NHS providers online
- Putting patients in charge of their own health records
- Introduction of a new 'Cancer Drug Fund' to increase access to drugs
- Improving cancer and stroke survival rates
- Allowing patients to rate hospitals and doctors and establishing HealthWatch, a statutory body 'to investigate and support complaints'.
- Scrapping all politically-motivated targets that have no clinical justification
- Pledge to fairer commissioning: *"We will make sure that funding decisions are made on the basis of need, and commissioning decisions according to evidence-based quality standards, by creating an independent NHS board to allocate resources and provide commissioning guidelines."* (p. 146)

## Voluntary sector (general)

*"Britain has a proud and long-standing charitable tradition, and we are convinced that the voluntary sector should play a major part in our civic renewal. We will introduce a fair deal on grants to give voluntary sector organisations more stability and allow them to earn a competitive return for providing public services. We will work with local authorities to promote the delivery of public services by social enterprises, charities and the voluntary sector."* (p. 138)

- Will refocus the Big Lottery Fund to ensure more money goes directly to the voluntary and community sector.
- Will create a 'Big Society Bank' to provide new finance for charities and other non-governmental groups to help them bid for government contracts in public services (p. 137)
- Give people a 'right to bid' to run any community service instead of the state.
- A Work Programme delivered through private and voluntary sector providers, which will be rewarded on a payment by results basis for getting people into sustainable work.
- A review of the criminal records and the vetting and barring regime, scaling it back to "common sense levels".
- Campaigning - Any petition that secures 100,000 signatures will be eligible for formal debate in Parliament.

- Involvement – a commitment to look at new ways to increase philanthropy and encourage people to ensure volunteering and community participation are things they do on a regular basis.
- Active neighbourhood groups and money for training independent community organisers.

## **LIBERAL DEMOCRATS**

### **Palliative and end of life care related**

- Will use Personal Care At Home Bill funding to provide a week's respite care for one million carers who spend 50 hours a week looking after a sick relative
- Establish an independent commission, with cross-party support, to develop proposals for long-term care of older people.
- Integrate health and social care to “create a seamless service, ending bureaucratic barriers and saving money to allow people to stay in their homes for longer rather than going into hospital or longterm residential care”.
- Improve hospital discharge and move consultations into the community.
- Ensuring that local GPs are “directly involved in providing out-of-hours care”

No direct references to palliative or end of life care

### **Health (general)**

*“In health, our first priority will continue to be to increase spending in some parts of the NHS by cutting waste in others. We do not plan to make net cuts in spending on front-line health services.”*  
(p. 99)

They will:

- Cut the size of the Department of Health by half, abolish unnecessary quangos such as Connecting for Health and cut the budgets of the rest. (An itemised list of savings/spending is on p. 100-103)
- Scrap Strategic Health Authorities
- Reduce centralised targets, replacing them with entitlements guaranteeing that patients get diagnosis and treatment on time. If they do not, the NHS will pay for the treatment to be provided privately.
- Allow local communities to elect Local Health Boards, which will take over the role of Primary Care Trust boards in commissioning care for local people, working with local councils. Local Health Boards will be able to commission services from a range of competing providers – ending any current bias in favour of private providers.
- Put front-line staff in charge of their ward or unit budgets, and allow staff to establish employee trusts
- Reform payments to GPs so that those who accept patients from areas with the worst health and deprivation scores receive an extra payment for each one they take.
- Give patients a right to register with the GP they want regardless of where they live and to access their doctor by email.
- Limit the pay and bonuses of top NHS managers so that none are paid more than the Prime Minister.
- Prevent more illness by linking payments to health boards and GPs more directly to prevention measures.

- Prioritise dementia research within the health research and development budget.
- Improve access to counselling for people with mental health problems
- Reduce the ill health and crime caused by excessive drinking.
- Save lives and reduce pressure on NHS budgets by cutting air pollution.
- Pledges on improving patient safety

### **Voluntary sector**

*“We are committed to handing power back to local communities. We believe that society is strengthened by communities coming together and engaging in voluntary activity, which sets people and neighbourhoods free to tackle local problems.” (p.84)*

They will:

- Reform the National Lottery
- Reform Gift Aid to operate at a single rate of 23%
- Introduce ‘easy giving accounts’ at publicly-owned banks to allow people to operate charitable giving accounts alongside their current accounts.
- Reform the process of criminal record checking so that volunteers need only one record that is portable, rather than multiple checks for each activity.
- Support mutuals, cooperatives and social enterprises to play a role in a more balanced economy, including a new Mutuals, Cooperatives and Social Enterprises Bill
- Make the Youth Service statutory, and encourage local authorities to provide youth services in partnership with young people and the voluntary sector.
- Introduce a statutory register of lobbyists, and requiring companies to declare how much they spend on lobbying in their annual report.

### **3. OTHER POLITICAL PARTIES IN ENGLAND, WALES & NORTHERN IRELAND**

The following direct references to palliative and end of life care appear in the manifestos of the other political parties:

#### **Green Party**

- Pledge to *“provide the right to an assisted death within a rigorous framework of regulation, and in the context of the availability of the highest level of palliative care”*

#### **Northern Ireland**

##### **DUP**

- *The World Health Organisation recognizes that palliative care incorporates physical, psychological and spiritual needs and it is important that all elements are properly resourced. Three quarters of people indicate that they would prefer to die at home, and this must be respected as services are commissioned. Those in receipt of such care should be informed about benefits available to them and given sound advice around finance and other personal matters as they plan for the end of their life.*

- Pledge for *“greater delivery of end of life care in primary and community settings rather than secondary care”*

#### **Ulster Unionists**

- Have joint candidates with the Conservatives and so support the Conservative manifesto

We have only referenced other political parties which have direct references to palliative and end of life care in their manifestos.

**23 April 2010**