

*on Health*  
**FOCUS**



**GENERAL ELECTION 2005:  
LIBERAL DEMOCRAT MANIFESTO FOR  
HEALTH**



**Charles Kennedy MP**  
**Liberal Democrats**  
**4 Cowley Street**  
**London**  
**SW1P 3NB**  
**020 7222 7999**  
[www.libdems.org.uk](http://www.libdems.org.uk)

The principles of the NHS are as relevant today as they were when it was first founded: a universal service, funded through general taxation, delivering health care to all based on need not on what a person can afford.

Our campaign will be about providing a quality health service closer to home. It will not be about the false 'choice' being promoted by the other main parties.

To most of us, the priority is whether we can be treated and cured quickly and efficiently if we fall ill. Yet despite the investment now going in and despite the dedication and skill of our health professionals, the number of operations being cancelled is rising and thousands of people are still stuck on waiting lists.

Labour cannot resist micro-managing how local hospitals and GP surgeries are run. The result? Money wasted, local needs left unmet. Targets get hit but the point is missed. MRSA and other superbugs are allowed to spread, and valuable scanners are allowed to stand idle when patients are trapped on hidden waiting lists for tests.

We should trust the professionals to use their judgement and allow the maximum scope for design and delivery of services locally, based on local priorities.

To aid this we would slim down the central government functions. We will abolish Strategic Health Authorities and reduce the number of arms length bodies which inspect and monitor NHS organisations. We will plough the resultant savings back into frontline care.

Labour has also failed to tackle unfair charging. Charges for eye and dental checks undermine preventive work, and many people with long term conditions still have to pay for prescriptions. Worst of all, many older people who need long term personal care – helping with things like washing and dressing – still have to pay, more than five years after a Royal Commission recommended that personal care should be free.

What we are proposing here is a clear set of policy and management changes for improving our national health service and our nation's health.

The Liberal Democrat purpose is clear. To create a modern, efficient and effective health service which is properly staff and securely funded.

A health service where prevention is as important as cure.

A health service where all waits matter and swift diagnosis and treatment count.

A health service where quality services are delivered closer to home.

A health service true to Beveridge's ideals, in tune with today's needs.

*Charles Kennedy*



## **Top 5 Liberal Democrat Policies for Health**

- **Free personal care.** We will end charging for personal care, as Liberal Democrats in Government have already done in Scotland.
- **Quicker diagnosis.** When a GP believes you may have a serious illness, we will offer diagnosis by the quickest practical route, public or private, so the NHS can treat you more quickly. We will tackle the scandal of expensive scanners standing idle. We will publish waiting times for all tests and scans.
- **Fighting superbugs, cleaning hospitals.** Preventing, controlling and containing the spread of infection will no longer take second place to political targets.
- **Cut unfair charges - free eye and dental checks, fewer prescription charges.**
- **Prevention as important as cure.** We will concentrate on helping people stay healthy as well as caring for them when they fall ill.

## Dignity in old age

Labour broke its promise to end charging for long term care. Liberal Democrats believe that older people deserve to be treated with dignity not discrimination.

The Prime Minister said he did not want to live in a country where the elderly were forced to sell their homes to pay their care. Eight years on and an estimated 500,000 people have had to sell their homes.

The current system for charging for long term care is arbitrary and unfair. Charges for long term care are a tax on frailty and sickness. We will implement the recommendations of the Royal Commission on Long Term Care and end charging for personal care in care homes and in people's own homes. We will meet the cost of free care from the proceeds of our new 50% rate on that part of people's incomes over £100,000. Scrapping charges will mean that people with conditions such as dementia will no longer have to pay for help with feeding, dressing and washing.

Scrapping means-testing for care will help social services and the NHS work together to ensure that older and disabled people receive the right care, in the right place at the right time.

## Quicker diagnosis for serious conditions – so your NHS treatment is not delayed

Your chances of surviving life threatening and debilitating illnesses are higher with swift diagnosis. However, under successive Labour and Conservative Governments, there have always been hidden waiting lists for tests and scans, which have not even been published.

There are many reasons for delays in diagnosis. Old equipment, staff shortages and poor organisation

can cause unnecessary delays in patients getting the tests and scans that they need. Equipment is often left idle because there are no radiographers to run them or because there is no funding attached to enable the machines to run.

Research by the Liberal Democrats found that in two out of five hospital trusts, people are waiting six months or more for routine MRI scans that are used to detect brain tumours, cancers and serious heart conditions, and around 8% of NHS trusts have waiting times of over a year.

### We will tackle the hidden waiting lists:

- We will tackle the scandal of expensive NHS scanners standing idle by allocating additional funding to the NHS locally so it can be invested in training, new working arrangements, and recruitment and retention of key staff needed to operate them, including providing more scans at weekends and in the evenings.

- When a GP believes you may have a serious illness, we will offer diagnosis by the quickest practical route, public or private, so the NHS can treat you more quickly. We will do this by including diagnostics in the tariff system for paying for health services, so that if a mutual or private provider can deliver tests and scans at reasonable cost they will be available to NHS patients.

- We will make more tests and scans available in places like GPs' surgeries and pharmacies, and within new one-stop primary care centres.

- We will publish waiting times for tests and scans – which the Labour government has failed to do. The Healthcare Commission will include these waiting times as part of the standards by which they inspect hospitals and they will publish this to inform patients.

## Cut unfair charges - free eye and dental checks, fewer prescription charges

Charges hit the sick and the poor hardest. They can deter and delay access to NHS services when early care could make a huge difference to a person's quality of life.

A key aspect of our approach to health care is that prevention is as important as cure – but charges for tests discourage people from taking them. A survey by the Royal National Institute for the Blind found that, since 1989, there had been a progressive increase in the proportion of people leaving an interval of up to 5 years between sight tests. A wide range of serious illnesses can be picked up by routine eye and dental checks, for example oral cancer and diabetes. To cut the risk of illness going undetected we will:

- End charges for eye and dental checks which deter people from coming forward for testing.

The current system of prescription charge exemptions was drawn up in 1968 and it has not been changed since. Healthcare and health needs have changed and it is time the rules governing prescription charges changed too.

We agree with the conclusions of a Government report Securing the Future Health of the Nation which said 'The present structure of exemptions for prescription charges is not logical, nor rooted in the principles of the NHS'.

To give just one example, when the scheme was drawn up most of those with Cystic Fibrosis died as children so it was not included. Now people with cystic fibrosis are living longer as a result of better medicines, so many adult sufferers now pay charges.

We will:

- Extend the range of long-term conditions which qualify



for exemption from prescription charges following an independent review.

## Fighting superbugs, cleaning hospitals

Patients go into hospital to get better but often end up getting sicker because of hospital infections. Every year the equivalent of seven and half district general hospitals are filled by people who picked up an infection during their stay in hospital.

The hygiene crisis in our hospitals is the legacy of Conservative neglect and Labour dither and delay.

Despite their current rhetoric, the Conservatives did not bring back Matrons during their 18 years in government, and in fact forced hospitals to contract out their cleaning - price was more important than quality. The result: standards fell and responsibility for ward cleaning fragmented. Under the Conservatives the true level of hospital infections was unknown because they did not bother to collect the information.

Under Labour waiting time targets are more important than fighting superbugs. The National Audit Office found that one in eight infection control teams were hindered by managers

from closing wards to tackle infections, mainly because of Government targets. Almost half of hospital managers had said that Government targets caused conflicts with their efforts to control infections.

Liberal Democrats would give doctors and nurses the authority to close wards and tackle infections. We will:

- Scrap political targets which hamper the fight against infection.

- Require every frontline NHS staff member to have compulsory training in infection control.

- Ensure that every hospital sets up an infection control feedback system which pinpoints which specialties and which parts of the hospital have the greatest problems with infections.

- Require the Healthcare Commission urgently to review the provision of isolation rooms in the NHS and produce a timetable for providing appropriate isolation facilities in every NHS hospital.

- Require an audit of the provision of wash-hand basin facilities and alcohol hand rubs to be undertaken in existing hospitals, to ensure that hand hygiene protocols are more likely to be adhered to.

## Put patients first – free doctors and nurses from Whitehall meddling

Doctors and nurses are highly trained and dedicated health professionals. Ministers and civil servants are not - yet they continually bully your local hospital, doctors, and nurses. Labour has created a culture of 'targets and tickboxes', where health professionals have to comply with endless central directives, taking away the freedom of the NHS to deliver services tailored to meet local needs. Liberal Democrats would hack away the red tape, abolish absurd targets, and free our frustrated doctors and nurses from demoralising meddling – so they can put patients first. We will:

- Scrap absurd political targets, so your local hospital will have the time and flexibility to put patients first – providing personalised care, cleaner hospitals and treating the sickest the quickest.

- Cut back red tape such as the need for reporting back to Ministers on political targets.

- Reduce quangos in the NHS and simplify arrangements for inspection, for example by merging the inspectorates for health and social care.

- Complete the NHS plans to recruit at least an extra 8,000 more doctors, 12,000 nurses and 18,000 more therapists and scientists by 2008 than there are now, cutting waiting times and improving the quality of care.

Liberal Democrats believe that local investment priorities in the NHS should be set by locally elected people who can be kicked out if they get it wrong. We will:

- Give democratic control to local people, through making commissioning of health currently

decided by Primary Care Trusts a function of the elected local authority which has responsibility for social services.

- Scrap the unelected Strategic Health Authorities, giving their health care commissioning role to local authorities, or consortia of local authorities where necessary.

- Focus the Department of Health on improving the health of the nation by taking the lead in ensuring that public health goals are supported right across government.

## **Health and social care - two sides of the same coin**

Good quality social care makes a significant contribution to the quality of life of thousands of elderly and disabled people every day.

For people living with long-term illness or disability they want the NHS and social services to fit round their lives, not always have to fit their lives around the services they need. By integrating the way in which health and social care are planned and delivered we will aim to make a reality of the seamless service people deserve and expect.

### **Support for carers**

Without the love and support of the nation's 5.7 million family carers the NHS and social services would be overwhelmed.

Our plans to give local authorities the job of commissioning both health and social care will help to deliver more support for carers and promote their health. We will expect every local authority to include a local carers strategy within its Community Plan. The strategy would cover issues like respite care, access to advocacy and information services, and the special needs of young carers.

We will also help those who wish to combine caring responsibilities

with paid work by extending workplace protection legislation to home workers, many of whom are carers, and by reforming the New Deal to give more personalised help to jobseekers with caring responsibilities.

### **Direct Payments**

Liberal Democrats support 'direct payments' - cash payments made in lieu of social service provision to people who have been assessed as needing services. Direct payments maximise choice and control for service users and should be encouraged. We will:

- Encourage greater take up through local action plans and greater support for service users, such as help with financial administration.

### **Tackling discrimination**

Discrimination against disabled and vulnerable adults is totally unacceptable, but the current law does not give proper protection. Age discrimination legislation should go beyond employment and include the provision of goods and services by both the public and private sectors. This would mean that the NHS and Social Services providers would be under a duty not to discriminate unjustifiably on the basis of age.

### **Prevention is as important as cure**

We will concentrate on helping

people stay healthy as well as caring for them when they fall ill. According to the Government's NHS Report 'Securing our Future Health', failure to tackle the unnecessary causes of ill health will cost the NHS an extra £30 billion a year by 2022. If we don't tackle the causes of ill-health, the NHS in the future won't be able to cope.

### **Healthy Choices**

People should be given the information and opportunities to make healthy choices. We will:

- Introduce a clearer food labelling using a 'traffic light' system.

- Require labelling of alcoholic drinks to show the units of alcohol, combined with more education on the recommended maximum number of units for men and women.

- Ban smoking in all enclosed public places.

Our policies as a whole will help tackle other causes of ill health such as poverty, pollution and poor housing.

### **Clean air and water**

Pollution in the air, in water and in the food chain causes or aggravates many illnesses, as well as destroying the environment. We will:

- Adopt the EU Registration, Evaluation and Authorisation of Chemicals (REACH) Directive, which will ensure information is available to the public on the consequences of exposure to all chemicals in daily use, and that those of high concern are replaced by safer alternatives.

### **Promote walking and cycling.**

Children walking to school get fit for life – but it must be safe. Fewer school-run car journeys also mean less pollution, less congestion and fewer road deaths. We will:

- Encourage and promote Safe Routes to School with calmed traffic, safe pavements, good lighting and grown-ups on hand to conduct "walking buses".

- Provide more cycle routes and reform planning rules to make sure key services are more easily accessible by foot or bicycle, so that adults are encouraged to walk and cycle too.

## **Give people more control over their healthcare**

Liberal Democrats place a high value on a person's right to control and dignity. We do not believe that as soon as someone becomes unwell they should simply be seen as the passive recipient of treatment. We believe that people should be seen as partners in their care. The patient's own view of what gives them the best quality of life should be at the heart of the healthcare system, and their right to control their own lives must be paramount. This is particularly true for sufferers from long-term conditions, who will often understand as much about their own health and successful therapies as the health professionals.

### **Health MoTs**

People at the early stages of disease often do not realise they are ill, and therefore do not

seek treatment or make lifestyle changes which could prevent their condition getting worse. We will:

- Encourage regular health "MoTs" tailored to individual patients' needs, with wider access to screening and blood pressure and cholesterol tests. We will ask NICE to develop the health MoT programme incorporating evidence-based screening.

### **Personal Care Plans**

People with long-term conditions should be entitled to a Personal Care Plan they have agreed to following full discussion with their doctor of all available treatment options. The plan will:

- Set out their course of treatment, where and when they will be treated, and what other help such as social care they will receive.

### **Palliative Care**

Palliative care aims to provide total care for patients towards the end of their life, and focuses on pain and symptom control, mental well-being, quality care and support for the patient's family and carers. Liberal Democrats believe all people should be able to access the care they need both in the management of long-term medical conditions and at the end of life. Access to this care should not be limited by a person's age, diagnosis, social or ethnic background.

Liberal Democrats recognise and value the wealth of experience and expertise in the voluntary hospice movement as well as in the NHS. We believe palliative care is best developed through a strong partnership between the NHS, local authorities and the voluntary sector supported by a National Service Framework. However, tens of thousands of patients annually die in the NHS without access to specialised care and pain management. We will:

- Prioritise extending choice and access to these services, including more support for hospices.

## **Complementary and Alternative Therapies**

To increase the choice of treatment options people have on the NHS, we would ask the National Institute for Clinical Excellence (NICE) to undertake a review of the effectiveness of Complementary and Alternative therapies. We will:

- Allow the inclusion of Complementary and Alternative therapies in the treatments available on the NHS where NICE recommends them, or where in advance of formal NICE evaluation the cost of that therapy is no more than the lowest conventional treatment offered and the patient's GP supports its use.

### **Food Supplements**

People should continue to have the right to exercise choice over the food supplements they buy. Depending on how the Traditional Herbal Medicinal Products Directive, the Medicinal Products for Human Use Directive and the Food Supplements Directive are translated into domestic legislation and regulation they could place unnecessary restrictions upon consumers' choice of vitamins and minerals. We will:

- Review any legislation introduced by the current Government to give effect to these Directives with a view to maximising consumer choice over the use of food supplements.

## **Mental Health**

Liberal Democrats believe that people with mental health problems have the same rights as any other patients to have control over their healthcare and be treated with dignity. Specialised support involving voluntary groups is particularly important to ensure that the needs and wishes of people with mental health problems are met. Coercive approaches are driven by the stigma associated with mental ill health. A more effective approach



is to promote earlier community-based, non-compulsory treatment.

While the existing mental health law needs updating, Liberal Democrats were deeply critical of the proposals in the Government's draft Mental Health Bill. We will introduce a new mental health bill that safeguards the rights and welfare of people with mental health problems allowing them to exercise more control over their treatment. Liberal Democrats will insist on these key points in any bill:

- The principle of reciprocity should be upheld so that where there is compulsion there must be an entitlement to appropriate care and independent appeal.
- Allowing patients to nominate a person to act on their behalf, and to have advance statements.
- A guarantee of access to trained advocacy.

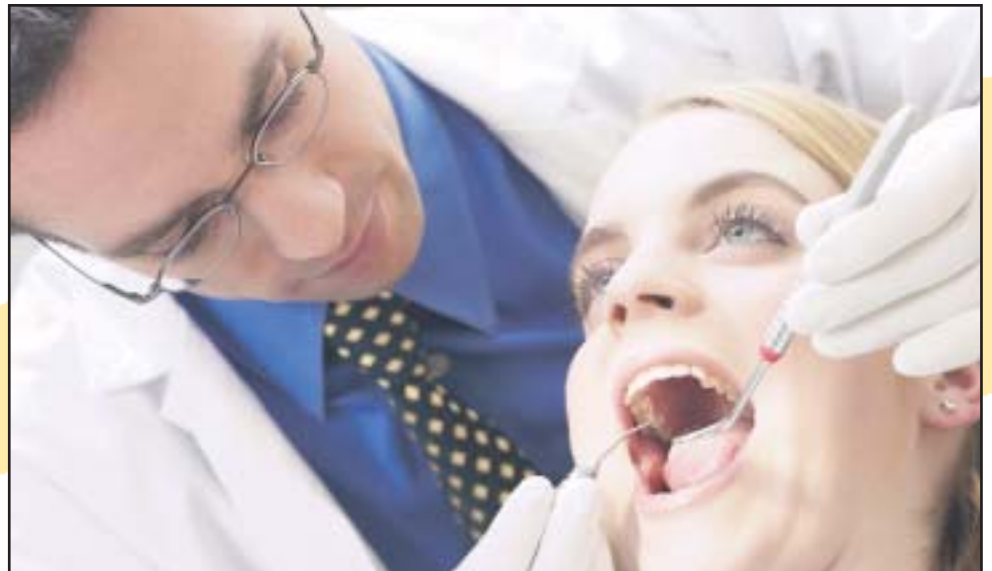
We will also review the National Service Framework on Mental Health services to see if new standards were needed to ensure that issues of access, stigma and medication were properly addressed.

## **Quality dental care**

**Over half the population in England are not registered with an NHS dentist.** We will sustain the investment needed to increase the number of training places for future dentists. If more people are to have a chance of finding an NHS dentist more of the country's current dentists must be persuaded to increase the proportion of NHS work they do.

The exodus of dentists from NHS dentistry began under the Conservatives when they imposed a new contract and cut fees. Under Labour dentistry has been a low priority and discussions over the new dental contract badly handled.

To increase access to NHS dental care, we will rebuild trust between the dental profession and the government. As a first step we will negotiate an end to current the 'drill and fill' contract and introduce a new payment system for NHS dentistry which rewards preventive treatment for adults. This shift towards preventive oral healthcare would be supported by the introduction of Personal Dental Plans. These plans would set out how frequently people should come for a check-up, how better to look after their teeth, and for those with serious dental problems their future course of treatment.



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