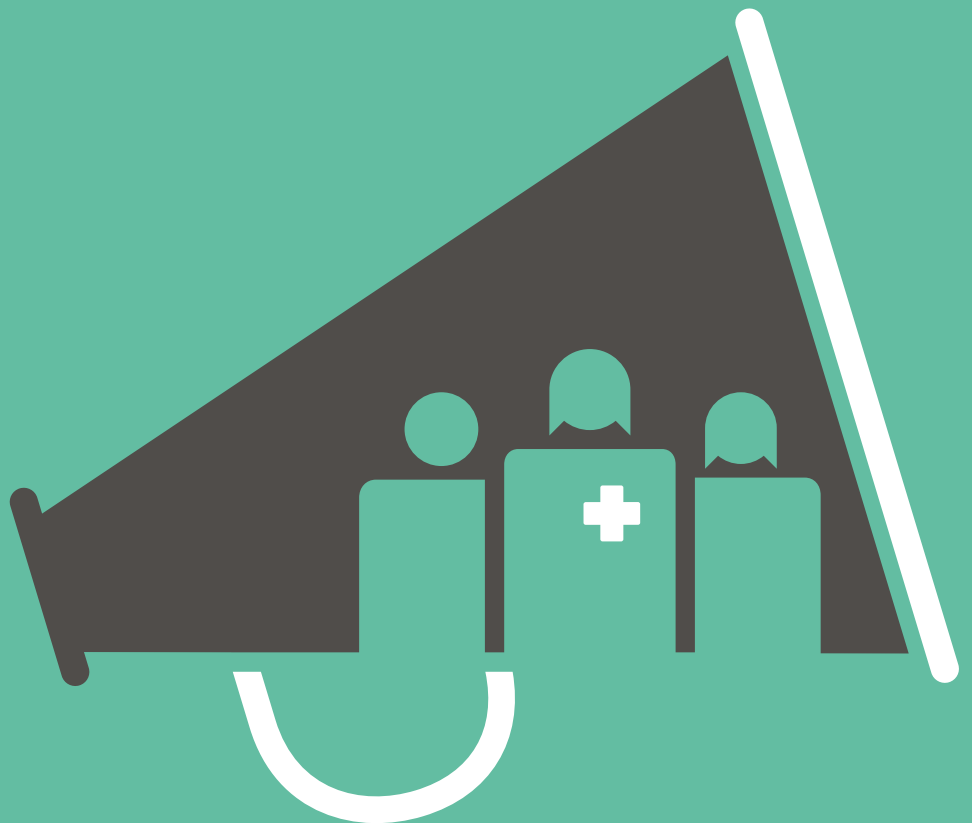


Agenda for the next Government

General election 2017



The Richmond Group of Charities

We are the Richmond Group of Charities and we help people of all ages who have serious long term physical and mental health conditions like diabetes, dementia, depression or cancer. By working together, we aim to influence health policy and practice in England.



In England, there are at least 15 million people living with a long term health problem, more than 1 in 4 of our entire population, and they need and deserve good quality health and care.

The 15 million people we represent are the core user group of health services and major users of social care: only when these services get it right for this group, can they be said to be serving their proper purpose.

To help people with long term conditions, the next Government must work towards the following five priorities:

1. Timely access to high quality health and social care for those who need it, when they need it, without undue delays that can leave people anxious and in pain



Our call

Equal access to evidence-based treatments and good information and support, for all who need them, without variation by postcode or other non-clinical criteria.

Background information

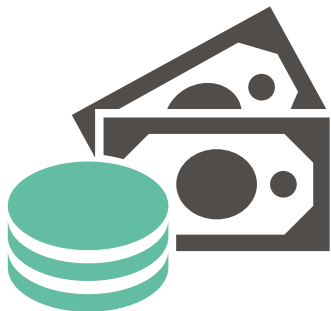
Too many of our beneficiaries face undue delays, missed targets and difficulties in accessing treatments, care, information and support.

For example:

- The 18-week target for referrals from GPs to hospital doctors has just been downgraded, despite being guaranteed as a basic entitlement in the NHS constitution.
- The number of people on waiting lists was 3.66 million in July 2016. This is a 33.1 per cent increase since April 2013.
- Each year, nearly 2,000 eligible stroke patients are denied the clot busting drug thrombolysis because it is not available at their hospital, or because trained staff are not on duty at the time they have their stroke.
- Only 26 per cent of patients with COPD who are referred to pulmonary rehabilitation, a highly effective education and exercise programme, will be enrolled on a course within the recommended three-month timeframe.
- Less than half of clinicians say they can prescribe bisphosphonates, an effective drug for the prevention of secondary breast cancer, because it is not clear who needs to commission it.
- Some Clinical Commissioning Groups have introduced new, non-clinically based criteria – for example for people who smoke – that restrict access to joint replacement surgery in contravention of the NHS Constitution.
- 44 per cent of people with MS who could benefit from treatments that can reduce relapses and slow down the progression of MS aren't getting them.
- Out of Area placements – where a mental health patient is given a hospital bed outside their network of local services, often far away from their home and family – rose by 23 per cent between November 2016 and February 2017.
- People with dementia stay in hospital twice as long on average as people aged over 65 without dementia, despite similar reasons for admission, and up to five to seven times as long in the worst performing hospitals.

33.1% increase in the number of people on waiting lists from 2013 to 2016

2. Increased funding across the whole health and social care system to support people right now, and to build more sustainable models of care that work better for people with long term needs



Our calls

- The overall funding envelope for the health and care system needs to increase.
- Sustainable social care funding needs to be resolved as an urgent priority, moving away from piecemeal and short term approaches.

Background information

Total NHS funding as a percentage of GDP has reduced in recent years. The UK is set to spend 6.6 per cent of its GDP on the NHS by 2020, down from nearly 8 per cent in 2009. This does not make sense when you understand that people's needs are becoming ever more complex. In addition, unprecedented pressures on social care mean nearly 1.2 million older people are not getting the help they need – which directly impacts their quality of life and piles pressure on the NHS.

We know the health and care system needs to change to better meet the needs of people with long term conditions. However, our substantial experience of developing new, better models of care for people with long term health problems, shows us that moving to different ways of working requires investment.

- Combining public and private spending on healthcare, in 2013 we spent 8.5 per cent of GDP. This puts us below the average of 10.1 per cent in the EU-14 (the original 15 countries of the EU, minus the UK). The UK is currently 13th out of the 15 for healthcare expenditure.
- There were over 1.8 million new requests for help with personal care in 2014/15. Almost a third of those asking for assistance (520,000 people) were told there were no services available for them, while a further third (575,000 people) were only referred to other sources of help, like charities or phone helplines.
- Between August 2010 and July 2016 the number of days delayed in being discharged from hospitals – because of waits for home care – increased by 181.7 per cent, from 12,777 delayed days to 35,994. Waits for residential care placements increased by 40 per cent, from 13,459 to 18,973.
- In the last 10 years the number of people over 65 in England has increased by over 20 per cent. Over the same time period, expenditure on older people's social care has decreased by over 20 per cent from £8 billion to £6 billion.
- In 2015/16 48 local authorities reported dealing with at least one home care provider, and 77 with a care home provider, who had ceased trading in their area.

£2 billion

decrease in spending on older people's social care in the last 10 years

3. Sufficient numbers of health and care staff to ensure they can give the compassionate and dignified care everyone deserves



Our call

Strong and urgent leadership is required to address increasing workforce and training shortages, which might be exacerbated by the UK decision to leave the EU.

Background information

The NHS is facing unprecedented workforce pressures, with certain specialties and services particularly hard hit. Learning to live well with a long term condition requires time, but health care professionals under pressure can't give people the time they need. Doctors and nurses at times are working harder than can be sustained in the long run, and under more pressure than is safe. It is the people working in the NHS who are keeping it going despite growing pressures, through sheer commitment and professionalism – this cannot continue indefinitely.

- Nearly half of all hospitals have at least one vacant respiratory consultant post, 40 per cent have a vacancy for a stroke consultant, and 71 per cent of hospitals do not have sufficient stroke nurses on duty at weekends.
- There are severe shortages within the workforce needed to diagnose cancers early. For example, 13 per cent of consultant breast radiologists' posts across the UK are already vacant, 21 per cent of breast radiologists are likely to retire by 2020 and 38 per cent are likely to retire by 2025. This will have a hugely detrimental effect on the early diagnosis of breast cancer.
- The number of junior doctors choosing psychiatry fell by 10 per cent between 2012 and 2015.
- In the Diabetes Specialist Nurse Survey, nearly 4 in 5 respondents (78 per cent) expressed concern that their workload was having an impact on patient care or safety and a third of respondents (32 per cent) reported that there are currently unfilled nurse specialist posts in their team.
- 400,000 people living with dementia rely on home care workers to help them with a range of daily tasks, however 1 in 3 home care workers have received no dementia training at all, leading to examples of people being left unwashed, without access to essential medication or admitted to hospital due to infections being missed. 86 per cent of home care workers believe they would be able to provide better care if they were given specific training.
- The care provided by unpaid carers, valued at £132 billion, is almost equivalent to the UK's total healthcare spend, £134 billion. However, this year it is forecast that there will be more people needing social care than there are family carers available to care for them.
- 9.8 per cent of doctors and 7.4 per cent of nurses working in the NHS are from the EU. The proportion of total NHS staff in London who are from the EU is around 11 per cent.
- In September 2016, there were 92,000 EU nationals working in the UK's social care system – this figure has risen by 40 per cent since 2013.

1 in 3 home care workers have received no dementia training

4. Effective coordination of services, staff and data across all parts of the NHS, social care and non-medical and community support



Our calls

- Commissioners need to work with community groups and patients to develop approaches that work for people.
- The NHS' ambition, through the Sustainability and Transformation Plan (STP) process, to better join up services in a place, needs support from political leaders if it is to deliver new ways of working and coordinated support for individuals.
- There needs to be better collection and use of data to improve the health and wellbeing of people who use health and care services.

Background information

It is right that moves are being made to integrate health, care and others services. This is vital if we are to meet the needs of people with long term conditions. However the change process must be more accountable and that means listening to users, their families, communities and organisations. Too often the involvement of people who use services has been piecemeal and passive. We can help decision makers to connect with individuals and communities. Our volunteers and non-clinical staff also can play an important role in providing joined up services for patients.

- Almost 1 in 5 people with MS feel that their health and care professionals do not work well together at all.
- Nearly half of stroke survivors report that the failure of health and social care to work together has resulted in worse care for them.
- Every day, 169 people are admitted to hospital for asthma, but people with asthma are four times less likely to be admitted to hospital if they have an asthma action or care plan.
- £264.2 million was wasted due to poor dementia care in hospitals in 2013/14 due to extra care needed because of falls, unnecessary extra days spent in hospital and avoidable emergency re-admissions of people with dementia due to uncoordinated and insufficient care and support.

1 in 5 people with MS feel that their health and care professionals do not work well together

5. Stronger emphasis on and investment in public health approaches and prevention



Our calls

- Commit to robust implementation and monitoring of the “prevention” duty under the Care Act 2014.
- Reverse the £200 million funding cuts to public health services that were imposed in 2015/16.
- Develop and implement an urgent plan to tackle obesity, inactivity, alcohol consumption, and smoking.

Background information

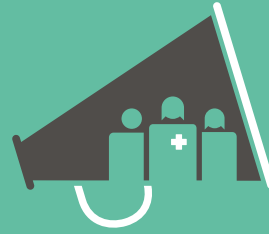
Ultimately, health and care services will only be sustainable if more people live healthier, happier lives. Prevention of ill health, exacerbation and crisis needs to become a much more central part of what we do if we want to move away from constant firefighting and towards supporting people to live as well as possible for as long as possible. This is also a question of justice, because the burden of ill health falls disproportionately on those from the most deprived areas. Health problems, and having more than one health condition, are much more common in more deprived neighbourhoods than in affluent ones.

More can be done:

- 75 per cent of cardiovascular disease, 40 per cent of cancer and 30 per cent of Alzheimer’s are preventable through changing people’s life styles.
- The risk of developing Type 2 diabetes is seven times greater for people who are obese and three times greater for those who are overweight, compared to those of a healthy weight.
- Regular physical activity reduces the chances of developing a range of conditions ranging from Type 2 diabetes by 40 per cent, colon cancer by 20 per cent and joint and back pain by 25 per cent. The risks of developing cardiovascular disease, depression and dementia, and of falls are also reduced.
- But even if people already have a health condition, good care coordination and management can prevent crisis and complication: 60 per cent of asthma deaths are preventable, as are 80 per cent of amputations resulting from diabetes.
- Equally, early intervention in psychosis significantly improves outcomes – not only having a positive impact on a person’s experience, but also saving £15 in health and social care costs for every £1 invested.
- And patients with COPD who take part in pulmonary rehabilitation are over four times less likely than those who don’t to be readmitted to hospital because of their COPD.

7 times

The risk of developing Type 2 diabetes is seven times greater for people who are obese



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