



NATIONAL
POLICY
FORUM
2021
Health and
Social Care



MEMBERSHIP 2021

HM Opposition

Jonathan Ashworth MP*
Rosena Allin-Khan MP
Liz Kendall MP
Justin Madders MP

NEC

Mark Ferguson*
Luke Akehurst

CLPs and Regions

Lewis Atkinson – Northern Region
Anthony Beddow – Welsh Labour Party
Angela Coleman – North West Region
Yannis Gourtsoyannis – Greater London Region
Kirsten Kurt-Eli – West Midlands Region
Karen Reay – Yorkshire and Humber Region
Joyce Still – South East Region
Clare Williams – Northern Region
Rhea Wolfson – Scottish Labour Party

Affiliates

Mary Hutchinson – GMB

Elected Representatives

Huw David – WLGA

*Co-convenor

The work of the Health and Social Care Commission

The impact of Covid-19

In late 2020 and early 2021 the Commission received a number of updates from Shadow Secretary of State for Health and Social Care, Jonathan Ashworth MP, on the coronavirus pandemic. Discussions highlighted how hard our country had been hit by the pandemic and noted that the position of the country when entering the pandemic meant we were poorly prepared, exposed and vulnerable. The impact of the coronavirus pandemic on the nation's health and wellbeing were also discussed, with Shadow Minister for Mental Health, Rosena Allin-Khan MP attending the January 2021 meeting to deliver a powerful first-hand account of the pandemic's impact on frontline NHS staff. The Commission also heard oral evidence from the Health Foundation on the wide-ranging impact of the coronavirus pandemic on the nation's health and wellbeing. Reflections from Commission members noted how the pandemic has shone a light on the urgent need for social care reform, as well as the government's failures, for example when it came to PPE.

Securing a sustainable future for social care

At the meeting held in March 2021, the Commission had a dedicated discussion on the future of social care with Shadow Minister for Social Care, Liz Kendall MP. She provided an update on labour's work in this area, including holding the government to account over their treatment of social care during the pandemic, as well as policy development work linked, but not limited to, making the country the best place to grow old in. Speakers from Carers UK, UNISON and the Association of Directors of Adult Social Services also had a discussion with the Commission on how to overcome the barriers that have held reform back for so many years, and the future vision for social care we should aspire to. Members of the Commission discussed the significant crossover between social care and housing in enabling people to receive support at home.

Supporting wellbeing and tackling mental ill-health

In April 2021, Shadow Minister for Mental Health, Rosena Allin-Khan MP, updated the Commission on the shadow team's work in this area, including joint work with the shadow education team around the issue of children and young people's mental health. Speakers from the Centre for Mental Health, Rethink Mental Illness,



and Mental Health First Aid England joined for a policy focused panel discussion that highlighted the wider determinants on poor mental health, arguing that a cross-governmental and societal approach is needed to improve the nation's mental health and wellbeing.

Tackling health inequalities

Shadow Minister for Public Health and Patient Safety, Alex Norris MP, spoke to the Commission in May 2021 about tackling health inequalities. The Commission heard from speakers from the UCL Institute of Health Equity and the Runnymede Trust – who highlighted recent trends in health inequalities, and the contribution of racial inequality to health inequalities, respectively. Councillor Paulette Hamilton also shared her experience of local work in tackling health inequalities in Birmingham. The Commission reflected on the need for long-term solutions as well as the cross-cutting nature of the topic of health inequalities.

Recruiting, retaining and supporting the workforce

At the meeting held in June 2021, the Commission met to discuss recruiting, retaining and supporting the workforce. Shadow Minister for Secondary Care, Workforce and Patient Health, Justin Madders MP, updated the Commission on the shadow team's work in this area. Speakers from the British Medical Association, Royal College of Nursing and GMB, Unite and Unison joined the meeting to discuss better workforce planning with the Commission, in particular how we build a workforce that meets future demand and is resilient to future shocks.

Principles

- 1. Healthcare should be universally available and free at the point of use.** The core principles of our NHS must be upheld, with access to healthcare viewed as a human right.
- 2. Patients should receive the care they need, within the standards set by the NHS constitution.** NHS performance was already struggling before the pandemic hit, we must restore NHS performance to ensure targets are met and patients receive the highest standards of care.
- 3. Deliver parity of esteem for mental health.** We must ensure there is sufficient investment in mental health services to deliver true parity of esteem, backed up by sufficient funding to support everyone who needs it.
- 4. Create the conditions for people to live healthier, happier, longer lives** by tackling inequalities.
- 5. Improve population health** This will be achieved through well funded public health services and a determination to confront the wider determinants of ill-health through working across Government. Health in all policies must be the default.
- 6. Value workers as the greatest asset of the NHS and social care.** The health and care workforce must be better valued as the keyworkers they are. This must be backed up by a workforce plan to recruit, retain and support the healthcare staff we need.



- 7. Rebuild publicly provided NHS services and reverse privatisation.** We must recognise the value of the public sector and reverse and end Tory privatisation.
- 8. Ensure national accountability in the health service, alongside empowering local leaders.** There must be clear national accountability, underpinned by a duty on the Secretary of State for Health to deliver high quality services. At the same time local leaders must be empowered.
- 9. Deliver a sustainable future for social care.** We must ensure that social care is sufficiently and sustainably funded, end fragmentation, and build a public social care service that provides people with the care they need, in the place they call home.
- 10. Support unpaid carers.** Unpaid carers, who look after family and loved ones, must be better valued and supported in the vital contribution they make.
- 11. Build resilience across health care.** We must invest in science and research to create the therapeutics to transform medicine for the future, and prepare for future pandemic risk.

Tackling health inequalities to make the country the best place to grow up and grow old in

Restore NHS performance and uphold patient's rights under the NHS constitution, to ensure the highest standards of timely care for patients.

Waiting lists were growing, and NHS services were already overstretched, even before the pandemic hit. We must restore NHS performance to ensure targets are met and patients receive the highest standards of care. Before the pandemic, the NHS was overstretched, under-resourced and struggling – with 17,000 beds cut, over 100,000 vacancies, some of the lowest numbers of vital equipment in the world and a crumbling NHS estate with a £9 billion repair bill. There are now record numbers of patients on the waiting list for routine NHS treatment, including spiralling numbers of people who have been waiting over a year.

In the NHS we shouldn't have to choose between Covid-19 care and cancer care – but tragically, for too many people that has been the reality this past year, and 46,000 few people have started cancer treatment. This scale of disruption wasn't inevitable, but our NHS had been under-resourced and left less able to weather the shock of the pandemic.

Labour would commit to restoring NHS performance and ensuring that patient's NHS constitution rights to treatment - which have not been met for years under the Conservatives – are upheld. It is right that we are proud of our NHS, but we should also be ambitious, and a Labour government would restore our NHS performance to make the UK a world leader in healthcare performance and outcomes – showing just what our NHS can deliver when it is valued and well resourced. We need a fully resourced 10 year rescue plan for our NHS.



Tackle health inequalities through cross-governmental action to address the wider determinants of health

The Covid-19 pandemic has shone a spotlight on the devastating impact of health inequalities that persist in our country. Even before the pandemic hit, a decade of austerity saw widespread reductions in public spending and social, economic and regional inequalities deepened. Child poverty increased and now over 4 million children live in poverty. Health inequalities have widened. Overall population health has declined, and for the first time in a century, life expectancy stalled – a shocking legacy for any government.

It is completely unacceptable that people from different backgrounds, or living in different parts of our country have such different chances of living in good health – from birth through to older age. And the impact of the Covid-19 pandemic is expected to further worsen existing inequalities. Without concerted cross government and societal action to tackle the root causes of inequalities and address the wider determinants of health, those most impacted by the pandemic risk being left behind in the recovery.

The Labour party stands against all forms of injustice and inequality and will do everything in can do to tackle the health inequalities that persist. That means joining up policy across departments, with long term action driven by a real commitment to make the country the best place to grow up and old in – for everyone.

Transform social care provision and ensure the country is the best place to grow old in

The Covid-19 pandemic brutally exposed a number of issues and vulnerabilities in the social care system. While extraordinary efforts went into setting up nightingale hospitals, social care was once again neglected. Tragically, despite promises that the government would throw a protective ring around our care homes,

some of our most vulnerable were left exposed to the virus – over 30,000 care home residents have died of Covid-19 and 25,000 were discharged from hospitals to care homes without being tested. Our frontline social care workers, who put themselves at risk to care for some of the most vulnerable members of our society were left without PPE.

As we emerge from this pandemic, we must ensure that there is a plan in place to transform social care and ensure that care homes never again face a crisis of this scale. Labour's ambition is not just to 'fix the crisis in social care' as the Prime Minister has repeatedly promised but failed to deliver.

The moral case for reforming our social care system is clear, and there's a strong economic case too. 1 in 3 family carers having to give up work or reduce their hours to care for loved ones - they lose their incomes, employers lose their skills, and Government loses their taxes. It doesn't make sense for our families, our carers, or our economy.

Recruit, retain and support the workforce to ensure our frontline workers are valued and the sector is much more resilient ahead of future shocks

The huge demands on the NHS workforce have been exacerbated by the Covid pandemic but the workforce was in crisis even before Covid-19 hit. Before the pandemic, there were 100,000 vacant posts in the NHS and 122,000 vacancies in the adult social care sector. The workforce was already overstretched and struggling – with increasing numbers of NHS staff suffering from work related stress in the past years. The social care workforce is vital to a properly functioning society and economy, yet two thirds don't earn the real living wage and one in four care workers are employed on zero hours contracts.

Labour would give frontline NHS workers the pay rise they deserve. And for the social care sector, which has been neglected under a decade of Conservative leadership, It's time for a new deal for care workers to back the aspirations of staff, tackle high vacancy rates, and deliver at least the half a million extra staff we need over the next ten years to meet growing demand. As a starting point, Labour has called on the Government to guarantee all care workers are paid a least a real living wage of £10 an hour.



Support the nation's mental health by putting wellbeing at the heart of policy making

Despite years of government rhetoric about delivering parity of esteem for mental health, and despite significant progress in building awareness and reducing stigma – driven by the mental health sector and many voluntary and community organisations – there is still a long way to go to meet the mental health needs of the country.

Mental health services were stretched before the pandemic hit, with many people unable to access treatment and others waiting unacceptably long periods for appointments. We face a crisis in mental health for which action is needed now – with 235,000 fewer people who have referred for psychological therapies, with eating disorder referrals for children having doubled, and with the pandemic having driven a reduction in almost 11% fewer beds occupied. And the longer term impact of the pandemic is not yet being felt. With up to 10 million people expected to seek mental health support as a result of the pandemic, policy needs to go further, and faster to ensure mental health support is there for everyone who needs it.

Labour would put mental health and wellbeing at the heart of policy making. We would ensure there is a plan to address the nation's immediate mental health needs, as well as to respond to the longer term impact of the pandemic on people's wellbeing. As part of that, we need to see sufficient investment in mental health services to deliver true parity of esteem, backed up by sufficient funding to support everyone who needs it. This includes investment in children's services – we know how impacted our young people have been by this pandemic and if we don't prioritise their recovery – educationally and socially – we risk failing a generation.

Rebuild publicly provided NHS services and reverse privatisation

Throughout the Covid-19 pandemic, we have seen this Conservative government hand out contracts to private providers, who have often failed to deliver – from Test and Trace, to PPE – at great cost to the taxpayer, and with a tragic human cost to their failure too. The first duty of a government in a pandemic should be protecting people through public health, not privatisation and profit. And it's a tragedy that the government had worn down some of our public services so much that they didn't feel they had the resource and capacity needed to withstand the shock of the pandemic.

Labour would show the true value that our public services can deliver – from the vital work of our public health teams, who we have long called for to lead test and trace efforts, due to their expertise and strong local links – to the wider work of our community health teams, and local authorities. Labour in Government would rebuild publicly provided NHS Services and reverse privatisation.

Oppose the Conservative's Health and Care Bill

The Health and Care Bill is pushing for a top down reorganisation when we are not even through the pandemic. The Bill fails to deliver the integration needed between health and social care services, and delays reforms to social care yet again. It also fails to increase the size of the NHS workforce which is urgently needed, with staff exhausted and facing burnout after working on the frontline throughout the pandemic. The Bill does nothing to guarantee that patients' care will be improved, waiting lists will come down, or to provide the resources to modernise the NHS for the future.

More specifically, the proposed integrated care boards are at risk of worsening patient care. Significant voices also fail to be represented on these boards, from mental health providers to public health. Instead, there is a risk that private healthcare providers can be handed a seat on these new NHS boards. Labour will oppose this at every stage.

Labour is clear that instead of this reorganisation, we need a plan to bring down waiting times for NHS treatments and tackle the growing backlog of care. A plan that would give the NHS the resources it needs to ensure comprehensive, quality healthcare. And a plan which tackles the health inequalities that have widened and have been brought to the fore during the coronavirus crisis.



Submissions to the consultation

Tackling health inequalities through cross-governmental action

Many submissions drew attention to the various groups disproportionately impacted by the Covid-19 pandemic, including people from Black, Asian and Minority Ethnic communities, people with disabilities, socio-economic inequalities and people living in rural areas:

“BAME people and people living in deprived areas were most affected by the virus. Their resilience was most compromised due to poor housing, high rents, lack of social or affordable housing, low paid and insecure employment, debt, discrimination, racism.”

BRENT NORTH CLP

“My worry is those with disabilities seem to be hardest hit.”

ONLINE ROUNDTABLE PARTICIPANT

Submissions also reflected on the wider determinants of health and how tackling these using cross-governmental action is key to improving the health of everyone in our country. This starts from pregnancy and early years, through to building a fair and inclusive economy, investing in good jobs and helping ensure autonomy at work, as well as supporting our older people, so that the country is the best place for everyone to grow old in:

“Public health should be central to wider social and economic policy, and while promoting healthier lifestyles is important the real urgency is that policies must recognise and target the structural societal causes of poor health such as poverty, inequality and exploitation at work.”

UNITE THE UNION

“Clearly the health care system is important in ensuring equal access and treatment, but it does not exist in a vacuum, it is part of a wider system. If you want to address inequality in health then you need to address inequality in education, inequality in work.”

SHEILA, GREATER LONDON

Social Care

Many submissions emphasised the need for radical reform in how and where care is provided to let everyone live the life they choose. Submissions were clear that we need to see social care services being fully joined up with the NHS, so that there is one care system built around the needs of care users and their families.

Submissions reflected the need for a 'home first' approach that should support the vast majority of people who want to stay in their own homes:

"Consider greater local provision so that elderly and vulnerable can be cared for at home as much as possible."

PHILLIP, EAST

"A reformed Adult Social Care system must take into account the different mix of care that is provided – care homes are part of the picture, but domiciliary care and independent living must also play an important part. A person-centred care system will take into account the different needs of each individual, meaning that independent living must be a viable option, on parity with receiving care in a care home."

LGA LABOUR GROUP

It is clear that we also need a new partnership with unpaid carers, so they are properly valued and supported – ensuring they get they get proper information, advice and breaks and more flexibility in the workplace to help them balance their work and caring responsibilities:

"When I was caring for my daughter 4 years ago I worked out that, after taking into consideration my benefits and carer's allowance I was surviving on half the minimum wage and I know that the situation has not improved. Unpaid family carers are saving the government millions but are being ignored."

JOY, EAST



Workforce

Several submissions noted that the NHS urgently needs a workforce strategy that delivers the increase in doctors, nurses and other health professionals needed to bring waiting lists down and deliver high quality care:

“We have relearned during the covid crisis how brilliant and dedicated are our scientists, doctors, nurses and all other healthcare professionals. But there remain many vacancies in all these professions. These shortages must be addressed urgently.”

BRIAN, LABOUR MEMBER

Submissions also included calls for enhanced rights for workers, increased training and career progression:

“Provide clear pathways for job progression and career development for all staff.”

BRIGHTON PAVILION CLP

“A career structure with incentives to develop professionally is need, those working in the system need to feel valued and be treated with respect.”

DAVID, NORTH WEST

There was particular emphasis on improving the pay, working conditions and career progression of social care staff, who have been working on the frontline throughout the pandemic:

“A long-term workforce strategy that focuses both on recruitment and retention should be developed, which would create greater parity between the health and social care sectors. This would make the social care sector an attractive career choice, by providing workers with the training and support that they need. This should centre around dispelling the misconception that care work is unskilled and recognise the considerable technical and interpersonal skills that it requires.”

LABOUR FOR A GREEN NEW DEAL

Rebuild publicly provided NHS services and reverse privatisation

Submissions were overwhelmingly clear that we must recognise the value of the public sector and reverse and end Tory privatisation:

“The NHS exists to provide free at the point of use healthcare to all who need it and that is the way it should stay.”

SUSAN, SOUTH WEST

“Privatisation needs stopping and [the] NHS needs investment and putting back under our control.”

GLYNIS, LABOUR MEMBER

This is particularly important as we emerge from and deal with the long-term impact of the pandemic:

“The backlog in non-Covid health interventions should not be used as an excuse for outsourcing and privatisation. There must also be recognition that underfunding the NHS is a false economy. Labour must hardwire the principle that prevention is more effective, and therefore cheaper, than cure.”

UNITE THE UNION