

Briefing by Right to Care

Continuing Care

As part of our campaigning strategy Right to Care has been keen to highlight the problems inherent in the current system for continuing care. However the Campaign is convinced that in order to fully understand these problems they must be set in the context of wider issues within the provision of long term care for the elderly and disabled.

For example we have consistently argued that charges deployed in the provision of long term healthcare are bad for the nation's health. Evidence in the past has shown that charges affect the demand for healthcare, leading to later detection, making health problems more difficult and expensive to treat. This is confirmed by a study of Scottish nurses who have been observing the impact of free nursing care on their patients. In their experience patients downplayed or were reluctant to use care where there was a cost involved. This has meant that since the introduction of free personal care there has been an increase in the number of patients requiring small amounts of personal care. Health problems have therefore been caught earlier and general monitoring of overall health has improved.

These factors consistently influence the provision, and crucially the uptake, of continuing care. The current approach to continuing care criteria appears, on occasion, to flout the law and deny elderly people their right to free healthcare regardless of setting. We have found it extremely difficult to encourage ministers to seriously engage with these issues, without passing us off with generic comments. It remains the case, and the Health Service Ombudsman's report of February 2003 bears this out, that NHS rules on funding continuing care are often found to be unfair, and at best are inconsistent.

Right to Care believes that five years on from the publication of the findings of the Royal Commission into Long Term Care for the Elderly, the Government must re-examine its policy into continuing care, and into the wider provision and funding mechanics for long term care in general.

The Campaign believes that current Government policy:

- **undermines the principle of universal provision – making patients pay for healthcare**

The percentage of health care delivered in hospital is falling with a greater reliance on the use of community settings. The Wanless Report put forward universal provision as the most effective and fairest method to fund healthcare and yet the widespread use of charging for home care and personal care in care homes is undermining this crucial principle, and leading to hardship and confusion amongst patients.

- **is unfair to those with low or moderate incomes**

The government has attempted to ensure state funding for long term care is available to all older and disabled people with low incomes. However, as figures from the Department of Work and Pensions show, 61% of self-funders had incomes below £200 per week.

- **Appears to be set in stone, and is not up for review**
There is no review of divided care planned despite the fact that the nursing profession agree that the definition of nursing chosen by the Government is far too narrow. There are a growing number of examples of tasks like bandaging and catheterisation that are excluded from the government's definition of nursing. It is likely that the divide between nursing and personal care will become further discredited over time.
- **Makes no provision to review of the banding levels for the state funding of nursing care**
There has been no review of the impact or of the levels at which these bands have been set. At the outset there was concern that funding levels were too low, since then NHS inflation has been running at 4-6% a year. The lack of transparency in the charges levied by care homes means that underfunding of nursing care can be passed on undetected, to residents in higher fee bands.

What the Health Select Committee can do

The Campaign believes that, should it decide to review the Government's provision of continuing care, the Health Committee should also ensure that it includes an examination of the current position on long term care. Many elderly and disabled people, those in continuing care and those approaching retirement, are currently in a terrible limbo, not knowing what the future will bring and worried about finances and funding. Right to Care hopes that the Committee report will bring the Government back to the table to discuss openly the needs of the elderly and disabled for the future.

Right to Care

Right to Care is campaigning for all nursing and personal care to be free at the point of use across the UK.

17 national organisations, including UNISON as a major partner, want all of the recommendations of the Royal Commission on Long-Term Care to be implemented. This includes its central recommendation that all nursing and personal care should be available on the basis of need, free at the point of use and funded from general taxation.

While great strides have been made in Scotland and some progress in Wales and Northern Ireland, older people in England who need personal or nursing care face means-testing and bills running into the thousands.

A UNISON-commissioned MORI poll found that 75% of adults think the government should provide free personal care for all elderly people who need it.

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