

National Pensioners Convention

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Pensioners' Parliament 17 - 19 June 2014 Winter Gardens, Blackpool

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NPC Pensioners' Parliament 17-19 June 2014, Winter Gardens, Blackpool

OPENING SESSION (edited transcript)

RON DOUGLAS, NPC PRESIDENT:

Good afternoon and welcome to Blackpool. It's twelve months since we were here last, and I would like to make a special welcome to the new delegates that have come this year; there are several in the audience; I've not been around to meet you all, but I hope to, of course, in the next couple of days. You appreciate we have come into this room because the room that we normally use is not available. The Council were aware of the problems we have here with the acoustics and obviously we can only apologise.

Firstly, can I introduce the Deputy Mayor to address Conference? Thank you very much, Councillor Chris Ryan.

CLLR CHRIS RYAN, DEPUTY MAYOR:

Good afternoon. I hope you have all turned your phones off; I have just done mine. I would like to thank you all for coming here; it's very rare for me to be stood opposite such a big group as I am usually with the big group behind fighting the problem, but it's great seeing you all there willing to fight the problems that I will have in a very few years: I am very humbled. I apologise for the room. I have two things to declare an interest on: I have noticed that you have got an item tomorrow on the NHS; I have worked for the NHS for the last 25 years and I am not happy with what is happening with it, to see other people out there fighting for it REALLY encourages me to carry on.

The second interest I have to declare is the bus pass. It will be my 60th birthday this year. Thank you. Everything that I am seeing on your agenda for this meeting all touches my heart and it's something I will be fighting for. I will be joining you; I have my form in my pocket that I have signed today. Once again thank you for coming to Blackpool again; I believe it's been fifteen years you have been coming here. I hope everybody has a good stay and everybody in the town looks after you; they really appreciate your coming here.

I would like to open this Conference. Thank you.(Applause)

RON DOUGLAS:

The first speaker is Claire Keatinge, the Northern Ireland Commissioner for older people, at the end of the table. She has kindly come over; and she speaks on behalf of the people of Northern Ireland; she is a breath of fresh air. I hope she will give you some

thoughts of the problems they have which are not dissimilar to our problems.

<u>CLAIRE KEATINGE, OLDER PEOPLE'S COMMISSIONER, N IRELAND:</u>

Thank you very much indeed for the invitation to address the National Pensioners Convention here in Blackpool. I am VERY pleased to be invited. I am also delighted to talk about the independent role as Commissioner for older people and to set out in equivocal terms that I was asked to address a question: "Can we afford an ageing population?" What in the name of goodness does anybody else suggest that we do? We have an ageing population. Planners, you need to get that past yourselves very quickly. We have an ageing population. It is the best public health news since the last century.

More and more of us are living longer and more of us will continue to live longer and healthier lives. I have the privilege and pleasure to be the first Commissioner for older people in Northern Ireland. I was appointed in November 2011 by the Deputy and First Minister acting together - and for those which are familiar with the history of Northern Ireland politics will know - this does not always happen. So, I am here as an independent champion for older people and, at the risk of promoting the private sector, those who are familiar with the Asda advert: I am not in anybody's pocket; it's really very simple.

There are, and I have, a number of legal powers and duties of which we are required to review the legislation for older people. I can inspect any matter involving older people informally or formally and the powers given by Government allow me not to be obstructed. Those that have tried to carry out any investigation or research on any issue will know that the scope for obstruction, smoke and mirrors for confusion, for not understanding the question, suggesting they do not understand the question, feeding it back to you slightly differently, a delay, passing it on to somebody with a delay, an all-changing budget - all heard of that before? Can every single older person assessed as having a care need be confident that that care need will be met by a service that is qualified and dignified? If not, I will ask it again and I will push and uncover it. People try and change the question and talk about unmet need and variations in the region and differences in the contracting and waiting lists and all sorts of things. Can every single older person be confident that their needs are met in future? That is what makes our job so interesting and challenging. If I am obstructed by what they call a relevant or public authority, if I am obstructed by any of them, I have the same powers as a High Court judge and I can access any premises in which older people are cared for and I can talk to any member of staff in the regulated environment, any member of staff, at any time. I can talk to any older person that is cared for with their permission. That is what makes my job so very different: I use my legal powers.

We need to do a number of things. I don't go into a "misery corner"; there is too much of that out there, far too much. I use the powers of duties I have got to celebrate ageing and the fact we are living longer. We are not a lump, nor a group, not one single body of people, but individuals. I find out what matters to older people. Sometimes people say "I tell you what matters: leave me to get on with life. I am fine. But, in future, I want the services to be there". People want to be recognised for their contribution and recognised as individuals.

I also challenge discrimination against older people on the grounds of age and any other ground which effect older people. You will all be familiar with the fact that there is an increasing life expectancy not just in the UK but across the world and the increase in life expectancy is fastest in the developing world. It's good news across the world but there are very different attitudes. We have an ageing society and we have all heard them: front line staff, politicians; we have heard them all; those who celebrate ageing. There was a lady who had been around for 75 years with her experience and ideas, and she will have seen different changes and the great changes that come and go, and yet we end up with the same thing, only less. She will have seen this before, and it's, "Ask him; he has been an expert for fifty years". There is involvement. There are decision-makers for older people both now and in the future. There are planning services. There are people that recognise older people in all diversity. We are individuals and have our own responsibility and identities and opinions, but put them to one side at the moment because they are brilliant. Yet, there is a very large number of people and a very great deal of media coverage. How many of you have heard, "tsunami of costs"? "We love old people but they take up a lot of beds in the hospital". "Care services: where we will find the care services?" "Dementia; there are going to be so many people living with dementia". "In rural areas, where will we find the services"? "And, the cost of it all: the older people use the services, the bus services and claim their pension and everything".

Lose it. There are far too many pessimists out there and they talk about older people as a drain and not an asset and as a cost and not a benefit and as human

beings with rights as something that can be put on a balance sheet. Lose that as a principle, which I am sure you have already. After that, lose that as a fact because older people make a net positive contribution to our society. We are financially better off to a tune of £40bn across the UK because of older people living longer because older people volunteer. Older people pay taxes. Older people continue to work. Older people care. Without older people, most voluntary and faith organisations would be kippered flat-out on their knees, done out, finished. You can have the 'big society' all you like, but if you have no volunteers, it's no good. Yes, we are a better society on moral grounds because more of us are living longer.

Older people have rights. Yes, we can afford an ageing population because what else do they suggest we do with ourselves? And, we are a financially better society. All of us, who believe in a society, with all ages, where older people have rights that are protected - I believe the days are long gone when they say "they are old, God bless; they deserve it". Being patronised because of your age; enough, already. Older people deserve dignified treatment; they are citizens and have paid into society. Governments have promised them things they have signed up to. Do not be afraid; do not back off to the pessimists as they are only concerned with the financial cost of ageing. When planners look forward to planning health and social care and other services in the future, they are basing their planning on current expectations and current values and those who are uncertain is because if the next generation can go into older age in better health, being better fed and looking after themselves better, then they will have less chronic disease and will be able to age better for longer. I am sure, having worked in health and social care, that there is a very good deal about our health and social care services we should be very proud of.

I visited a number of care homes lately and I have been talking to residents and relatives who have been saying, "We don't want to be in this state of health, but given my wife/partner's situation... well, I can't really be cared for any better". This is refreshing. It's worth remembering too because we hear the scandals and when it goes wrong. For every day high quality exemplary care that makes vulnerable people safe, cared for and loved for and cherished right through to their last breath, in reality we spend £1.5m ... We have a care service that delivers some excellent support in the other interventions but where there is an increasing gap in the need for services and the availability, it's not good enough to have older people as needing older care but not critical care, but we will lead them quietly to struggle before their needs are critical enough. It's not fair, it's not dignity; I don't think it's legal.

As well as the social care issue, you have UK

spending on pensions lagging behind the UK average. We have 43% of pensioners saying they are finding it hard to make ends meet. If you ask the 43% of the population they will say this.

Many older people do not have the difficult choices about eating, heating, repairing their home etc. Older people should receive their entitlement and have a dignified standard of living, decisions about health and social care and benefits, and I know I am teaching grandmother to suck eggs here, but it is a matter of politics and it is very simple. But it is important we invest into the health and well being of older people and invest into the next generation so they can be confident around the health and social care and be confident as individuals: they have responsibilities as well as rights and they have done all they can to invest in their own income. If we can change tomorrow's older people, we need strategic intervention and planning. We need the World Health Organisation to look at quality of life, health, independence, social participation and mobility and that is what matters, because the best quality of life happens for older people with focus on quality and fair treatment. When we celebrate and value the celebration of older people, we have nurtured opinions of diversity of ideas. You can have high quality health and social care, whatever: age, integrated transport, Health and Safety, community safety and life long learning, and a chance to express creatively; that is not just in health and social care but has to be everybody, in all Government planning.

I have listened to what older people say matters to them and I could say it's about transport, income, health and social care, and it kind of is, but it is also kind of not, because when you distil it down, older people say they want hope, confidence and certainty, and we are hopefully going to be living longer; we want to be hopeful about that. We want to hope that the Government will invest in this and in the future. We want to hope that will reduce pension poverty but also to be hopeful we need to be confident today; treated equally, respectfully and included in decision-making that effect us, and to respect our experience and values; looking at fact and opinions, and, as we are all different, we want to be confident in our rights.

I want to be hopeful and I want to be confident. The next thing is – well, they usually go a little bit quiet after that, and they say "I want to be absolutely certain in the event they develop dementia, become frail, are living in poverty, experience abuse, or otherwise vulnerable, that the services, support, and respect that they need and the legislation protection they need will be there without question at the time they need it, and the place they need it, and with the quality they need and dignity and respect they need, right through to the last breath, and to reel it back if I can't be really certain, until I can

be really confident that my health is good, and I can communicate it to two or more generations behind me.

This is a country that wants to support older people's needs and in a damn better way than the previous generation did; those that died earlier, that had worse health. People in this room will remember before a health service was set up and running; so, that is what we need and what we want to hold on to. I am very confident indeed that by bringing together the voices of older people together with organisations like the National Pensioners Convention we can bring a real lasting change for today's, tomorrow's, and the next day's older people. I wish you very best wishes for your Convention and I hope it will be as stimulating as before, and I hope you get the results from Government because they do need to listen to you. Thank you very much indeed.

RON DOUGLAS:

Thank you, Claire. The next speaker is Neel Radia who is the Chair of the National Association of Care Catering.

NEEL RADIA, CHAIR, NATIONAL CARE CATERING ASSOCIATION:

Thank you. Good afternoon everybody. I am Neel Radia and I am the National Chairman for the National Association of Care Catering. On behalf of the National Association of Care Catering I would like to thank you all for inviting me here today and to give opportunities to help raise and share a vital concern. Let me begin to give you a brief overview of the National Association of Care Catering or the NACC as we are known. In short, the NACC exists to improve standards of catering in the care sector and we believe without exception that every elderly and vulnerable person in the UK has the right to good nutrition and hydration provided with care and in a manner that respects the dignity of the individual. Our members represent all areas of the care catering industry, from residential homes or day centres, or day care for the elderly, people with disabilities, or young people through to luncheon clubs and production and delivery of meals to day centres or people's homes through community meals services, or meals on wheels as this is most commonly known.

We are dedicated to support our members with information, practical advice, guidance and a united voice. The NACC is recognised by local authorities, independent providers, the charitable sector, government departments, as a prime source of information and all aspects of catering in the care sector where our main aims are to enrich standards of all catering in the care sector and to promote better practice and provide a forum for debate among individuals, companies and organisations, and to enable the exchange of information, expertise and promote the development of profes-

sional standards to commission research into matters relating to catering for the care sector. And, to publish guidelines, policy papers and authoritative statements on all aspects of catering for the care sector. I would like to let you know as an organisation we are members run by members, all on a voluntary basis because we care.

My focus today is meals on wheels: this is a tremendous service that is under threat. A vast number of meals on wheels services are being closed by local authorities as an easy way of saving money fast, and this strategy gives us huge concern. Meals on wheels services are much more than meeting the needs of older people as they serve the much greater and incredibly vital social role to address loneliness, isolation, safety in the home and community. For over seventy years, meals on wheels has embedded itself in the British culture, as good as a Sunday roast and talking about the weather. In fact the majority of the population will not remember a time when it did not exist. The service was originally set up in the 1940s, to deliver meals to individuals at home who could not purchase and prepare their own meals and today it is as vital as ever. Meals on wheels is a wonderful service that plays a crucial role in our community which ensures people are well-nourished and are able to be socially independent and in their own homes for longer. For many service users, the human interaction they get from meals on wheels is the only interaction they have. So, as well as preventing malnutrition, it prevents social isolation. You simply can't deny the overwhelming importance of this in ensuring their safety and wellbeing.

Contrary to popular belief, even though the service is established in our culture, the service is not established by law: there is no statutory obligation for county councils to provide the service and it could cease to exist at any time. We hear the term 'postcode lottery' bandied about a lot but when it comes to meals on wheels, access to the service is down to geography and policy. The fragility of the service has been highlighted in recent times of austerity with councils closing or restricting service to save money. This short-term solution is quite frankly short-sighted and the consequences are huge and must be understood before further damaging irreversible cuts are made. I am not placing blame entirely on county councils: all funding parties must provide with financial support and resources needed to maintain the meals on wheels service before it becomes a thing of the past.

A recent study showed 56 councils have opted out of directly providing the meals on wheels service. Alarmingly that is 25% of the UK, but even further cuts are soon to follow. Meals on wheels is not a luxury; it's an essential service; a regular hot meal 7 days a week

may provide the only personal contact a lonely elderly person has that day. That visitor can provide essential help when they come across someone who is weak, sick, cold or distressed with nobody else to turn to. The service is part of the health and safety support to enable elderly people to continue to live in their own homes, and to be socially independent in line with current government policy.

Meals on wheels plays an integral part to emergency admissions to hospital and looks at the framework that is needed to support the elderly on leaving hospital thus saving billions to the NHS budget. The service is also crucial for preventing more serious and costly health issues, keeping the elderly at home both nourished and hydrated plays a key role to related malnutrition visits to hospitals which costs the taxpayer considerably more than the meals on wheel service itself. The average cost of an NHS bed, not including treatment, costs a staggering £255 per night compared to the average cost of a hot meal.

Research by the NACC has also found that meals on wheels providers often have more regular contact with people than home care workers and often fulfil a number of roles. These include providing social contact, prompting about medication, reminding people that they need to drink more fluids, and providing a visual check on health and appetite. The role of meals on wheels service as a preventative should not be underestimated. Malnutrition costs the UK a staggering £13bn a year; £7.3bn of which is on the elderly. You may be surprised to hear that this is more than the cost of obesity, even though the strain of obesity on the NHS and the economy is more prevalent within the media. Over 20 million meals on wheels are served each year and the demand will only increase as the population ages. It's estimated by 2020 that 40% of the UK population will be over the age of 65. That is only 6 years away so how will we be prepared to meet the demand of this population growth in the future if we are failing to care for those within our care today?

Taking on board the facts regarding malnutrition and hospital admissions and the ageing population, the question we have to ask today is: can we really afford not to have a meals on wheels service in the UK? If there is any doubt, then the next question must be: should we consider protecting this crucial service and making it statutory by law?

So, what are we doing about is an Association? As an Association we recognise the immense value of the meals on wheels service and we believe all vulnerable and elderly people should have access to a meals service, and so it must be protected at all costs. Each year the NACC dedicates a week in November to promote and raise the profile of the vital importance of the meals on wheels service within the UK. This year this

will start on the week commencing 10th November. The slogan for this year's campaign, "Any time, any place, we care". This encapsulates the reality that this service, whether delivered to the home or through day centres and luncheon clubs, is about more than just nutrition and hydration. I can't stress enough the importance of the great social role addressing loneliness, social isolation and safety and security in the home and community.

National community meals on wheels week has been a fundamental part of the NACC calendar because it raises awareness to local government and communities across the country. The event also highlights important issues such as security and safety in the home and healthy living and winter living. In a united effort to drive home the message of this vital importance and this valuable community service, every NACC region will be taking to the road to compete in the NACC national road relay starting in the south-west region in November. The meals on wheels vehicle will be part of a rally covering as much of the NACC regions on their allocated day as possible, ending on Friday 14th November in Scotland. The regions have enthusiastically taken up the challenge of the national road relay and are making plans to get the message across to as many people as possible, from the general public, community representatives, local government, to suppliers and care providers in a compelling and engaging way.

We would welcome your support in helping us on the way to raise the profile of this important service. We also encourage you all to speak to your local authorities and local MPs, to find out what is happening in your area with regard to the meals on wheels service and, if a service is not being provided in your locality, ask the question "why not?" And, "What has been done to provide us the access?" There will be an abundance of activities taking place across the country throughout the national community meals on wheels week and your support would be appreciated.

Both myself and my colleague will be around this week to answer any questions you have, so do come along and join us outside and sign up to receive further information about what we are doing to raise awareness for the meals on wheels campaign.

I will finish with a last note. I strongly believe it does not matter who you are or where you come from; we all deserve to have access to good food, and this especially applies to the elderly and vulnerable in our communities that do not have the voice. Not all older people have the good fortune of family living nearby or caring neighbours, and we need to make sure they are not overlooked nor forgotten. If we do not stand up and make some noise for them today, they will lose the vital lifeline and potentially their independence and dignity,

and we will lose a valuable community service that one day, we, or our loved ones, may be in need of.

What people foolishly forget - and this is some people I have met over the last year - is that we will all grow old one day and, also, we may find ourselves in need of the help and need of the meals on wheels service. The British meals on wheels service must be protected; it's our responsibility to speak out and make a difference today. Thank you.

RON DOUGLAS:

Thank you, Neel. The next speaker is Belinda Turffrey from 38 Degrees. This is obviously a very big organisation and has very big internet presence. Obviously, many of you that are on the internet I am sure have received emails or campaigns that they have supported. Please give Belinda a good round of applause.

BELINDA TURFFREY, CAMPAIGN MANAGER, 38 DEGREES:

Thank you very much. I was saying earlier that this is only my second public speaking event so I was a little intimidated by the size of the room and audience but I was told you do not bite so hopefully it will be fine. Thank you very much for inviting me here: I am really excited to be here. I first wanted to pose a question: do you know what I mean when I say the voting numbers for the political parties are at its lowest ever? I am sure you do because it's been in the press a lot and we are constantly told by politicians and by people that work in politics that people are not really that interested; they don't care about issues, and particularly with our organisation they are just clicking on a petition but are not actually that interested. But, I think most people in here would disagree with that; we know most of our members disagree with that. The sole fact that 38 Degrees exists, I think, proves that. I don't know if there are any 38 Degrees members here, but for those people that may be aren't familiar with us as an organisation, I will give you a little bit of an introduction.

I am one of the Campaign Managers at 38 Degrees. We are a campaigning organisation, or, we would call it a huge community of people that care about issues, as we want to make the world we live in a much better place. We have got about 2.6m members now which is a huge amount and we have grown massively since we became established in 2009. A large percentage of our members are older people and we know that because we hear from them loads and loads, and we get people phoning up the office and visiting us and attending events. It's really great to see how passionate older people are, campaigning about the issues.

We talk about our 2.6m membership. Members become members by simply taking an action. You don't have to pay or sign anything but you just have to put

down your email address and sign a petition and then we'll consider you to be a member. Members help decide what we do. They tell us what they want to campaign on. The NHS is a really key issue for our members and it constantly keeps coming out as something to try and continue to stop the privatisation of it.

Our members make decisions, and we are confident in that because we are solely independent and solely exist because we get thousands upon thousands of small donations from all our members; a lot of the time the average donation is £12. But we often get cheques in lovely cards from people just for £2 because they want to show they are interested and care but don't have a lot of money to contribute. That is just as important. We feel it's sending a message we're doing something right.

We are often criticised as being a Labour front group but the reality is we are politically neutral as an organisation. The thing is the issues we campaign on are political and most issues that people campaign on are political so it's kind of difficult to break the mark. Yet I think the key thing is that all our members care about the world we live in, and want to improve it, and through the collective power of our campaigning, we have done some really amazing things. Our members, along with lots of other people, have helped stopped privatisation of the forests and wrote to their MPs, and they persuaded the government to back down from their very real plans of privatising the forests for future generations.

38 Degrees members have played a role in zero hours contracting, and that is because there are thousands of people that work this way, yet they are offered no job security and, for many, they are not paid sick pay. There is a public consultation where there are 40,000 emails telling them why they think zero hours is a bad thing. It needs to be improved so much that we heard back from the government to say that they were going to delay their response to the consultation because they were still wading through all the emails and letters that were sent in. So, I think we are doing something right. And, next month there is explanation as to what is happening with zero hours, and what is going on.

You may have heard about the Oxfam story last week, about the fact that Conor Burns MP complained to the Charity Commission about the Oxfam advert over the "Perfect storm" caused by "Zero hours contracts, high prices, benefit cuts, unemployment and childcare costs". They were saying they were lifting a lid on austerity in Britain, and they were criticised for highly political campaigning. I know for some Oxfam were delighted about the amount of free publicity they got but many organisations, particularly ourselves, felt it was yet another indication of how government is try-

ing to stifle charities and campaigners taking part in public debate, particularly issues affecting people in the UK, where people are being pushed into poverty. Well, I am not sure, but I think something is going wrong.

So over 75 organisations sent a letter, and it was in The Times yesterday; I don't know if you saw it, but criticising the government over the attempts to silence legitimate debate because it risks undermining democracy, and this is why older people and everybody in our community is so important.

You have such a lot of power, and you wield such a lot of power in the eyes of the government and also just in the eyes of the UK. This is why we would like more people to get involved with campaigning and campaign about issues they really care about, particularly now that the Lobbying Bill has come into force. We have been referring to it as the 'Gagging Law' because we feel it will stop the issues we care about running up to the next general election. Government said they are bringing this in to clear up politics, but we do not think the Lobbying Act does any of these things: it restricts democracy and your ability to campaign.

For example, 38 Degrees is really well-known for petitions and mobilising hundreds of thousands of people to sign petitions and to deliver it to their targets and to their MP to tell them face to face why they disagree with the issue when the 'Gagging Law' comes in. If you are campaigning on an issue and the person you are tasking is a government minister, and if they live in a marginal constituency and if you deliver them a petition that will be deemed as a political action, it will be caught as regulated activity when actually all the people want to do is use their democratic right to talk about the issues they care about.

So, the Lobbying Bill has politicised a lot of the activities and it's become a hugely confusing area. We know we're going to have to spend a lot of our members' money on lawyers' fees just to try and find out whether the issue we are campaigning on will be caught in the Lobbying Bill, as there is a lot of confusion because it was rushed through Parliament so quickly, and the government has cut down on the amount of money they can spend running up to an election; cut it down by two thirds. So, again, it will have huge damaging effects on 38 Degrees and Oxfam et cetera.

It means we are not going to be sure what is caught and what is not. As a larger organisation we are able to spend some money on lawyers' fees but smaller organisations and local community groups are not going to have that privilege. And so we are concerned about what those organisations will do; will they simply decide not to campaign, or reduce what they do? Or,

will they go ahead and just be concerned they are going to get reported to the Charity Commission like Oxfam? Nobody knows. So, it is going to be an interesting time between September and May leading up to the General Election as to how far people will push it.

I know you have the Doctor here tomorrow who helped saved Lewisham Hospital. This is a great fantastic opportunity where people in the local community have fought for the local A and E hospital which the government wanted to close even though it was running very well. They spent a lot of time, and went to the MP Jeremy Hunt, and went to the government a few times. They saved the hospital, but that was before the 'Gagging Order' came in, so I am not sure that would have been allowed had this Order already come in. The reality is the 'Gagging Law' will call off democratic debate a year before elections; there are hoops for charities and organisations to jump through and we are not clear how it creates transparency and makes policies clearer, and if there are issues, how they come back.

A couple of things that came out of the 'Gagging Law': over 145 different organisations worked together and I went to a lot of meetings with organisations like the Countryside Alliance, sitting next to the League Against Cruel Sports that are normally on opposing ends, but were quite happy to fight for our right to fight democratically. There were a lot of meetings and a lot of people got involved in campaigning issues, and speaking to the MPs. We had a lot of meetings and a lot of members came and told us what they thought of their MPs. It shows how people are passionate about the right to campaign. Sadly we lost, and now we have the Lobbying Act so we have to see what happens after the election in May. But, it's not quite all doom and gloom yet, and this is where you can demonstrate the power of older people standing up for what they care about.

38 Degrees is an on-line platform, as we call it, but we have created a way forward: all of our members or anybody can start petitions on smaller issues they care about, so it really is giving the power back into your hands. We have had some brilliant examples, brilliant wins. Most recently we had one of our members called Lynne who lives in Bath, who is 67, and her council wanted to close down her local public toilets. She thought this should not happen as a lot of people use those toilets and many people are caught short when out and about and she said they were incredibly important. The council didn't want to listen but she got a lot of support from people in the area who signed the petition and she put forward to the council. However, the council would not speak to her so she took matters in the own hands and occupied the toilets for three days, when they were supposed to close them. She went in

with her flowers and camp beds and some books and she was in there for a straight three days. This was to prove to the council how important she felt that was. She forced the council to have a debate on this issue, and the local toilets are still open: a fantastic win. She was brilliant. Just a REALLY great example of people saying, "Actually, do you know this is wrong and you should not do this. But just listen to me, if I have to sleep in a toilet cubicle for three days before you to listen to me, then I will".

We have a member at the moment who is campaigning for a bus stop to be outside a beautiful new hospital in Finchley. The hospital is wonderful and services are great but for some reason there is no bus stop outside, and so if you walk with sticks or a Zimmer frame, it's really hard to get to so she is campaigning for the local council to put a bus stop outside. A lot of petitions and things have been set up.

These are a couple of examples showing you really do have the power in your own hands, and you can make a huge difference whether it's on a small issue that just effects your community locally, or a bigger national issue. When people come together they really do make things happen, and people power is so important. As I said, older people are a huge important and influential group. You vote, and so you are hugely important to all political parties and so they listen to what you say and what you think about.

I think you should really remember that when you are campaigning in the future. Hopefully most of you find campaigning really rewarding. I am very lucky because I get paid to do it for a job and I get to come to speak to you, who do this stuff. But it's really amazing to be involved with; and with the Internet, and things like that, it's becoming a little easier.

We are often asked to describe why we are called 38 Degrees; it is an angle at which an avalanche starts, so it is the tipping point when things start to happen. We exist because our members, people like you, care about issues and want to get together and want to campaign. Thank you very much and good luck.

RON DOUGLAS:

Well done Belinda. The next speaker should have been Caroline Abrahams but, sadly, she has been taken ill. Instead we have Sam Nicklin. We have had recent meetings with Caroline to get together on some of the issues, and I am sure Sam will give us an update on where they see Age UK and the NPC perhaps working together in the future.

SAM NICKLIN, CAMPAIGNS MANAGER, AGE UK:

Thank you very much for having me here today; it's such a privilege to be able to be here. It is a privilege to be able to speak to a large group of seasoned cam-

paigners. I have been to the NPC Pensioners' Parliament twice before and you have always been such an inspiration to be able to talk to you and hear your stories of campaigning in your local communities. So, thank you very much for letting me be here today.

In the time we have got, I want to talk about an issue that some of the other speakers touched on as well. I think you will agree it is one of the most important issues for older people today: social care; social care that many members of the public have barely heard of. If you don't need it, it may not sound very interesting or very important but, if you do, it really matters. If you are an older person that is becoming a bit frail and in need of a bit of social care, it makes life worth living, and helps older people stay connected to their community so they need less from the NHS, especially our hospitals.

For some older people with pronounced care needs, and if they have dementia, arthritis et cetera, then good social care is a life-saver as, without it, you would be really stuck and struggling to keep going. We know social care makes a huge difference. Social care does not necessarily have to cost an amount; a bed in a residential care home is cheaper than a bed in hospital, and a chair in your own home would be less expensive still. You would think the government would view it as a bargain and something to invest in, especially giving the ageing population as the need for social care will go on increasing, and so putting more money into social care is good for older people and good for the public purse. What is not to like? Only that is not how it is.

At Age UK we have studied the figures and we found as time goes on this government is actually spending less and less on social care; not more. Yes, they have moved some money from the NHS to help pay for more social care but that new funding is less than the huge cuts they have made to council budgets. Taking money from the NHS won't improve services either necessarily. The truth is that as far as social care is concerned the government has given with one hand and taken more away from the other, and that is the terrible shame. It makes me really angry, and that is why I do the job I do.

One of the worse things about this situation is that organisations like Age UK, like the NPC for years and years now, have been campaigning on this issue to try and improve services for older people in need. This year, on 14th May, the Care Act became law. This is a whole raft of reforms that sets out massive changes to the social care system, changes we have not seen the like of since 1948. As a result of these cuts, there is a real risk that some of the good reforms that the government wants to make and sets out in the Care Act will never actually happen: more help for carers, and bet-

ter information and advice. But worst of all, it means that a lot of older people who need social care probably won't get it. If they are lucky, they might have friends and family who can help or have enough income and savings to pay for private care themselves, but of course many older people aren't in that position and left with no help at all. We probably know people in the community that are struggling along without the appropriate help.

Two or three years ago there was an estimated 800,000 people in that situation, and that is 800,000 too many; pushed out of the social care system and unable to get support from their kith and kin, and basically left to cope alone. Age UK will soon be publishing a new estimate for numbers of older people faced with this situation. Early indications are - surprise, surprise the number has not gone down. Government funding for social care is putting more and more pressure on families too which sometimes buckle under the strain. We have many calls from our Carers Advice Line where they are struggling to cope; where there is no transport to get to a day centre or where the day centre is removed or charged for making it now completely inaccessible. A lot of older people are caring for others: husbands and wives especially, and they do it willingly and out of love, but over time the responsibility and sheer hard work can take a toll on their own health and can wear them down and so they also need more care and support. This means the stress on front line staff can also be intolerable; forced to rush from one client to another knowing they are continuingly shutting the door on vulnerable people that need more of their time that they can give.

At Age UK we hear horror stories about poor care. It is true that sometimes the care that people are receiving is just not good enough. Programmes like the recent Panorama documentary showed just how bad it can be. But the overwhelming majority of paid carers do their best, over and beyond often than they are paid for which is not very much any way. At Age UK we think they deserve more recognition and support than they do. As you expect with the General Election now less than a year away, at Age UK we have been ramping up our campaign on social care.

We are trying to persuade all the political parties to commit more investment; that is essential if we want to improve the quality and extend the reach of social care and give more support to families and better terms and conditions to professional carers too. I have already explained that investment in social care is falling, not rising under this government but the fact is things weren't better under the last three Labour administrations either. Social care has been overlooked and neglected by politicians for far too long; perhaps like many members of the public, a lot of politicians on all sides

find it hard to understand what social care really is and why it's so important unless they have first-hand personal experience from family or friends or from their constituencies. If you are of working age and fit and well like most MPs, it could be hard to imagine what life is like when life is hard and where you need help with heating, shopping and drinking, things you take for granted today. So, that is why it's so important for older people like you...to be central in what we do, helping politicians to help make the leap of imagination so they really understand what older people need.

Over the next few months we especially want to highlight the importance of good quality care, care that older people deserve, and to contrast that with the reality of what's around now. It is not usually through the fault of front line staff or their managers, as I have said, but because the funding to support a good service just isn't there. As part of the campaign we hope to put out some positive messages about the work that front line care workers do. We want to build a really big coalition around this campaign so that our voice is REALLY loud.

Many speakers this afternoon have touched on social care as a political issue; a political decision that needs to be made in order for funding to be made available in order for legislation to be changed. So, we need to come together, older and younger groups, to put pressure on politicians so they can't ignore this issue any longer.

Age UK have been in discussions with NPC, and I hope over the next few months we can work together with you to bring social care nearer to the top of the issues that politicians have to respond to if they want to attract public support up to the General Election: it will not be easy; there is the Lobbying Act and we will be issuing guidance so that local groups know how to stay within the law. Luckily, one of the things they are unable to regulate is local hustings and meetings with Parliamentary candidates: that is still perfectly legal. I am sure many of you will lobby the Parliamentary candidates around the issues that are facing older people.

There can be few better causes than investing in social care and with your help I think we have a real chance. So, thank you again for inviting me. Come and see me at the Age UK stand to find out more. I look forward to campaigning with you for a social care system that is really fit for the twenty first century and, for when I am older, and will need it. It's what older people need and deserve and it's the right thing for our society too.

RON DOUGLAS:

Thank you, Sam. It now gives me great pleasure to introduce Jim Donovan. He has come over here to see how we operate so he can encourage people in Australia to do the same. I am sure he has learned

many things and will take many things back with him. I hope he can bring it to fruition in Australia. Jim, welcome.

JIM DONOVAN, PRESIDENT, MARITIME UNION OF AUSTRALIA VETERANS:

When we found out this Conference was taking place we wanted to be part of it because what I have learned here today, and what I have seen here today, and from what I have heard there is not one single difference in what is happening in Australia today. Not one single difference. A Conservative government was elected in November of last year and they set about in May this year to completely dismantle all the last hundred years; they have devastated the amount of money that has been spent on the elderly, the sick, the frail, the education system, you name it. They have taken approximately 140-50bn dollars out of the budget and never one single penny off the rich. In fact the day I left here our Conservative treasurer referred to the attack on people, like ourselves, where he said in effect every Australian that is working, each month's earnings each year pays for pensioners, hospitals, et cetera. He didn't say that because he wanted to be nice to us but he said it because he said to the people that you are working, "You are paying one month of your year's salary for the elderly". You know, he will get old one day but he will probably survive on the pension because of the wonderful superannuation that the parliamentarians and rich have in Australia.

As I said coming here and listening to what has been taking place and about 38 Degrees, I find that another avenue in which we, as an organisation, can use - we have not got this in New Zealand nor Australia at the moment - we need every single tactic that is available to us to ensure that they are going to stop taking from the people who can least afford it. They are continuing to do so. Another point is they found a way of using the lobbying system now they are changing the law. Every single time somebody comes up with a great idea to benefit the workers in developed countries, they don't want in any way, shape nor form to have us as an organisation that is going to say, "If you are not going to look after us; we are not going to vote for you".

It's amazing how Conservative governments can be elected at a time when there is so much unrest in the capitalist world because the majority of the people that vote for them are workers or retirees. They can't have it any other way; it is not like 200 years ago when the first parliaments were elected by people that owned the land and estates here in England or Britain. We are the people that can determine our own fate so we need take up what is necessary to ensure that they are not going to continue to come and take away everything that we have fought for and won. (Applause)

One thing I will take back here is that partly in Australia our pensioner movement is fragmented. We have six states in two territories that go their own way to some degree. We don't have this Parliament; we don't have this Congress; we don't have the numbers that are here today. I believe Britain is big and so I will take it back. In Australia I represent 700 or 800 workers; the Dockers and Seaman, and the same for pensioners, but what we need to do is go out. I heard somebody say today, "We need to double the amount of people that are here today". The only people that can double the people today is us, because all of what we have spoken about here today will not be published in the papers tomorrow or the TV tonight. It will not be published or seen because they don't care because you don't have the power. But you see the 38 Degrees started to have this, and if I was in Britain I would want to be part of it for the same reason. We want to get the message across and the only way to do this is to develop things like 38 Degrees. More people can join the organisation; we need people to pass on what is said today, and in the next couple of days in writing. Go to your next door neighbour and people up the street and let them know of their enormous power; but, we are not using it correctly.

I will finish, if I may; it's a great pleasure to be here; great to be part of it, and I will take back to Australia the message that we get from here to ensure that the Government — which is the same in Australia: both about the same - will not be able to rush us and take away our conditions that we fought for, for a hundred plus years. Thank you very much.

RON DOUGLAS:

Thank you. The next speaker does not need any introduction; he took this place by storm last year and I am glad to introduce him again this year: Owen Jones.

OWEN JONES:

Friends, sisters and brothers, it's a pleasure to be here again; you put up with me last year and I am glad you invited me again with my babbling. It is great to be here again. Some of you are probably still thinking that I look a little bit younger than your grandkids, but I do feel I have aged in the last year. I can already feel the youthful, ever youthful, energy in this room. I am inspired, as ever, by this formidable army which should make the powerful tremble. You inspire me as much now as you did last year.

Now, friends, the struggle for justice for equality and fairness is a long one. The baton is passed from generation to generation. It's not easy. It's called a struggle and not a walk-over for very good reasons. But it's something I learned from my own family; from my great-grandad, a railway man who went on strike in

1926 in solidarity with the miners, and I still intend to get revenge for him at some point. My grandmother worked in the NHS in 1947 and she impressed upon me the sacred importance of our NHS. I think of my grandad as a life-long Socialist and I am inspired by what they both stand for, and stood for. It is an inheritance I am proud of, but I know this: it's an inheritance so many of you here today have passed on; it's one of the greatest gifts you give to this, the next generation, whether or not they are you grandkids or not; you give us all hope; you give us all inspiration and you give all of us courage.

Friends, I have one more message above all else and it is to emphasise: it's not the young verses the old; it's those at the top against the rest of us. That is absolutely crucial for us to remember. What travesty. I have to say this but those that pedal the poisonous doctrine of generational war, what it does is it lets the people at the top off the hook, those that are responsible for the mess the country is in. Pensioners remain at a risk of poverty as so many of you/your fellow pensioners have to make the choice between heating homes and eating. We are the 6th richest country in the world but, on health, many die each winter because they can't heat their own homes. Older people are facing the brunt of the real tight squeeze on our NHS budget with a double whammy with slashes to our local authority budgets that are hammering social care.

At the same time there is another point to make: we had an attack on universalism, and it was an attack on all of us, and this is why: not only is means-testing expensive and bureaucratic, but universalism enshrines the basic principle that we all put something in and we all get something back. As well as that, as well as undermining faith, desperately needed faith in our Welfare State, the only way of guaranteeing that all of those in need get the support they need is universalism, and we know that from pension credit where a third of people eligible for pension credit do not receive it. That is what happens when you dismantle universalism; it's an attack on the poorest people in society yet not on the rich. And that is a myth all of us have to debunk.

What also underlies this is the mantra of generations that you have been pitted against. Many of you have children and grandchildren and you love them dearly but you fear for their future and with no wonder at all: this generation face a future of indebted insecurity, where housing prices leave many young people to get a house just part of their dreams, and, unpaid internships, and only those with prosperous parents can get into professions whether it's law, medicine et cetera...

There are cuts in services and rises in zero hours and being self-employed. There are those saddled with

debt because they have the ambition to carry on with education and ever-falling living standards. It does not promote generational war but it promotes solidarity with the generations as one invincible support. We are far better able to deal and fight injustice if we stand together: an injury to one is an injury to us all. That's the principle we must stand by.

Friends, I want to talk about this government; a government which is launching attacks against all of us. They are in victory at the moment. But, just for one minute, let us indulge their own methods. They said they would wipe out the deficit - lucky to get through half. They said they would rebuild growth. This is the worse so-called economic recovery, not since the 70s or 80s and not even since the Great Depression of the 1930s; this is the worse so-called economic recovery this country has seen since the Victorian age. Yet, that is what they call victory but, at the same time, let us not be naïve as these are not the real measures they have set themselves. They have used this crisis to push policies, which they always wanted to get away with: they didn't think it was otherwise possible. They turned the crisis of the market and people at the top and turned it to a crisis of public spending. It's the biggest lie, biggest myth, in British politics. The reason we are in this mess is because little money was spent on schools, hospitals and elderly people rather than the bankers at the top that plunged this country into economic disaster.

The Tories themselves backed Labour spending plans pound by pound and they wanted less regulation than the banks than New Labour; they should be damned for not regulating the banks properly - they wanted even less - but what they are doing is worse. Margaret Thatcher could not even have dreamt this as they are using it as an excuse to dismantle the NHS. Mr Lawson, the Chancellor of the Exchequer, said the NHS was as close as the country has to a religion. Yet companies that have benefitted from the privatisation of the NHS has also, coincidentally paid money to the Conservative party.

With the attacks on what the working people have in this country and the renewed assault on our trade union movement, we should be clear about this because the Labour leadership has failed to have the courage to justly defend the unions we need, but we will do it instead. We'll say that we are proud of the biggest democratic movement in this country representing every one of them: supermarket to factory workers, to nurses and teachers, to a decent society and, if any should apologise for their funding arrangements, it's the Conservatives that look at hedge funds and loan sharks; those that are responsible for the mess, and those that are profiting from it now.

This is the recovery of which they speak. There is as

much recovery in people's lives as there is a sense in the Tory front bench. It is the longest fall in living standards since Queen Victoria sat on the throne of this country in the 1870s. Since Clegg/Cameron, over a million workers have been plunged into poverty; disproportionately women. Then, there are those in poverty in the country that are actually in work; they get up and earn their poverty. But we have a booming industry, and I will give you one: food-banks. Nearly a million people now depend on food banks; and children too. These are high figures. 30,000 people are entirely fed by food-banks. We are the 6th richest country on the face of the earth, and we can no longer feed our poorest people. What a damning indictment of David Cameron's government.

Families every month depend on loan sharks to pay off other forms of debt. Then we have the zero hour contract workers and the self unemployed people who, in return, are supposed to be a bygone era where the dockers would stick their hand up hoping to get work, and now young people get a text message at 6 am saying if they have a job that day or not. They have no pension rights, no sick days, no future to build for them or their families.

5 million people are stuck on the social housing waiting lists. The city I have just come from, London, a great booming city, yet where one in four kids are stuck in over-crowded homes. How does the government respond to the housing crisis? Impose a cruel and unjust policy: the bedroom tax. Two thirds are affected. The disabled are forced to comply; and they have to down-size to smaller properties that do not even exist.

Who does this government single out though? Attack the new enemy within - the bankers? The poverty-paying bosses? The private landlords ripping us all off? No. The new enemy within is Oxfam. What they have done with Oxfam is they have just gone through the crisis that so many people are facing around the country. Oxfam have been referred to the Charity Commission for political campaigning; it is the first time it has happened since they campaigned against apartheid in South Africa in the 1980s, but it reminds me of a quote by a Catholic Archbishop in Brazil who said: "When I feed the poor they call me a Saint. When I ask why they are poor, they call me a Communist". That is the approach of this government.

Here is the point: there is so much anger about, so much fear, but there is one thing missing, and that is hope. Without hope you give up. And this is what happens. This government and the media redirect people's anger away from those responsible for this mess. It would be amusing if it was not so serious. It's the politics of envy. The top 1,000 people in the country could afford it when they are struggling. Yet, no, they try and make struggling people envy each other. They say:

"Don't be angry with the boss/government, but, instead, look at those down the streets with their TV sets" et cetera.

Pensions have been dismantled by bosses. The nurse next door, whose pension is still intact, is pitted against those that can't get social housing because the government can't build it. Both New Labour and the Conservatives allowed jobs to be stripped from their economy. Envy instead the immigrants getting what is rightly yours. Where does it end? There are the slogans that are National Front posters from the 1980s. It's politics that divide right from wrong. It is those with power trying to get to stand up for the powerful, but to stand up to the powerless. And, who is the latest to push that? UKIP. Anti-establishment. I found it fascinating given Mr Farage's privately educated background, which includes slashing taxes on the rich and slamming the NHS in the way this government could never have dreamt of, and sacking 2m public sector workers. That is not the key point but the key point is they let the top people off the hook. Who is responsible for the mess the country is in: the Nigerian worker or the Indian cleaner? Or, the bankers that plunged this country into economic disaster? Or, the rip-off landlords? The illegal loan sharks? We let them off the hook by politics of divide and rule.

You need to give people hope. I want to talk to people about what the politics of hope are. People get up to earn poverty, as they can't get a decent pay packet, let alone look after their children. So, instead of subsidising tax benefits, let us defend those that work, have a living wage to support them and a living wage for them and their family. And, for those in social housing accommodation, rip off the private landlords instead because billions is spent on housing benefit. The landlords' pockets are lined with rip-off rents, so let councils build housing, create jobs and stimulate the economy and instead of leaving people in insecure work and unemployment, have an industrial strategy like other countries. If you let the market decide, then let us create hundreds of thousands of renewable energy jobs to tackle environmental concerns.

But the people at the top will not pay their taxes. There was a £25m loss because Amazon and Google et cetera would not pay their taxes. So, it does not matter how rich you are and/or how many accountants you have, but you will pay all the tax you are expected to pay. We will have progressive tax on income and wealth. And, we won't have the energy companies, the big six, holding us to ransom.

What is interesting is that people want it to go further; they don't want to support a freeze on fuel bills but they want re-energisation of our energy supply/suppliers... it's not just Conservative supporters; you take

the re-nationalisation of energy suppliers. We spend four times more as taxpayers now for subsidising rail companies, inefficient rip-off rail companies, that have priced millions out of travel. So, as each franchise comes up for renewal, we should bring everyone back under public ownership, where it belongs.

With the banks, instead of bailing-out the banks and letting them carry on nationalising the debt and privatising the profit, we must say to the bankers to return to local banks to democratically enable us, the British people. These are not extreme demands. It is not radical. It is not out of the mainstream. It is not the common-sense of the people of this country, but the elite of this country that are out of touch; they are the ones that are trying to deflect blame, but are out of touch with the needs and ambitions of people in this country: whether young or old, male or female or whatever background they are from, out of touch, except for those that are at the top, the rich of the country.

What gives me hope is that we learn a lot about British values and the government push on about British values. I will talk about values and what I think should be drawn on. Change does not happen in this country because of the goodwill and generosity from those above, but from the struggle and sacrifice from those below.

From the first working class political movement and the suffragettes falsely imprisoned, and the early trade unionists, and those that fought for the rights and dignity, and those that fought sexism and homophobia, batoned by police officers, and vindicated by history, and those that took on the poll tax against the government - which did not get rid of poll tax but helped boot Margaret Thatcher out of Number 10 - everything we have had has not been handed to us by those at the top but won through the struggle and sacrifice of ordinary people: the Welfare State, workers' rights, the National Health Service, and grandmothers and grandfathers, fathers and mothers and so many in this room: we stand on the shoulders of giants.

My message: let us not be down-beat nor fearful but remember the courage from those came before us. If we stand together and fight together, we'll win this battle together. Thank you.(Applause)

RON DOUGLAS:

I told you so. Well done. Well, that has set the scene, I am sure, for the rest of this Conference. But to close the session today, I call on the General Secretary, Dot Gibson.

DOT GIBSON, GENERAL SECRETARY, PC:

Follow that! It's a sign of our determination to have, and to continue to fight for, the Generations United Campaign. We in this room are old. Many of us were

there in 1945. Many of us have benefited greatly from the National Health Service and now find it being destroyed by many governments, not just this one. But, I have to say that we are now standing at this Pensioners' Parliament with a Manifesto. The importance of the Parliament and the importance of the three month campaign to draw up the five points for our Manifesto is that the National Pensioners Convention does not just stand alone. This Pensioners' Parliament is the vehicle through which we have the eyes and ears of thousands and thousands of pensioners around the country. We represent 1.5m pensioners in this country, and we sent out this questionnaire three months ago asking, "What are the five points you want in the Pensioners' Manifesto leading up to the general election?" And, we got thousands and thousands of returned forms.

The last point of the questionnaire asked "Are there any other issues you want?" We had 122 extra suggestions. There were issues like bus services, and, of course, the NHS. We campaigned with "Keep our NHS public on this issue", and things like ageism that always go with the dignity code. Also, things like hospices and war and Trident and people said, "Why after two world wars are we engaged over and over again in producing more weapons of war?" The tyranny of computers, that was another issue that people raised, as successive governments say we have to be digitally connected.

One proposal was that should have a campaign to inject MPs with a fairness drug! And somebody said, "Well, I had my first baby when the NHS didn't exist and I had to pay to give birth. I had my second baby after the NHS had started and I didn't have to pay.". She said, "It seemed like: buy one get one free!" I thought that was quite within the sort of spirit of the Pensioners' Movement because we can always see the funny side. It was the sort of spirit that takes forward the campaign we now have to have.

We now have to campaign now VERY hard in the general election and stand up and be counted. So, here we go. The top priority in the manifesto is pensions. It was interesting at a meeting last week when the Minister of Pensions Steve Webb said, "The reason why that young boy fainted at the Queen's speech was because he was so pleased and overcome by the Pensions Bill that he thought his future was going to be fine". We said to him, "The reason he fainted is because he looks forward to a future where he has to work until he drops!"

That's why those of us who were able to retire at 60/65 have to stand up constantly against the erosion of future pensioners' rights. That is why our campaign for Generations United is so important. That is why we have been very careful in our selection of the speakers

here this week trying to bring in a younger generation. Neel is a young man who is taking up the question on the right to proper food. It's a very simple right. But, it's going forward through the leadership of the likes of Neel to stand up for us and those we also defend through the National Pensioners Convention.

I think that we have had mention here today about the 'Gagging Law' and I want to say something about it. Over the last 18 months I have been attending meetings, the same meetings as the other charities; with 38 Degrees, 30 or so representatives of campaigning groups and charities who have come together to discuss this. We call it the 'Gagging Act', for it means that there is a clamping down on how people can campaign. If you are campaigning for the things that you believe, then that should be your right. Under the 'Gagging Act' you have the problem that you can be said to be supporting or opposing one or other politician and you can find yourself in difficulty.

In the National Pensioners Convention we make it quite clear that we will go on campaigning for the decisions of this Parliament and the National Pensioners Convention's biennial delegate conference whether it puts us in jeopardy or not because otherwise we will be flouting all the decisions that have been taken by previous generations; the right to stand up and be counted on the principles in which we believe. It has been mentioned here about Oxfam. They make the point that poverty is being caused by the austerity measures, and Conor Burns MP complained and reported them to the Charity Commission. This is what he said: "Most of us operate under the illusion that Oxfam's focus was on the relief of poverty and famine overseas; I can't see how using funds donated to charity to campaign politically can be in accordance with Oxfam's charitable status". They answered him: "Oxfam is resolutely a non-party political organisation but it's the duty to draw attention to the hardship suffered by the poor people we work with in the UK". We have heard about the soup kitchens and young children and people who even at work have to use the kitchens to get food for their families. Oxfam has every right to raise that issue and we stand completely beside them in their decision to do that.

I want you to watch, to follow, that in all the areas, the regions, in your groups and localities and stand up against poverty wherever it rears its ugly head. We will not be silenced. I think it is important we go away from the Pensioners' Parliament this week with this in mind, that we are going to stand up for the democratically decided Manifesto and we are going to support all who are defending the poor, the weak, the vulnerable because that is what the NPC is all about.

Last February we had the National Dignity Action Day and we campaigned for our dignity code all over the country, on the high streets, in hospitals at local council offices, and so on. We are going to do the same next year and we are going to demand it's put into legislation so everybody has to abide by that dignity code if they care wirjersm, but mainly if they are companies with contracts to carry out care work.

So, that is the thing you have to get ready for and do very well in next February. Before that, on 1 October, it's Older People's Day and we'll do the same that day: we will take a Manifesto and the Campaign for Older People but also make it clear that we are for generations united where we do not let them divide us. Young people today are faced with the most terrible situation at work with zero contract hours. It's an absolute disgrace. My grandson works in place where there are 200 zero hour contract staff and they can be sent home at a moment's notice. How on earth are they supposed to get a place to live? How do they save up for the future? This, I think, is VERY important because some of us have the rights we fought for, and our forefathers fought for, in the trade unions but these are being undermined.

The NPC has been standing four square with the teachers in their struggles and fire-fighters in relation to their pensions and with many, many others and it is important that we bring that together. So, this year's Parliament, I think, should be united in that campaign. I think the work we have done to get the Manifesto has showed how united we are. We are preparing for the Biennial Delegate Conference of the National Pensioners Convention next March and this Parliament this week will be having its influence on what is decided at that conference. So, all the discussions in these sessions that are coming up in the next two days, all of the experiences that you have, we would like to know. It is not just question and answer sessions we are having but we want to hear what your experiences are. We want to know what's happening in the areas. That is the importance of this Parliament because it is not just a top table where people have

some sort of God-given information and rights; it comes from you. This is the importance of the Parliament. I am absolutely determined that this is how it goes on this week and I think we are all determined.

So, let us get ready for those two dates: October 1st, February 1st next year and next Saturday on 21st June, the People's Assemble is marching in London. And, at the last Executive Committee Meeting of the National Pensioners Convention, it was decided the banner will be with everybody else on that March.

I hope this reflects the mood of this Meeting today because we need to stand firm with others to defeat the attacks that are being carried out against everything that many of us stood up for in 1948, when some of us were children. But be VERY aware what we were doing then was changing the world. People came back from the Second World War and, well... I am not saying we are back to the 30s with days of unemployment and no health service; but that was built. We have to defend it and make sure we are all out there fighting, every single one of us. So, no matter if we have bad knees, bad hearing, faulty eyes, whatever. If somebody needs help then we have to help them and, if we have to go to the estates and nursing homes and visit those people that have the relatives in the nursing homes, then so be it. That is what we have to be. Everybody has to be counted at this time.

So, can you get your Manifestos out? Can you have them in your hands? Can I see a show of hands for our Manifesto? (Indication). Does everybody agree with this show of hands, that this Manifesto is our decision to go out and fight not only for this but for all the issues confronting the young and old in this country today? Thank you very much indeed.

RON DOUGLAS:

Thank you very much, Dot. There are a couple of announcements to make before you slide off, but can we show our appreciation for the speakers. (Applause). Thank you very much.

THE FUTURE OF STATE PENSIONS & BENEFITS

Eddie Lynch, Hands Off Campaign and Age Sector Platform N Ireland

I spoke last year about need to work together to protect universal benefits and we went away and developed the 'Hands Off' campaign. There has been great support for it so far – NPC, CSPA, NFOP, Scottish Seniors Alliance, Welsh Senate of Older People and ourselves. Our Hands Off petition has secured almost 10,000 signatures and the total petitions in support of universal benefits since last year is around 70,000.

The 5 main political parties in N Ireland have committed to supporting the campaign, but we continue to hear the myths in the press about millionaire pensioners, pensioners getting off lightly under the austerity measures – and we need to fight back with this campaign. We need mass mobilisation across the UK and target all politicians so they are clear what older people need.

We need to contact all MPs, target all main parties as they develop their manifesto and we need a media campaign to promote the importance of the campaign both in local and national press.

We have copies of the paper petition here at the parliament – please take them away and get them signed and on 1st October we are proposing a day of action to support the campaign. Next year, after the election will be too late – the time for action is now! For 'Hands Off' to succeed we need everyone here to get 'hands on' and support this campaign!

Daniela Silcock, Pensions Policy Institute

There have been a number of recent changes to pensions policy, including both state and private pensions. Most of the changes are part of a long-term policy approach aimed at ensuring sustainability of the state pension and boosting people's income from private pensions. The driving force behind a lot of policy change has been changes in life expectancy. Life expectancy for men aged 65 has increased by 9 years since 1951. In 1951 men lived to age 77 on average, now men live to age 86 on average. In 2050, men will live to around 91 on average and what this means is that state and private pensions will need to be able to support people for longer retirements.

From 2012, companies have been staging in autoenrolment. The rules harness natural inertia by requiring employers to automatically enrol all eligible employees into pension saving – opting out is the active decision that the individual then has to make. Both employers and contribution levels are being done in stages and phased as well – 8% contributions and all eligible employees auto-enrolled by 2018. It is an ambitious policy which aims to see 9 million people saving newly or more by 2018 and so far it's been more successful than expected. For example, large employers have reported a 9% opt-out rate – but we'll have to see what happens with smaller employers. Questions for the future of the policy might therefore be around compulsion or the level of contributions.

What this means is there will be greater levels of people saving in DC pensions, private DC pension savings will play more of a role in how people support themselves for retirement and critically, the Government is hoping that more private pension saving will result in fewer pensioners on means-tested benefits in the future.

To this end, they've reformed also the state pension. From 2016 the new single-tier state pension replaces the two-tier state pension. It will be set above the level of the guarantee credit — (savings credit being abolished under new system). It will need 35 qualifying years for a full pension/ minimum 10 years and no one will lose out on past entitlements accrued under old system, but those who were contracted-out will receive a reduction, unless they also accrue 35 qualifying years under STP. It will also mean the end of contracting-out by many mainly public sector workers (who will have to pay more national insurance as a result).

Those with very low incomes, career breaks or the self-employed who would not have built up much in additional state pension entitlement are expected to be the main winners from this change, but people who would have accrued substantial entitlement under additional pension lose out as well as a few other categories.

In the future it will mean less reliance on meanstesting - halving the numbers of pensioners on pension credit by 2060 and reducing it to 5% of the total pensioner population. However, reliance on Housing Benefit and Council Tax Reduction is not likely to fall significantly. The state pension is currently triple-locked meaning it never rises by less than earnings and sometimes rises by more, but the new pensions will have to rise by a minimum of average earnings. In the future the single-tier may be uprated by average earnings resulting in a lower state pension over time - the way the state pension is uprated will be key in determining the level of support it provides – for example, PPI modelling indicates the full state pension could be 13% lower in 2060 if uprated just by earnings rather than triple-lock.

The changes to pensioner benefits, particularly for couples in which one is below state pension age – will be assessed under the working-age benefit system. Universal Credit – in the future, housing benefit will be assessed under UC rules and form part of pension credit, but pensioners are protected from the majority of other changes to working-age benefits.

The government is also raising the state pension age alongside these other changes in a series of steps, so that by 2018 - women's SPA will be 65 and by 2020 – SPA for both men and women will be 66. The government intends to raise SPA to 67 by 2028 and ensure further rises linked to changes in longevity. Extending working lives is part of the overall policy. Increases in healthy longevity mean that for some longer working is an option, though there are discrepancies across the UK in life expectancy – in Glasgow men live on average to just over 70 compared to around 85 for men living in Chelsea. Ensuring a sufficient safety net for those not able to work till older ages must therefore also be an important part of policy.

The recent Budget also announced a number of changes. Up till now people have effectively been required to purchase an annuity unless you had very large or very small pots. From 2015 people will be able to take unlimited sums taxed at marginal rate. The rationale for this policy is that there have been failures in the annuity market and that greater freedom will encourage greater savings. Though the new flexibilities throw up challenges and concerns about the annuity market. Some think the annuity market may be damaged, or that people who benefit from an annuity won't purchase one. However, the government feels confident that the flexibilities will encourage competition and development. In general there are concerns that people may spend their savings before their deaths. For example, pensioners have a great many demands on their incomes, especially at retirement, debt, mortgages, dependents and evidence from other countries shows people have difficulties managing retirement savings and that there are general underestimations of life expectancy.

In addition, people's income needs can change unpredictably during retirement as a result of changes in health, the death of a partner or needs arising from other family members. The government intends to introduce the provision of free face-to-face guidance to help pensioners navigate all these new decisions - £20 million for setting up the service. However, stakeholders are concerned about the relatively short time in which the guidance guarantee must be set up. Many have argued that existing services such as TPAS and MAS and CAB should be the providers – and it is not clear yet how this will all work. There are also concerns about maintaining impartiality, whether the guidance will be accessed by those who need it most, whether the advice will be available all through retirement and whether it will be holistic - covering health and care needs - as well as just straightforward pension matters. But all stakeholders agree that the guidance will be critical in ensuring that people are supported to make good decisions.

The government also hopes that the new flexibilities will mean that the pensions industry will be racing to develop products which cater to a new type of pensioner, one with almost unlimited choice on how to use their DC savings.

Much of the future of pensions is therefore unknown to some extent. It will depend on people's behaviour, employers' behaviour and industry, and government decisions about policy such as uprating the single-tier pension. In the future there will be more comprehensive coverage at lower income levels from the state, though perhaps less comprehensive state coverage for some at higher income levels. There will be more income from private pension saving in DC schemes, and less private sector income from DB. The meanstested safety net will be reduced somewhat by the end of savings credit / greater entitlement to state pensions and people will have more freedom to access private DC savings. In short, the new landscape will bring many changes and provide challenges to government, individuals and industry – but the hope is that all the key players are committed to ensuring that there are fewer and fewer people who are compelled to experience poverty in retirement.

Neil Duncan-Jordan, National Officer, NPC

I've been having trouble sleeping lately, but a few weeks ago I felt a lot better when the DWP (Department for Work and Pensions) announced they were going to tell future pensioners when they would die. It may sound a bit strange, but actually it links in to lots of changes that the government are making to pensions. And whether you're already retired or a future pensioner the outlook isn't that rosy.

The Pensions Bill introducing a new single-tier state pension of around £150 a week in April 2016 became law on 14 May. The chancellor announced in the recent Budget a few weeks ago that he was going to enable people to cash in their pension pots rather than be forced to buy annuities and the government have announced plans to allow people to buy back lost years of national insurance to increase their state pensions in the future.

It all sounds rather confusing, and maybe that's what enables politicians to get away with making changes to pensions – the consequences of which many people are simply unable to understand.

The single-tier state pension will be around £150 a week when it's introduced in April 2016, and will effectively be a combination of today's basic state pension with the state second pension (SERPS, Graduated Pension or S2P). Existing pensioners will be excluded from the scheme and whilst many men will currently get more than the £150 a week, millions of older women often have a state pension nowhere near that amount. The pensions minister Steve Webb has recently started saying that the pension may not even be as high as £150 – already lowering expectations as to how good this new pension will be. Not only that, but new research shows that four out of five people won't even qualify for the full amount (whatever that is), despite the government claiming that the scheme would be universal. It begs the question, how can something be portrayed as universal when only 20% of people actually receive it?

There is no doubt that this new pension will usher in a two-tier system – the existing one that today's pensioners receive and the new one for future pensioners. And it doesn't take long to realise which of the two schemes the politicians are going to be interested in. If the indexation rules are not applied fairly, the gap between the values of the old and new pensions may also start to widen over time. For example, if the triple lock of the best of 2.5%, Consumer Price Index or earnings is applied to the existing £113 basic state pension as well as to the new £150 single-tier state pension the difference over time will begin to increase; leaving existing pensioners on an increasingly inferior and inadequate pension.

The Institute for Fiscal Studies has also pointed out that anyone born after 1970 will be worse off under the new scheme than under the existing one. We know that today's state pension is nowhere near high enough, but it looks as if future pensioners are going to get an even worse deal.

There are also major flaws and anomalies in the new pension. One surrounds the number of qualifying years needed in order to get a full state pension. Before 2010, men needed 44 years of national insurance contributions and women 39 years in order to get a full state pension. In 2010 that figure dropped to 30 years for both men and women, and now under the single-tier state pension it will rise to 35 years. But the anomaly affects someone with say 30 years of contributions. Before 2010 they would not have got a full pension, but now they do and in two years' time they will lose out again. So two people with the same number of years of contributions will get different levels of state pension. That is simply not fair.

But the real evidence that the single-tier state pension is bad news is shown by the fact that by 2050, the new scheme will cost less as a percentage of GDP than the existing scheme.

The government has also realised that there is a potential PR problem by excluding existing pensioners from the scheme, so they have announced plans to allow anyone to buy back lost years of state pension. There will be a 9 month window from October 2015 when people will be able to buy back these years but there is a catch. A 65 year old will need to live at least another 17 years in order to get back more money than they paid out buying back lost years. For a 75 year old it will be 12 years. People will have to weigh up how long they think they are going to live and it's a gamble. Average life expectancy is still 79 for a man and 82 for a woman. And we all know that longevity is linked to class, income, geography and other social factors.

That's why raising the state pension age to 68 is going to have the greatest impact on the poorest in our society. We hear all these claims that everyone is living longer – but whilst we can keep people alive for longer than ever before it does not follow that they are fit enough to work. What about the growing problem of obesity amongst younger generations and of course

the lack of job opportunities. How can asking a 65 year old to work three more years help tackle youth unemployment?

I think we can see a pattern developing here – whereby people are told to pay in more for their pensions and for longer, in the hope that they may never live long enough to get back what they've contributed.

And what about the government's idea of allowing people to cash in their pension pots? The pensions minister Steve Webb said he'd be happy if someone blew all their pension on a brand new Lamborghini. But in fact he's rather exaggerated the claim. A brand new Lamborghini costs around £165,000 — considerably more than the average pension pot of about £36,000-£40,000. I think this was a deliberate ploy to try and make people think they were all sitting on a huge amount of money and that the government were going to allow them to spend it all in one go.

The government also say that people don't save under the current system because it's too complicated. I think it's more likely that people don't save because they simply don't have enough money left over at the end of the month to put aside. How can someone on a zero hour contract ever put money into a pension?

And rather than make our pension system better, this government has systematically undermined it. Almost from day one, they changed the rules surrounding indexation and removed the Retail Price Index from pensions and replaced it with the lower Consumer Price Index. One in 5 older people still live below the official poverty line and the OECD recently stated that the UK had the least adequate state pension system in the developed world after Mexico. This means that the gap between wages and the state pension in this country is almost the widest in the 37 developed nations.

The auto-enrolment of low paid workers into a savings scheme such as NEST has also been questioned recently. Small to medium sized companies have said they don't think the pensions will deliver for their workers and many firms have already secured an extension on introducing the reform.

But the reality is the single-tier state pension has been introduced with the sole aim of making the autoenrolment scheme work. Low paid workers will not put money aside if at the end of their working lives the pensions they get are still below the level of means-tested benefits. That's why under the single-tier state pension, the means-tested Pension Credit will effectively be lower. The truth is that the private pensions industry is a risk. We need a bigger vision – why are workers' contributions going into pension schemes run by private equity companies and venture capitalists who use that money to buy up companies and sack the workforce and ransack the profits? Why can't the state scheme be a vehicle for that money and invest it in schools, hospitals, housing and other public works?

That's why we need a better state pension that is fair and paid to all, set above the poverty level and properly indexed back in line with RPI and wages. In a civilised society we should ensure that everyone has financial security in retirement. Sadly, we are a long way off that ideal.

If you listen to the media they tell you that the problem with this country is that there are too many older people and they cost too much. Pensioners are being blamed and some are trying to divide the generations by saying that the problems facing younger people have been caused by their grandparents.

The clearest example of this is when it comes to universal pensioner benefits such as the bus pass and winter fuel allowance. The argument goes: why should people like Alan Sugar get a bus pass? Well this is a smokescreen. Britain has less than 50,000 pensioner millionaires out of 11m older people, and many of them don't even claim a bus pass like Alan Sugar. If you took the benefits away from these people not only would it raise very little, but you would also need a bureaucracy in order to do it. A simpler way would be to adjust the tax system.

The whole debate also ignores the massive contribution that older people make to society in three main ways: 40% still pay income tax and everyone pays indirect tax, most charities and voluntary groups rely on older people to keep them going and then there's the huge amount of unpaid caring that older people do for both their spouses and their grandchildren. The alternative to universal benefits is of course to means-test them. It's expensive and those who need them most won't come forward to make a claim.

Cutting these benefits also don't make any long term economic sense. If for example the bus pass was taken away from all pensioners, it would save £1bn a year. But soon after there would undoubtedly be a rise in loneliness and depression amongst older people, alongside increased health problems. All of this would put an additional strain on the health and social services – costing money. So what you save on the one hand you might end up spending on the other. It's therefore a false economy argument.

Now these benefits are under attack from all sides of the political divide. It's one of the issues we want to highlight at the general election as part of the Pensioners' Manifesto.

People also forget that these concessions were won by your generation – not something in the dim and distant pass. The winter fuel allowance came into force around 2002 and the national bus concession in 2008. These were won in recognition of the low state pension, as well as their other benefits and it was the NPC that was at the forefront in achieving these gains. That is why we now have a duty to defend them.

So at the general election let's make sure that all parties know they can't mess around with universal benefits. The 1 October is UN Older People's Day and we will be using that to get our message across that older people are an asset, not a burden – and that universal benefits enable them to keep on making a valu-

able contribution to our society through taxes, voluntary work and unpaid caring. And let's get the message across to younger generations as well. We will stand with you to defend your education and jobs, and we hope you will stand with us to defend bus passes and pensions.

Issues arising from the discussion

- Money could be used in the National Insurance Fund to pay for better state pensions, alongside abolishing the upper earnings limit on national insurance and reducing tax relief for higher earners on pension contributions.
- There is a lot of confusion over pensions and the proposed changes. This is not helped by vicious attacks on pensioners by the likes of disgraced MP Chris Huhne who recently wrote an article claiming that pensioners were short-sighted and selfish.
- Many low paid workers have to do two or three jobs in order to earn enough money on which to live. But many also have caring responsibilities and there are plans that in the future they will no longer be able to rely on their spouses' contributions to top up their own pensions.
- More work is needed to get the TUC on board with the state pension campaign and Labour must be pressed to improve their pension policy.
- There is currently a consultation taking place regarding survivor benefits that could have a negative impact on future retirees.
- Those who are forced to retire early from work on grounds of ill health should be entitled to draw their state pension before the state pension age.
- Individuals can opt-out of auto-enrolment, not their companies, but there maybe pressure applied to workers in some areas to opt-out as a way of saving their employers money.
- There continues to be an unfairness associated with frozen pensions of those who emigrated from the UK to a host of countries and no longer get any increase in their state pensions, despite having paid in for them.
- There needs to be some creative thinking on the issue of pensions, and serious consideration given to adopting a Citizen's Pension style idea as they do in New Zealand. It is the only way of tackling the existing problem of poverty amongst many women pensioners.
- Money is available elsewhere to fund better pensions, such as by scrapping Trident.
- The NPC should form a mutual as a way of enabling people to invest and save for their retirement.
- If France and other European countries can have a state pension age of 62, why do we have to work until 67 and 68?

DIGNITY IN CARE

Rhiannon Wilson, Cheshire West HealthWatch

I am a member of the National Pensioners Convention Health and Social Care Working Party. I am also an operational member of Healthwatch Cheshire West. Healthwatch England is the independent consumer champion for Health and Social Care in England. Working with a network of 152 local Healthwatch groups; they ensure that the voices of patients and those who use services reach the ears of the decision makers.

What do we mean by Dignity? According to the Social Care Institute for Excellence... "Dignity in care means the kind of care, in any setting, which supports and promotes, and does not undermine a person's self respect regardless of any difference. Whilst dignity might be difficult to define, what is clear is that people know when they have not been treated with dignity."

My career background has been in Health and Social Care Services and Mental Health Services since the late 1960s. I have commissioned and worked as a manager in older people's residential services, and latterly for a number of years was a manager of a front-line geriatric service for Cheshire West and Chester Services. During this time, there have been a number of government reports and reforms produced to endeavour to improve professional staff roles and community services for adults and older people.

In 2001, the Department of Health introduced the National Service Framework for Older People .It had been acknowledged that both Health and Social Care Services had not adequately addressed needs. This was to be the first ever comprehensive strategy to ensure fair, high quality integrated Health and Social Care Services for older people.

In 2005, the Department of Health issued a green paper on the future of Adult Social Care. This was entitled 'Independence, Wellbeing and Choice'. This paper again proposed a number of changes to the future organisation and delivery of Adult Social Care. It made a series of proposals that would hopefully lead to greater choice, control and personalisation, which would lead to a person centred approach to Adult and Older Persons Care Services. Also within the paper it discussed 'workforce development' and stressed the importance of a 'culture change', staff training and improved leadership.

In 2006, there was a white paper, called 'Our Health, Our Care ,Our Say'. Within the paper, it promised to improve services and give people a louder voice so that they become the drivers of service

improvement. Emphasised in this paper, was that there was no additional money promised with the new vision for services in the community.

All of these papers suggested improvement and change to adult and older people's services. Unfortunately, little appears to have changed. Whilst the objectives in these reports are visionary, they are often too ambitious to be achievable.

More recently we have had Local Authority Strategic Commissioning plans which each year offer commissioning ambitions and outcomes for the Health and Wellbeing of Adults and Older Peoples Services. Clearly, these promises do not always equate to what is happening in the community. This can be evidenced recently in the serious traumas and ill treatment of older people in both Health and Social Care Services.

Age UK produced a report in 2011 entitled Care in Crisis, which demonstrated that care and support of older people has reached breaking point, putting older people at risk and their families under intolerable strain.

Up until the 1980s and 1990s Residential Care was usually provided by Local Authorities and generally the provision of that care of older people was good. Care staff were well trained and this was documented as part of the staff members on going personal development and progression. There was good staff supervision and communication which informed all care staff of their role and function in support of the older person during their duty of care.

Residential and Nursing Homes for older people are now managed by the private and voluntary sector as a general rule. Although, there are establishments which demonstrate good practice and environments, this is by no means universal, which should be a real cause for concern for everyone. When an older person makes the decision to go into Residential or Nursing Care, or is presented through diagnosis, frailty or vulnerability with no other options, this decision is huge. It is a life changing situation at a time when they are at their most vulnerable.

This is why it has been so disappointing for those older people, families and other professionals; that the Care Quality Commission has not always been the guardians of their care as was envisaged. This was recently demonstrated again in the Panorama undercover programme in April this year, which showed the appalling care given to some residents by some staff at The Old Deanery in Essex.

As the older population increases so too does the need

for greater understanding of the specific needs of older people. Ensuring quality of life and well-being during old age is vital and includes addressing issues around ill health and frailty. There is no doubt that providing the fundamentals of care in a skilled and caring way can make a huge difference to the outcomes and quality of life for older people in our health and care environments.

The essence of a person centered care approach for older people is about getting to know and value people as individuals through effective assessment, finding out how they want to be cared for from their perspective, and providing care which ensures that respect, dignity and fairness is maintained. Most of the principles and values of caring for older people are what anyone receiving care would desire irrespective of age. The aim for nurses and care staff working with older people should be to encourage and develop a positive attitude towards older people, and embrace positive feelings of respect and an understanding that older people are important members of society, the majority of whom have the potential to participate actively and be in control of their own lives. The induction and training given to health and care staff should encourage staff to value the older people they care for and to promote opportunities for well-being and psychological growth rather than helplessness and deterioration which can often be the case.

In my present role with Healthwatch I participate in Enter and View visits of Hospitals, Residential and Nursing Homes. I am often shocked by some very poor environments, which do not demonstrate financial reinvestment into the establishment or improvement of practice. There is often a lack of staff training and no evidence of activities or events which would support person centred values.

More importantly there should be a central culture of change with respect and dignity toward all older people. This can only happen if there is universal statutory training in the private and voluntary sector establishments. And it is acknowledged for those providers, that there is a cost to training staff but this has to happen if we are to improve the lives of older people in care.

Also, as part of the present practice and culture in supporting older people in their own homes, is the idea that a15 minute visit by care staff is adequate to provide a reasonable service. Some of these services are still operated by Local Authorities but many have been privatised. How anyone thought it was possible to complete personal and physical needs, within this time frame, of an often frail and vulnerable older person without reducing this task to a purely mechanical exercise beggars belief. It is not before time that this issue and subsequent concerns were scrutinised by the Equality and Human Rights Commission. Their full

report was published August 2011.

It is with some sadness that I reflect backwards over an almost fifty year career, still hearing the same platitudes and visions expressed in green and white papers, government enquiries and reports, whilst seeing very little progress as a result of all the money spent. If some of this money was spent on care services we might see some real improvement in the provision of care for older people. In conclusion, I feel we do not need any more new, visionary reports for older people's services as they tend to be over complicated and impossible to implement.

What we need is to get back to basics and introduce a more robust inspection service, with mandatory care staff training. This at least would ensure older people's basic human rights were recognised and was high on everyone's agenda. We need to remember the older people we care for have had many life experiences and deserve to be treated with dignity and respect.

The National Pensioners Convention has produced a dignity code which upholds the rights and maintains the personal dignity of older people, within the context of ensuring health, safety and wellbeing of those who are increasingly less able to care for themselves or to properly conduct their affairs.

In my opinion this dignity code needs to be at the heart of any future legislation or used as a basis for the enforcement of current legislation, training and practice in Health and Care Services provision. We need to acknowledge that working with older people is a partnership, rather than a relationship controlled by professionals and staff.

Dennis Reed, NPC Social Care Adviser

In many other societies elders are treated with respect: respect for their wisdom, experience and mature skills. In our society unfortunately older people are too often seen as 'past it' and a burden on communities, increasingly called an ageing crisis. We do not have an ageing crisis as such; we have a social care crisis.

This social care crisis is continually defined and publicised but very little is being done about it. A few bald facts:

- The number of people of 85 and above has risen by 30% in the last decade and by 2035 will be 3.5 million: many will have complex health and social care needs
- ●£2.6 Billion has been cut off the adult social care budget by the Coalition Government so far, 5% each year is being taken out in so-called efficiency measures
- The Nuffield Foundation has calculated that 54,795 fewer individuals are now getting meals on wheels and there are 36,480 fewer individuals in day care than in

2009. So much for the emphasis on supporting people to lead a dignified life in their own homes!

- 1 million people have been forced to sell their homes in the last five years to fund residential care but this residential care leaves a lot to be desired in many cases, with continual exposés in both hospitals and care homes of abuse, neglect and lack of compassion
- The number of complaints about adult social care providers to the Local Government Ombudsman has risen by 130% in the last five years
- Thousands of elderly people are languishing in inappropriate hospital beds on general wards because of a lack of provision of domiciliary and residential support
- Most domiciliary staff are poorly trained; 70% have no qualifications at all
- 87% of local authorities are now only funding care for people with substantial or critical needs with 60% of authorities increasing the number of 15 minute flying visits to homes

Is it surprising in these circumstances that older people are often treated as objects, not human beings, and their dignity is so often ignored or compromised?

A sense of unreality about this critical state of affairs often prevails amongst the professional bodies. For example the King's Fund, who do a lot of good work, produced a report this year called "making our health and care systems fit an ageing population" in which there is virtually no recognition of the catastrophic impact of the austerity regime and how these cuts compromise some of the report's key recommendations, for example:

- Combatting social isolation (while day centres close down)
- Cold weather planning (while fuel poverty increases)
- Better post-discharge support (while domiciliary services are being slashed)

They do however make some important recommendations on measures to combat age discrimination (eg on the provision of drugs) and on improved dignity in the provision of services.

The response of Government to the social care crisis on the other hand has been pathetic:

- The Better Care Fund which is about recycling existing funding between the NHS and local government
- The Care Act 2014 which is so watered down that it is estimated that only 8% of men and 15% of women will ever benefit from the care cap of £72K

And where are the radical solutions being proposed by the political parties?

The NPC's Dignity Code seeks to highlight the importance of basic human rights in the provision of

health and social care services. Around 50 local authorities have endorsed the code so far, together with health and care providers, unions, politicians and academics. A full list of endorsements is available on the NPC stand. Excellent progress but there is much more work to be done to make the code the essential reference point in any legislation or discussion on the enforcement of standards in the social care field. Also to embed the Code in contracts for social care providers.

Read it, absorb it, campaign for it.

- We must ensure choice and options for older people even where mental capacities are impaired, including sexual choices
- There must be respect for individual needs and a continual effort to imbue a sense of purpose and stimulation in the caring environment
- There must be higher priority given to maintaining the individual's personal hygiene and appearance and respecting their privacy, particularly where intimate physical support is necessary
- Independent advice and support should be available for older people and their families if they need it

To summarize the Dignity Code in one phrase it is about treating individuals as individuals.

But the solution to the social care crisis will only come from radical structural change. The NPC is calling for a national health and care service with a single integrated budget, removing the artificial divide between medical and social care and providing a high quality and comprehensive service that is free at the point of delivery. The postcode lottery on social care would also be eliminated.

Can it be afforded; of course it can, it is a question of priorities and politics. We estimate that providing free domiciliary and residential care to all existing users, meeting currently unmet needs, improving terms and conditions for care staff and modernising residential homes would cost around £10 billion per year. What was the cost of the Iraq War to the UK? Around £10 billion, Afghanistan three or four times as much! Social care must be fully funded from the public purse, whether through income tax, national insurance, inheritance or wealth taxes. None of this nonsense about the private insurance market and new NHS charges.

Dignity in old age after a lifetime of contribution is not so much to ask for from a civilised society. We will be pressing the political parties to come up with solutions in their manifestos.

Issues arising from the discussion

• With regard to abuse of the elderly, there is a denial

of human rights in the private care sector. Nothing seems to happen to the managers/owners. Should there be corporate responsibility? Also hospitals should be challenged as staff are dismissed but others higher up get away, so legislation should cover all forms of care. There is an urgent need to deliver good quality training to care staff and managers in all establishments to set standards for better care in life and a dignified end of life.

• The principles of the dignity code need to be put into legislation both in the private and public sector.

Healthwatch, patient forums, the right of inspection to find out quality of services. There is a need to start from scratch – do something like 'secret shopper' and get it into care homes. No politician is responding to the crisis or seems prepared to create change.

- Healthwatch pre-warn establishments about inspections. In local area there is a relatives and residents forum which needs to be more nationwide; eg. outside of London. It is about quality of life, not profit for others even people with capacity don't get to vote. It is essential to carry out unannounced inspections, ask carers questions with the assurance of anonymity and also speak to residents. Inform the home of below standard care or facilities and give time to improve.
- Self-funders are still not covered by the Human Rights Act. Homes are run for managers not individuals needing care. We must also address the low pay for care staff.
- What is the implication for staff, residents and managers of having CCTV in all care homes? There is a problem with the widespread use of CCTV as it impacts hugely on abuse of dignity and privacy. Families worried about the treatment of a family member receiving care have, and will potentially continue to make decisions about filming conduct of staff involved in their care. The chair took a vote on the use of CCTV in care homes. The majority were against.

- With regards to the training of staff, the SEN role is practically based, whereas SRN role is more medically orientated with an important role of listening to older people and paying attention to care.
- Why is it that hospitals are sending patients out in the middle of the night? A gentleman died just after being dropped off at his house. The transport people sent him a bill after he died. It is not good health and safety practice sending ill and confused people home in the middle of the night. No support plans in place for changing needs when at home. Not everyone has families available or able to challenge. This shows a complete lack of awareness of patient needs, staffing and bed situation.
- Health and Social Care costs money. Private companies bring costs down by reducing staff and salaries.
- What is the alternative? The government talked a lot about the private insurance market taking up the slack in terms of money required for health care. There has been no great rush on that front. Insurance markets are extremely partial and if it is not profitable they will ignore.
- There is a lack of understanding as to what Care Quality Commission (CQC) and Healthwatch actually do. There needs to be a change to regulatory powers, safeguarding, training and staffing structures in order for organisations to improve.
- The NPC policy is for an integrated National Health and Care Service. Andy Burham: made honest comments reflecting his views and on extra funding; not sure he has the support of his party; dubious about it being in Labour manifesto; austerity measures to continue with Labour
- The problem with the Better Care Fund is that unless there is comprehensive integration at local level, there will be a conflict over medical v social care. Either social care is taken away from Local Authorities or Local Authorities take over health care.

CAMPAIGN AGAINT LONELINESS

Jack Neill-Hall, Campaign to End Loneliness

The campaign consists of a network of national, regional and local organisations and people working together through community action, good practice, research and policy to create the right conditions to reduce loneliness in later life. It was launched in 2011 and led by five partnership organisations alongside 1400 supporters.

The campaign seeks to improve the quality and quantity of services that tackle loneliness amongst older people, improve the commissioning of services that really work in combatting loneliness and ensure that the best services are replicated and an evidence

base of what works is built.

Loneliness can be defined in a number of ways. It is the unwelcome feeling of a gap between the social connections we want and the ones we have. It can be social or emotional, transient, situational or chronic. Social isolation for example is objective depending on how you measure the contacts or interactions that someone experiences.

In the UK, on average 10% of the population aged over 65 are often or always lonely. Over half (51%) of all people aged 75 and over live alone and 17% of older people are in contact with family, friends and neighbours less than once a week.

Over 5 million older people say the television is their main company and a higher percentage of women than men report feeling lonely some of the time or often.

Loneliness can be caused by a number of different factors. A range of risk factors can increase our vulnerability to loneliness. For example, from a personal point of view poor health, sensory loss, loss of mobility, less income, bereavement, retirement and things like giving up driving can all lead to loneliness. From wider society, issues such as transport, physical environment, community, housing, technology, crime and population changes can also affect how people feel and can put barriers up which prevent them from going out. Of course, loneliness can happen at any age, but risk factors increase as we get older.

Loneliness has a negative effect on health. A considerable amount of evidence shows it increases the risk of depression, affects the levels of stress, is linked to the development of dementia, makes people more likely to rate their health as poor, is an equivalent risk factor for early mortality to smoking 15 cigarettes a day and increases the risk of high blood pressure.

Loneliness and isolation can also contribute to harmful health behaviours. For example, lonely people can be uniquely vulnerable to alcohol problems, older adults who live alone and have infrequent contact with friends eat fewer vegetables each day, they are more likely to be smokers and overweight and are less likely to engage in exercise.

Loneliness is at the heart of Health and Wellbeing plans locally and the campaign is supported by Public Health England, the Department of Health and others. For example, 147 out of 152 health and wellbeing boards have published a Joint Health and Wellbeing Strategy and 76 of those 147 (51%) have acknowledged loneliness and/or isolation as a serious issue. Only 11 though have clear and measurable targets to tackle loneliness.

There are things that can be done to help. Firstly, find those at risk and then support them with groups, get them involved in designing and delivering services, and involve them in all aspects of their communities. Tackling loneliness is not all about befriending. The evidence base needs to be developed, but there is already support for interventions that are group based, centre on older people's shared interests which involve those affected.

Neel Radia, Chair, National Association of Care Catering

The NACC started around 25 years ago, with the aim of promoting the importance of good nutrition and best practice. Over the years there has been a steady

decline in the meals on wheels service, yet this is vital to those living alone, particularly in isolated rural areas.

Even at the start the service was more than just delivering food, it was also an outreach service. Today, it should be seen as an essential element of any care package. However, so far 56 local authorities have completely closed this service.

It is planned to have a National Community Meals week which will run from 10-14 November 2014. Other innovations could be pop up luncheon clubs in hospitals at weekends.

Further details of Neel's contribution are given on page three in his speech during the opening session of the NPC Pensioners' Parliament.

Issues arising from the discussion

- Interactive work between primary schools, colleges and the older generation can be very rewarding for all concerned.
- Prevention of loneliness is the aim as this leads to fewer complications in later life.
- There is a scheme of Men's Sheds taking place in the Dumfries area which tries to engage with older men.
- There will be regional summits on loneliness carried out over the next three years.
- Pre-retirement courses should focus on social retirement as well as financial retirement issues.
- Meals on wheels services were previously run by volunteers, but local councils have now made this a delivery only job, with no real contact or involvement. Private companies also provide these services as well.
- It is important to get older people's groups to look at loneliness as an important campaigning issue.
- A person can still be lonely when they have closed their door, regardless of what group or function they may have attended earlier in the day.
- Empty buildings could be used to enable people to meet together.
- Is it possible to educate younger members of families in the importance of looking out for or after older family members?
- Short-term cuts in services do not lead to longerterm savings, because the cuts create additional demands for services which end up costing more. For example, closing a day care centres can result in increased loneliness amongst older people which puts a further strain on health and social care services.

BUS PASS, BUT NO BUSES?

Peter Rayner, NPC Vice President

You have listened to me here now almost every year since 2000. On your seats is a variety of pieces of information. All of them really point towards the theme that older people are not a drag on society but an asset.

We have come a long way through all the Acts: 2000, 2003, 2006 and finally the 2008 Act which gave us nationwide bus travel. I was an adviser to the Transport Select Committee through the passage of those Acts.

Today I am not going to take us back through all those bits of legislation, but briefly set out the position as far as NPC is concerned. We need to convince this government, and indeed this generation behind us, our children and our children's children that if things like the bus pass give us inclusion in society, not only do we benefit, but society itself also benefits.

For years now I have tried to explain that the law entitles people to free travel after 09.30am and on the bus. Nevertheless, people have stood up and said "we get local trains" or "we can travel before 09.30am."

The warnings we gave that faced with a hostile national government the service would go back to the basic minimum were largely dismissed as scare mongering.

The warnings we gave that the pass was safe but the buses themselves were at risk was also not taken seriously.

But now we are at the point where across the nation, bus services are being withdrawn. We have an expert speaker to follow me who will tell us about it. But our point now is we need to campaign locally because it is locally that the changes will be made. We need to campaign that we need these services, that we are entitled to these services after a lifetime or working and making a contribution to society.

But we don't claim these rights simply because we are dear old souls, we need the services so that we can continue to contribute the £40billion a year to the economy. Unless we can have access to the shops we cannot spend our money, unless we can get about we cannot look after grandchildren, or volunteer for the many charities and groups that older people help run.

So local protest which has been effective in South Yorkshire and West Midlands is the way forward. We will deal with national government. We will make suggestions to them as with the Bus Pass Railcard interchangeability which we put forward now over three years ago. So let us listen, question, lobby nationally and campaign locally.

John Birtwistle, Projects Director, FirstGroup

First Group is the largest public transport operator in

the UK, with 6500 buses in England, Scotland, Wales and N Ireland. We carry 2.3millon passengers a day, and we have five train operating companies, trams in Croydon as well as Greyhound coaches, yellow school buses and 120,000 employees worldwide.

How does concessionary travel affect operators like FirstGroup? There are separate schemes for England, Scotland and Wales. In Scotland and Wales the level of reimbursement is set by the governments, but in England each transport authority/county council sets its own rate of reimbursement. The nationwide scheme started in April 2008 and the principle behind the legislation is that operators should be no better and no worse off than in the absence of the scheme. Operators are therefore legally obliged to carry pass holders free of charge, after 9.30am in England.

However, there are over 90 concessionary travel authorities, each with its own reimbursement scheme. The Department for Transport has set out guidance but this is not necessarily adopted by all authorities. There is no doubt that travel is generated by the concessionary scheme – people use buses that they wouldn't otherwise have taken simply because of the scheme. There is also an assumption that extra services to cope with the concessionary scheme brings in extra fare payers which are then deducted from the amount operators get reimbursed.

Over the years, successive guidance from the government has forced down the reimbursement rates. It 2008 it was roughly 70%, now it is typically 45%. Whilst the government funds local authorities to pay for the scheme, the money is not ring fenced and can therefore be spent elsewhere. In 2013/14 the estimated payment for concessionary travel was £900m. However, not all local authorities can afford to pay. In addition, if there are to be additions to the legal minimum, such as travel before 9.30am, then the local authority will need to find additional funding. The reality is that many local authorities can no longer afford to do this.

Some local authorities will agree reimbursement rates with operators over several years; giving stability to both sides in the event of major changes. It also helps local authorities where tendered service budgets are being cut and helps operators with investment decisions. But we are clear: such arrangements must not over-compensate the operator at the expense of the local authority.

How much does it cost to run a bus? Each bus needs to earn over £30 an hour for it to pay for itself. They cost around £120,000 a year to run. 60% of our costs are staff related and 15% are fuel. These have increased dramatically over the last five years.

Outside of London, bus services are deregulated. 80% of buses are operated commercially without any subsidy whatsoever and the remaining services are supported by local authorities. However, there is also recognition that £1 spent on a bus pass, may save the local authority £2 on social care. For millions of people the concessionary travel scheme is a lifeline and helps maintain mobility, especially for those who can no longer drive.

Bus services are also becoming more accessible for disabled people and by 2017 all our buses will comply with the Disability Discrimination Act. However, some operators have been struggling to pay for these adaptions and upgrades to their vehicles.

Bus operators are also prevented by law from cross subsidising services, so an operator cannot run a loss making service for the good of the community. This is particularly a problem in rural areas where there may be no bus at all. Local authority cuts also mean that when a service is no longer commercially viable it may not be replaced by a subsidised one.

New technology can help improve services. Bus passes can contain a chip and be Smartcards. This should speed up the time it takes to board, reduce fraud and help with reimbursement because it will provide more accurate data as to usage. The cards are owned and issued by local authorities and operators are not allowed to take them away from passengers.

So the problems we face are as follows:

The bus pass is no use to some pensioners as they have no buses or buses at the wrong times. In many rural areas, there are serious problems with a lack of bus services on certain routes, poor services with buses not running when needed, under resourcing from Local Authorities who in turn are under resourced. Transport operators going and in danger of going out of business.

Some local authorities receive insufficient government funding to run the scheme and in any event, the money is not ring fenced.

The government model keeps reducing the amount of reimbursement for bus operators, despite rising costs.

These problems could be addressed by:

Reducing the usage times of the concessionary bus pass by way of greater time restrictions, a fixed value being pre-loaded onto the pass for annual travel, means testing to reduce the number of pass holders, making it possible to charge a nominal sum or asking those who can afford to pay to do so.

<u>Councillor Peter Box, Local Government</u> Association

It has not been possible to get a copy of this speech for publication

Issues arising from the discussion

- There was a growing support from the public to take the railways back into public ownership and keep bus services locally controlled.
- There have been examples of the bus pass not being accepted after 11pm. This is not within the law and should be challenged.
- Bus companies are not able to subsidise non-profitable routes. It's for the local authority to decide where non profitable routes need to be run and subsidise them if possible.
- In Scotland concessionary travel works well with no 9.30am restriction.
- In certain areas, people continue to use their cars because there are no buses available.
- Free public transport services should be available for older and younger people.
- Local Authorities have fought against cuts but are responsible for producing a balanced budget. The original privatisations produced a huge profit for private investors.
- If the bus company is reimbursed on a per journey basis, the length of the journey is irrelevant. This could mean that operators are being over-reimbursed which is against the law. Actual journeys should be measured by scanning the pass when you get on and off the bus
- 'Park and Ride' routes are designated as tourist routes, and therefore you have to pay to use them.
- Profits for shareholders of bus companies are not our priority. In the case of fighting the cuts we would like to see a bit more backbone in our councillors.
- Far too many buses are breaking down, despite an obligation on bus operators to meet certain maintenance standards.
- The siting of bus stations is under local authority control, not the bus operator. Therefore some bus stations may be miles away from town centres.
- NPC should campaign to extend free travel to include trains and support the cross-subsidisation of bus services by changing the law.

WHERE NEXT FOR OUR NHS?

Dr Tim Ballard, Royal College of GPs

Many thanks for your kind invite to be with you here this morning. I have a real passion for General Practice and at the heart of this is my desire to practice and promote true patient centred medicine.

The NHS and access to high quality General Practice is important for all of us but as people become older this becomes ever more important. The provision of continuity of care is also important and never more so than for older people and those with frailty. Not only is continuity of care nice to have it has been shown to lead to fewer unnecessary trips to hospital, both to go to outpatients but more importantly for unplanned emergency admissions. Hospitals are important when you really need them but being there if you don't need to be is far from ideal.

General Practice is the Jewel in the Crown of the NHS. Today I want to explain to you a little bit about what is happening to it and how you can help to protect it and help to make the service given to you by your GPs even better.

Across the whole of the UK there is an on going shift in the profile of our population. Thankfully, people are no longer dying in any where near the same numbers in middle age from heart disease, stroke or cancer as they were even compared to when I was at medical school. The consequence of this is of course that people are living much longer and as they do they collect illnesses along the way.

Only 3 in a hundred people who have heart failure (I must say now that I think this is the worst name we ever use in medicine) have nothing else wrong with them. Three quarters of people living with a heart that is struggling to pump efficiently have three other things wrong with them as well such as diabetes, Chronic bronchitis and emphysema or kidney failure.

The fact that many more of us are living into old age is something to be celebrated. However, it is of course at the heart of the increase in workload in General Practice.

The numbers of times a patient needs to see a doctor in a year has increased dramatically over the last 20 years. Not surprising: as well as this the number of things that older people need to talk about to their doctor has increased – this too is not surprising when there is more wrong. Apart from just talking about the numbers of times older people need to see their GP it is also important to think about how much time there is for them when they get there.

When I first started out in my life as a doctor the

average consultation length was seven and a half minutes. In the early 1990s this increased to 10 minutes and in most practices this is still the norm. This is simply not long enough to do justice to complexity of your needs.

Over the last couple of decades we have seen many conditions that were once managed in hospital now managed in General Practice. We need to make longer consultations a reality and we need your help to do it. We need to be able to deliver better continuity of care to the people who need it most - many of you will be in this room now.

You will have heard in the media that there is a desire to deliver more care closer to people's homes. I think this is the right thing to do. We need to be, and can be, less reliant on big expensive hospitals.

You may think that with the combination of the changes in society and the desire to increase the care delivered closer to peoples home that the smart thing to do would be to invest in General Practice and wider primary care, but the truth is quite the opposite. In all four of our countries that make up the UK spending on General Practice has fallen by almost 25% in real terms since 2005-6. This is in the face of a fall in the percentage share of GDP being invested in health as well.

In the media we have seen worrying stories recently of practices facing closure. Currently there is a mechanism called the minimum practice income guarantee. This protects practices with unusual patient populations. In particular small rural practices, university practices and practices in very deprived areas. This funding protection is being removed and practices affected are becoming unviable. I spoke at a rally recently in Tower Hamlets in east London where hundreds of people took to the streets to voice their concerns. The impact of this small change is so dramatic because the base line funding has been cut to the bone already.

There is a drive from the whole of society to be more patient centred and put each person in control at the heart of the decision making process about their health and wider care. Personalised care planning which brings together the best modern evidence based health care with the hopes, fears and expectations of individual patients needs to be at the heart of what we do. Once again though, this takes time, time that General Practice currently just doesn't have.

To deliver all of this we really need an appropriately trained workforce. Over the last 10 years though there

has been an increase in training for hospital specialties and a decrease in the numbers we need to deliver the services for you in General Practice. You can easily see why General Practice is under such pressure.

However, it does hold the key especially when it comes to delivering bespoke care to people with complex interacting long-term conditions. Barbara Starfield, a doyenne of primary care research showed that increasing the GP to patient ratio improved the mortality index. In short, the more GPs you have the fewer people die earlier. Whereas other evidence suggests that increasing the number of specialists can actually have the opposite effect.

But of course it is much more than simply living longer. Quality of life is really important. High quality care needs to be more than the sum of the guidelines that inform the management heart disease, diabetes and lung disease, to name but a few. We are increasingly aware of the tension that there is between delivering the very best care without ending up with people in their 80s and 90s on 16 different pills and potions all with their side effects and interactions. Are there high quality guidelines to help us with all of the different permutations of illnesses and guidelines? There are not. There is however General Practice.

Across the whole of the UK over a million people a day have patient contact in primary care. 90% of patient contacts each day in the NHS occur in General Practice, but currently this only receives 8.39% of the budget. The payment to look after a patient for a year in General Practice is less than a single trip to out patients. It is around the same price that it costs to insure a hamster for vet pet insurance.

The Royal College of GPs has mounted a campaign called Put Patients First – Back General Practice. The campaign asks for a restoration of funding back to 11%. In the longer term it needs to be higher still. This would really make an enormous difference and facilitate the delivery of high quality sustainable care in the community especially for older people who need it most.

Let me be clear. This is not about increasing the pay of GPs - it is about investing in out of hospital care delivered close to or in people's own homes. Our campaign is really important. I would urge you to visit the RCGP website and look at the Put Patients First area for more information. High quality General Practice has an enormous amount to offer. I think that end of life care brings us particular challenges. I would like to tell you a couple of stories.

Barry Sheppard is one of my patients. He is 68 and has a wife and two daughters. Before you get the urge to ring the GMC, I have his full and very specific consent for what I am about to say. Barry is dying. Barry

had significant occupational exposure to asbestos while at work and throughout most of his life was a smoker. It was understandable then that he developed lung cancer. Like many lung cancers, even though it was picked up very early it was incurable.

Barry was referred in a timely fashion, the day the chest X Ray came back, under the two week wait system. First he saw a respiratory physician, had a CT scan and then a bronchoscopy which confirmed the terminal nature of his problem. Next he saw an oncologist who told him that it was in his best interest for him to have an aggressive regime of palliative radiotherapy and chemotherapy to increase his life expectancy by up to three months.

Barry came in to see us at our surgery and asked "what do you think I should do?" His wife wanted whatever was best for Barry, his children and the oncologist were all; for different reasons, wanting Barry to have the treatment.

The oncologist wanted him to have the treatment because the evidence was clear that it would be a success and he would probably live another 3 months. His daughters wanted Barry to live as long as possible, from their perspective they viewed every day with him as precious. At the time, Barry felt absolutely fine and there were things he really wanted to do. Should he have the treatment and feel dreadful for many weeks?

The support given to him in General Practice empowered him not only to decline the offer of treatment but also not return for the follow up hospital appointments that were put in place to monitor his progress. General Practice also gave Barry the support to be able to explain why he had decided not to have the aggressive life extending treatment to his children. "My doctor and I have decided."

The evidence is that most people would rather die at home than in hospital, but that many don't manage it.

I would like to tell you another story. This is about a lady who had multiple problems. Her name was May; known to many as Maisy-Daisy. She was born in Manchester in 1929. She moved to Blackpool when she was 6. She married a guy she met in the Tower Ballroom down the road here in Blackpool. Maisy Daisy did really well until her husband died from a heart attack in 1983. Shortly after this she developed rheumatoid arthritis. A reaction to a major life stress perhaps? She went to a hospital clinic twice a year to manage her problem – what we now call episodic care.

She had problems with hypertension, dementia, rampant Rheumatoid arthritis and osteoporosis. In the last two decades of her life she fractured her wrist, pelvis and a hip. She'd fractured one shoulder and had a shoulder replacement on the other side. To manage at home she had six sets of carers coming in. She

couldn't safely get out of the chair without their help.

One day there was a power cut. The stair lift began to bleep. She thought to herself, "just this once I will get out of the chair and close the door to quieten the bleeping". Predictably, perhaps, in the dark she fell and fractured multiple ribs and sustained a haemo-pneumothorax. She hated hospital and whenever she was admitted would immediately ask "when can I go home?" Many would have been in a care home with her level of disability, but she was as stubborn as an old goat.

In hospital the specialists talked about rehabilitation but it became obvious that she wouldn't survive. The specialists still talked about success meaning rehabilitation when it was obvious that she was dying but without a cancer diagnosis. As GPs we have always thought about the common humanity of what it means to be ill. Our core ability in General Practice is to use our skills to deliver bespoke approaches for individuals to help and guide them through it.

At our College we have just launched an inquiry into person centred care and what it means for us faced with the extreme frailty and multiple illnesses of individual patients. I suspect that this inquiry will help to frame a lot of decision making both in the UK and internationally.

General Practice and the RCGP in particular, has a central role to play in navigating and leading the profession on what high quality care looks and feels like as we move further into the 21St century.

Any way: So what happened to Maisy Daisy? Eventually the decision was made that she was not going to survive after all and with the help and support from her GP she could go home. She lived for another 3 days there. Her friends called her Maisy-Daisy, but for me she was my mum.

You may think it's a sad story but the smile I saw when she came home, was a reflection of the great job that General Practice did when the chips were down and I was on the other side of the fence. I believe that high quality General Practice holds many of the solutions to help us manage the frail and vulnerable living with multiple incurable conditions.

In your area you may see or read about your practice forming a federation or becoming part of a network. There is no need for alarm about this. By working more closely together practices can plan their services better and deliver extended co-ordinated services whilst preserving the characteristics and feel of individual practices.

Our campaign is beginning to produce traction and we are starting to hear that the decision makers understand the problem. By restoring funding levels back to their 2005-6 levels we will have the ability to increase

the numbers of GPs and in doing so achieve several things.

Ten-minute appointments need to be a thing of the past. While they might just be enough for a younger person presenting with a simple problem older people with complex needs deserve much more time. What we also know is that patients, especially older patients like to have continuity of care, to develop a relationship with a doctor they trust and to see them most of the time. Not only do people prefer this; as I said earlier we know that in delivering this the number of people ending up with emergency hospital admissions is lower.

People are currently needing to wait far too long for appointments. Patients don't like this but neither do GPs. We would much rather have increased capacity, with fewer numbers of patients per GP and achieve more timely appointments, appointments that are long enough to address the complex problems that age often brings.

Part of the change that we need involves innovative approaches to commissioning led by GPs. Since the beginning of the NHS medicine has responded to people being ill. Doing this seems to take up all of our time. With all of the pressures that I have spoken about and the pressures of modern living like increasing obesity and diabetes, GPs and other medical colleagues never have the time to address the things that lead to the problems in the first place. A good friend of mine David Pencheon at the NHS sustainable unit summed it up as us all being so busy pulling drowning people out of the river that we haven't ever got the time to walk around the bend to work out who is pushing them in!

One of the greatest challenges and pressures felt by GPs in their daily life is the inability to effectively deal with home circumstances that might be contributing to health problems. As a College we have long said that health inequalities are important and we need to do something about them.

We have struggled to come to terms with the implications for General Practice raised by the Marmot Report. This report focussed on the things in society that adversely contribute to poor health.

Since starting as Vice Chair I've been involved in looking at how General Practice might have a part to play in helping to tackle Fuel Poverty at the individual level. We are working on a package of responses including an on line learning module looking at the recent IPCC report, excess winter deaths and Fuel Poverty. The energy companies have a statutory obligation to parliament to identify those affected and make them an offer. Many of our patients affected with multiple illnesses are also in Fuel Poverty.

At the Royal College of GPs we have just launched

an inquiry into patient centred care in the 21st century. We are trying to describe how GPs need to respond to the challenges we are presented with by making sure that the way that health problems, especially in the frail and elderly are approached taking into account the importance to balance the evidence of what works, what doesn't, the effects of over treatment all approached with caring and common humanity putting the desires and wishes of individuals at the heart of the process.

I think you get the idea. I am passionate about General Practice and its ability to deliver high quality patient centred care. Despite all of the pressures and the funding cuts I still think it's the best job in the world. Investing in General Practice makes sense for a host of reasons. Please join us at the College in our call for improved sustainable long term funding for General Practice and primary care. Please sign our petition. It cannot be overestimated how powerful a voice you have. Please lend your voice to ours and help to put General Practice back on track so that we can deliver the care you deserve.

<u>Dr Louise Irvine, Save Lewisham Hospital</u> <u>Campaign</u>

I am going to look at the effects of the Health and Social Care Act, the challenges facing the NHS and what can be done to defend it.

The Health and Social Care Act in England meant a radical reorganisation, denationalisation and the duty of the Secretary of State to provide a health service has been removed. Clinical Commissioning Groups are the biggest chapter in privatisation. Section 75 regulations of the 2013 legislation reinforced this, and Clinical Commissioning Groups are afraid not to tender in case they are sued. We thought we had won with the save Lewisham Hospital campaign, but it is still under threat. There is a democratic deficit — nobody voted for this, there was no mandate for this top down reorganisation.

They are privatising the delivery of healthcare. They say they are not privatising it because it is free, but the World Health Organisation defines it as turning it over to the private sector. Oliver Letwin outlined the whole thing in his book "Privatising the World". As they are fragmenting the service, cooperation will be more difficult, and it will be more costly to run the service because of the costs relating to tendering, litigation and so on. Contracts worth £11 billion are out to tender and 70% of tenders go to the private sector. In Staffordshire, £1 billion worth of cancer and end of life care is being put out for contract. NHS costs are already lean, there is not much to make a profit from, so private providers then cut staff, and downgrade the skill mix. This is behind many of the scandals, sometimes it is just bad people, but often it is not.

The £11 billion pounds worth of contracts with 70% to the private sector is just the start – watch this space! Next up is the end of "free at the point of use" care. There is now discussion around introducing charges and health insurance. Health care is being joined with social care, and for social care there are charges and means testing. The talk is of £10 to see your GP (and rising), and the elderly being charged for hospital stays. Personal budgets may be dodgy. What if you overspend your budget? Will we be talking insurance top ups? Privatisation is increasing exponentially. What will happen if the Conservatives are re-elected?

The challenge is not just privatisation. The Kings Fund report on NHS England funding shows it to be on the brink of financial crisis. This is because of PFI and a £3 billion reorganisation. Also the amount spent on the NHS has gone from 8% of GDP in 2009 to a projected 6% in GDP in 2012. France and Germany spend 12% of GDP and the US spends 17%. England spends less than the 15 other developed countries. Hospitals have had a 25% cut in their budgets, causing problems in A&E, beds, waiting times, delays in maternity, mental health, elderly care, and cuts to community services.

In General Practice there is a lot of negative press. They are softening up the public for reorganisation, including privatisation, closures and charges. It is not just rural practices. Five or six practices in Tower Hamlets, London are facing closure, and there are ninety eight across England. £1 billion has been removed from the GP budget, and 10,000 new GPs are needed. Community care is a fallacy. There is no money for it, and no evidence it will improve care. Nobody knows if it will decrease hospital admissions or not, but they are closing the wards anyway.

What can we do to defend the NHS? Bevan founded the NHS saying "The NHS will last as long as there folk left with the faith to fight for it". We thought it would be there forever, and most people are not even aware of the threats. We have to resist. We have to raise our voices and become activists. Older people are the most aware. At the Leicester meeting over 95% of those who attended were over 60. We have to fight local closures, we have to fight cuts and we have to fight privatisation. We should support health staff fighting cuts to wages. We can join 38Degrees, the NHS Support Federation, UK Uncut, the Jarrow March, and Unite for example. We can be the eyes, ears and voice of the people in Healthwatch, local Health and Wellbeing Boards, Clinical Commissioning Groups, the Council, Trusts, and issue Freedom of Information requests. We can also issue legal challenges - for example, Bristol challenged its CCG on a service up for tender, on the grounds of lack of consultation. We can also expose poor care.

Politically we can make demands of politicians and make the NHS an election issue, and make all the parties aware of this. The National Health action Party has a twelve point plan for the NHS. We can demand that our politicians and candidates declare their support for these points. David Owen and Allyson Pollock have a bill going through the Houses of Parliament on the NHS for reinstatement of the duty of the Secretary of State. Ask your MPs to support this, and any legislation to repeal the privatisation in the Health and Social Care Act.

Cuts to the NHS and social care must be reversed, we must end PFI, with its extortionate debts, and we must demand exemption of the NHS from the Transatlantic Trade and Investment Partnership.

Issues arising from the discussion

- There is no funding so care in the community is a big disaster. There is no accountability, so we must stand and fight, or we stand every chance of losing the NHS. Join the Jarrow March, which is now getting support from other bodies.
- There is a lack of faith in the formal Healthwatch, it is a closed shop and relies on Local Authority funding, and its campaigning and challenging is limited.
- Nursing Homes are private, and the motivation is not there to get people back into the community as they don't want spare rooms.
- Two thirds of Clinical Commissioning members are GPs with private interests.
- In Mental Health there is not enough money. There is more demand, but no more money.
- Services are being privatised by global organisations, and wages reduced by thirty three percent. There is a loss of experience and education.

- Whole companies are preparing to take over the NHS, such as Virgin who are even changing their logos to make them look more like the NHS one. But private health insurance companies won't cover all aspects of health.
- We are considering withholding our votes. We are in a vulnerable position as we can't strike. If everyone withheld their votes, then people wouldn't get elected. However, withholding the vote will let the enemies of the NHS back in. We must lobby and get along to meetings to find out what they are doing. Labour are not the answer, they are cutting our services locally.
- The next election is crucial and will decide if the NHS survives. UKIP will introduce charges to see GPs. The Health and Social Care Act provided for privatisation, we need a majority Labour Government and an exemption from TTIP for the NHS.
- According to the Transatlantic Trade and Investment Partnership any company in the world can contract, and if they don't get what they want, they can sue.
- In social care you can pay for 1 hour of service and get 20 minutes. You can be paying £60 an hour and still get bad service.
- Nursing Homes: be very aware that using them could lead into a slide into charges for dementia, and health budget cuts could make things worse.
- PFI: we should bring PFI (Private Finance Initiatives) back to the Government to take the burden off individual Trusts. Then we should renegotiate the debt down to a fair rate of return. The model of local authorities buying out debt is not one we think can be generally adopted as most PFIs are too high.
- There is no doubt that austerity measures are pushing people into poor health.

INTRODUCTION TO PARLIAMENTARY CAMPAIGNING

Gary Hart, Parliamentary Outreach Programme

The Parliamentary Outreach Service is provided by the House of Commons and its aim is to increase the knowledge and engagement of the public with the work and processes of Parliament. The service is politically neutral and should not be seen as an alternative to MPs. The aim of this session is to explain exactly what Parliament does and why that is important and outline how you can engage with Parliament as part of your campaigning.

The key roles of Parliament are to scrutinise the work of the government and to pass legislation. In addition it enables taxation to be raised, represents the

public and raises key issues of concern. The House of Commons is the democratically elected chamber of Parliament made up of 650 MPs. These are elected every five years on a fixed term. The second chamber, also known as the revising House is the House of Lords. No party or combination of parties has an overall majority in the House of Lords. There are also many cross-benchers in the Lords, who are independent of any political party. There are currently 834 members, of whom: 716 are Life Peers, 92 Hereditary Peers and 26 are Church of England Bishops.

The Government is chosen by the Prime Minister from the members of his or her political party (or parties if there is a coalition). The Government runs

departments and is accountable for the way they are run to Parliament. Government is made up of a mixture of both MPs and Peers.

There are many Government departments covering every aspect of our lives: Foreign and Commonwealth Office, Treasury, Home Office, Ministry of Defence, Business Innovation and Skills, Work and Pensions, Justice, Education, Communities and Local Government, Health, Environment Food and Rural Affairs, International Development, Scotland Office, Energy and Climate Change, Transport, Culture Media and Sport, Northern Ireland Office, Wales Office and Cabinet Office.

There are a number of ways in which campaigners can get involved in Parliament. These include through:

- PArliamentary Questions (written or oral) put forward by an MP to a particular minister as a way of getting useful information
- Debates on specific issues or legislation
- Early Day Motions which ask MPs to add their support to a particular topic
- Petitions submitted by the public and presented by MPs to the House of Commons
- Select Committees with a specific role to scrutinise the workings of Government departments
- Public Bill Committees which scrutinise proposed legislation in detail
- All Party Parliamentary Groups which discuss specific areas of concern

One of the first ways of influencing Parliament is through contact with your local MP. They can be contacted via the Parliament website www.parliament.uk or you can find them by calling the House of Commons Information Office on 0207-219-4272. Local town halls or libraries will also have their details and there are also specific websites such as www.theyworkforyou.com which provide useful information.

Question Time takes place for an hour on Mondays to Thursdays and each Government department has a set day when it has to answer. Commons oral questions are tabled by MPs at least three days in advance of the Question Time. The questions are then printed in the Commons Questions Book. The order in which the questions are asked is determined randomly by a computer. After the initial question has been asked and answered, the MP is then able to ask a supplementary question that has not been sent in in advance.

There are a number of different types of debates that take place in the Commons. Adjournment debates last for half an hour and members are selected by a ballot of their peers. On Thursdays the member is chosen by the Speaker of the House and a minister from the relevant government department must be present

in order to answer questions and take part in the debate. Westminster Hall debates take place on Tuesdays and Wednesdays and consist of two one and a half hour debates and three half hour debates. In the House of Lords short debates can last up to 90 minutes and again a minister must be present.

MPs can also raise issues through Early Day Motions (EDMs). These are published statements which allow MPS to show their opinion on a specific subject. A statement can be used to draw attention to a range of issues, to world, domestic or constituency matters, a call for action, to commemorate, congratulate or condemn. Petitions can also be presented by MPs and usually call on the Government to act on a specific issue (local or national). There are also Epetitions, which any member of the public can now create via http://eptitions.direct.gov.uk/. Those which receive over 100,000 signatures can be given time in the Commons to be debated.

- Select Committees are used to examine three aspects of Government departments:
- Spending
- Policies
- Administration

There is one committee for each Government department, plus some cross-cutting committees such as the Public Accounts Committee that can look at any department. These committees are a key way in which Parliament holds Government to account. They also enable Parliament to examine key issues in great detail – more than debates or questions could do. The committees are also able to take evidence from experts and this enables them to have an independent overview of Government activity.

When a Select Committee conducts an Inquiry there are a number of stages:

- Inquiry announced
- Call for evidence
- Written evidence deadline
- Oral evidence sessions
- Report preparation
- Publication of report
- Government response to the report

If you wish to get involved in the work of a Select Committee you can keep an eye on their website for announcements. Engage with the committee staff and ask to be put on the email list to receive press notices. Sometimes there are also public meetings around the country and updates on Facebook and Twitter. You can submit written evidence and if the committee feels it would be worthwhile, you may also be invited to give

evidence in person as well. Anyone can attend a public evidence session and these are also shown online at www.parliament.uk. When submitting written evidence it has to follow certain guidelines, but ultimately it is important to make positive recommendations to Government, rather than simply to criticise.

The House of Lords also has Select Committees. These examine issues rather than the work of Government departments. There are five main Lords Select Committees:

- European Union
- Science and Technology
- Communications
- Constitution
- Economic Affairs

Public Bill Committees are important when legislation is being proposed. At a certain stage of a Bill's passage through Parliament it has to go to a Public Bill Committee. This will examine the Bill clause by clause and suggest amendments. Some committees take written and oral evidence from experts outside of Parliament and the progress of a Bill can be tracked via www.parliament.uk.

All Party Parliamentary Groups are an informal cross-party association on many different subjects, from Italy to football, and cider to ovarian cancer. These groups are a useful way to identify MPs and Lords with an interest in a certain issue.

• Further information from Parliament's Outreach Service is available via 0207-219-1650 or at <u>parliamentaryoutreach@parliament.uk</u>.

CAN WE AFFORD AN AGEING POPULATION?

Stephen Burke, Director, United for All Ages

Can we afford an ageing population? Can I start by saying what a ridiculous question! Absolutely ridiculous! Having said that, it's a question that seems to dominate much media and policy debate these days. And it reflects the ageism that still dominates much of our society, ageism that allows and encourages attacks on older people as a diversion from the real problems and causes of austerity.

We have to tackle the myths about old or young people never having it so good or so bad at each other's expense – it's not about war between generations, but the distribution of income and wealth within all generations. What we need is a progressive contract between the generations. Going back to the question Can we afford an ageing population?, the answer is in true Obama style yes of course we can. Can I begin by breaking down the question into two parts:

First, what can we afford?

Despite all the doom and gloom about austerity, Britain is still one of the richest countries in the world, BUT inequality is growing. Just look at the Sunday Times rich list to see the growth of billionaires in Britain

Politics is all about priorities – we can afford what we want to afford, and we can make choices about how we spend public money

We currently afford to pay massive bills for trident and housing benefit, but we could afford to pay for better health and education, pensions and care – the choice is ours

We could afford even more if we had fairer and more effective taxation

Second, our ageing population:

It's great that we are living longer; but it's not just about adding years to life but life to years; a meaningful later life; to do what in those last 30 years?

Recognise and acknowledge the huge contributions of older people – across the life course, from the world wars to 2014 and beyond. Grandparents Plus – child-care

Not just ageing population but a growing population – thanks to immigration and the new baby boom – both are vital to sustaining our society and provide less reason to panic

Differentiate between an active third age/and a more dependent fourth age – there are times in life when we will all need some help and support, whether we are very young or very old or sometimes throughout life. Mutual dependency, reciprocity - the social contract between generations.

Four general approaches that would help us afford better support for an ageing population:

Not only should we recognise the contribution older people have made and do make, we can do more to support older people to make a bigger contribution

Take a life course approach - work/childcare; prevention, plan ahead/prepare/keep fit and healthy; employers; sharing technology

Promote mutual action by younger/older people eg tackling loneliness; centres for all ages in local communities; support for family/friends/carers of people of all ages – childcare/eldercare

Tackle ageism - health and care, media, educa-

tion/schools, young people; promote advocacy, debate and communication between generations to tackle myths and stereotypes and promote mutual understanding

Five ways to create a Britain for all ages – win wins for all generations, young and older people alike – the basis for a progressive contract between the generations. United for All Ages will publish a report later this year:

- Housing for all ages housing crisis, homeshare, downsizing, house building – more options for older people would help free up housing for younger people
- Care for all ages national health and care service, childcare to eldercare at both ends of the age spectrum when we need care
- Work for all ages work longer/better, help younger people into and progress in work
- Tax for all ages —progressive taxation best way to address inequality including taxing wealthier older people, cutting pension tax relief, taxing wealth/property as well as income, tackle tax avoidance

Charities for all ages – siloed by age. Commission on the Voluntary Sector and Ageing is looking at new approaches to civic society – prepare for an ageing society and think all ages. Partnerships/alliances between NPC and other organisations representing different age groups with mutual concerns and interests.

Older people have much more they could contribute if they were encouraged; young people could do much more if they were given a chance; multi-generational families would do much more if they had time and resources.

We are all interdependent. Intergenerational fairness should underpin smarter taxes and smarter spending. We need to invest in the future: prevention and early intervention, supporting the next generation, ensuring our legacy for the Britain we leave to our children and grandchildren. Rather than dividing generations, politicians should be seeking to develop a progressive contract that unites all ages. And yes we can afford it – if we want to!

<u>David McCullough, Chief Executive, Royal</u> <u>Voluntary Services</u>

It has not been possible to get a copy of this speech for publication.

Jay McKenna, North West TUC Campaigns Officer

It's important that young people and older people have their own forums to discuss the issues they face.

That we have representation that puts our interests at its heart and gives us voice. As important is for us to come together and have conversations like this - about how issues affect us all, bringing both the young and old together.

We want to change the question though, from can we afford an ageing population to how. If we say can, it becomes a yes or no answer. If the answer is no, are we saying that all old people will be banned? That we lock you in this room and don't let you out? Or that we tell grandchildren that their grandparents reach the age of 65 or 67 or 68 and have just disappeared, never to be seen again?

It angers me to see this become an age debate. A pick on them, not me. Janet Street Porter does it, wanting young people to be targeted for benefit changes but not benefits for older generations. Miliband is doing it now with proposed changes to benefits for under 21's. Why should anyone lose out over another group? They want us to have this debate on their terms, their narrative. We shouldn't and should have it on our own.

Instead, asking how instead of can, means we start having a dialogue. What we do know is that how you do it isn't doing what the current and past governments have done, turning one section of society against another. It shouldn't be a choice, one or another. We cannot say to older people 'Everything you have worked for, had in front of you, been promised, paid into is now going. Nor can we say to younger people that what your parents or grandparents have had won't be there for you, to say that 'Sorry, the money has ran out' It's you and me, our grandparents and your grandchildren who this affects. Real people, not stats in a spreadsheet.

We need a vision, an agreed one decided by us all. Not a robbing Peter to pay Paul, a re-writing of our social contract with no input from us. Not changes to retirement age (I for example don't know what my retirement age will be, just that it will be higher), not changes to pensions, what are essentially deferred wages, that we all have paid or are paying into. A low pay, low tax economy won't help us. You can't save and you can't contribute then. We'll get to retirement and services just won't be there, with no way to pay for them.

We need to deice on a vision. Engage young and old in the debate. See it as a financial investment, in the future doctors and inventors and teachers that are our young people, and in you, their parents or grand-parents who make their being possible. We need to invest in each other and act collectively.

KEYNOTE SPEECH BY STEVE TURNER, ASSISTANT GENERAL SECRETARY UNITE-THE-UNION

Can I start by saying what a genuine honour it is to be asked to speak today and how delighted I am to speak at the close of what I know will have been a fantastic three days here in Blackpool.

I bring very real solidarity from our Union Executive Council and of course our General Secretary, Len McCluskey.

I want to thank each and every one of you for the spirit, determination, fight and energy you bring to the everyday struggles facing, not only our pensioners – because I know you do much more than that – standing up for our class. especially for the next generation, our youth.

Our youth are the first generation that will be worse off than their parents. It wasn't our kids, nurses, lorry drivers who acted recklessly. It was the spivs and speculators of the City and Wall Street who wrecked our economy. And so this generation is fighting so many of the same battles fought and won as Capital attempts to claw back 70 years of social progress.

And so again there is a fight for full employment, decent jobs, a living (not a minimum) wage, a safe secure home to raise a family, social solidarity and dignity in our communities, for collective bargaining and respect at work; and also for the everyday practical issues that make life that little bit easier as we grow older:

- For a 52-week a year "cut and cap" on energy costs, ending fuel poverty for all;
- Free and accessible public transport;
- A TV licence; affordable rents, free prescriptions and universal benefits for all.

It is appropriate that you are meeting here in the North West. Still today this is the region with the highest trade union membership in the UK with 57% of workplaces covered by a trade union agreement and 38% of all works in their trade union. And from here came one of the giants of the 20th century labour movement. He'll need no introduction here, for I am talking of your friend and mine – Jack Jones. It was his experience of poverty, homelessness, working class struggle and that shaped my union.

Jack ended his life as he started it – living in a council flat in South London, organising and fighting for the causes he passionately believed in: the fight for fair-

ness, justice and dignity in old age. I pay tribute today to Jack – a comrade of mine – and I know that many of you do too.

And in this year of remembrance of 1914 and D-Day, I want to pay tribute to you and remember our collective struggles – your fight for a better Britain, and, although I wouldn't normally do this, I find myself wanting to apologise to your generation – a generation which includes my parents and grandparents, for the ease in which the Tories have been allowed to dismantle so much of what you fought, and so many died for. Not because we haven't done anything, haven't tried, because we have, but because we're not doing enough.

Along with so many of you in this room, when my parents returned from defeating the eevils of fascism, they weren't returning to the poverty and squalor of the 1930s – they fought, as you fought, they organised, in society politically for the NHS, for social homes, free education, pensions, social solidarity.

They organised at work and built a shop stewards' movement to be proud of. They struck for progress – the vote, trade union and workers' rights, decent pay, shorter hours (not zero-hours!), pensions, safe work-places, equal treatment. They fought landlords, loan sharks, evictions, poverty and squalor. and they won!

All of this is now under an ideological attack.

You know, it was Aneurin Bevan who said at the birth of the NHS that it would only survive for as long as people were prepared to fight for it. He saw it as a victory over the interests of capital, and he knew that one day, if we allowed the balance of power to shift, they would come back seeking revenge, because, of course, the reality is that we have no God-given rights.

Now we face those same battles today. A global attack on all we hold dear – failed neo-liberal economics that blames workers and the poor for the collapse of the economy and seeks to claw back our collective gains. Those gains in social progress, health and education; our members' pay, job security, industrial health and safety, woking hours and pensions.

Obscene concentrations of our collective wealth are now being placed into the hands of – not even the 1%, but a much smaller group of individuals.

There is a need for us to organise, mobilise and co-

ordinate our fight in a smarter, more thoughtful and more focused way to meet the challenges of this century – young workers, casual workers, fearful workers, the 4.5 million self-employed workers. And also in the wider community – students, unemployed people, pensioners.

Can a union mobilise and build a "movement" rather than simply be a representative organisation of working people? How do we win? What does "win" look like? What leverage do we have? (11m pensioners and an election next year is a powerful voice!). Can 7m trade unionists use our collective power in core sectors of the economy to win issues where we have little or no industrial power? How do we win in circumstances where ideological, political attacks are undermining our sstructure and institutions – the very social fabric of our society?

These are huge questions and serious challenges, but if we are to reach out, build alliances, open our doors to both past and next generations, we have to tackle these questions and challenges head on.

We're not a club saying "we're full up the doors are closed". We're not a club that protects its members – the declining mass of organised labour working in traditional industries with traditional patterns of work – a shrinking ship surrounded by an unorganised "underclass" of insecure, low paid, fearful workers.

There is a growing workforce living on the edges of society – on casual, zero-hour contracts – working for agencies in temporary work, forced into doing two, three or even four jobs in order to secure a roof over their heads, put food on the table and clothe their families. This is the reality for so many of our people in 2014 – for those who have work at all! It is obscene, de-humanising and we have a responsibility to stand up! A better world is possible and it is our duty to stand up – stand up and fight to organise and to win that better world.

Our history – the history of ordinary decent men and women across the world, our families and communities – is a history of class struggle. It's organised labour that is the only force capable of defending social progress and resisting this on-going ideological attack. We have the potential – but only the potential – to terrify governments and corporations and the right-wing press that props them up

And so.

Campaign for decent jobs, homes and for hope – without hope we see despair. Fight for a fair share of the wealth we create as working people (and have created during the lifetimes of today's pensioners). Fight back against the obscene narrative of hate – the deserving and undeserving poor, the racist rants of a

growing right wing – near fascist political force. Fight against fear and insecurity – zero-hour contracts, minimum wage exploitation, the dehumanising poverty of unemployment, and the relentless attack on some of the most vulnerable in our society. Campaign to secure decent pay through collective bargaining, and fight for dignity in retirement.

I am not usually one for figures, but I want to share a few with you:

In Britain the past 30 years has seen the share of GDP going to workin people drop from 65% to 53% — a 12% shift of total economic output from workers to bosses. At the same time (and this is no coincidence) we've seen the number of works covered by a collective agreement drop from 82% in 1979 to just 22% today.

We have experienced a relentless attack on our trade unions over this period – legally, institutionally and structurally (with the dismantling of national sectoral bargaining. As a result we are experiencing the longest decline in living standards since the 1870s.

This is of course the picture seen across the globe as capital seeks o undo the progress made during the 70 years since 1945. Meanwhile the 1% is doing very nicely. Oxfam report – the 85 richest people have a combined wealth greater than the poorest 50% of the world's population. Whilst here in the seventh richest nation on the planet:

- 1% of the UK population have combined wealth greater than the poorest 55%;
- Five men hold a combined wealth greater than the poorest 20% of our nation;
- Britain's richest 1,000 people grew their wealth by 15% last year doubling it in five years to a staggering £519bn (30% of our total GDP);
- 75 billionaires live in London more than any other city in the world;
- While an average CEO's pay averages £4.3m a year, with a pension of som £2.4m, 5m people earn less than the UK living wage;
- The Joseph Rowntree Foundation estimates 13m in poverty with half surviving on less than 50% of average wages;
- Such has been the attack on wages that they aren't predicted to recover to 2008 levels until 2020;
- 3.5m children are living in poverty 1.6m in severe poverty in working families earning less than £15,000 a year;
- 2.5m pensioners are living in poverty;
- 5m wait on ever-growing lists for a social home; mil-

lions are being forced into food banks or into the hands of legal loan sharks each week;

- 9 out of 10 new claims for housing benefit are for people in work;
- For the first time Save the Children are appealing for money to support UK children;
- Close to a million young people are unemployed, including 1 in 4 graduates (despite raising personal debts of up to £50,000 obtaining their qualifications);
- In Germany 60% of school leavers go into a proper apprenticeship while here, in Nottingham last year 1,300 people applied for six jobs making coffee.
- And all of this while costs soar: Food up 44%. Housing costs tripled. Energy bills up a staggering 88% in five years.

There are no easy answers, but for a start I am clear that if we can afford to allow rich Corporations to avoid paying tax and if we can even consider supporting sides in a war in the Middle East, we can afford to wage war on poverty, homelessness, fuel poverty and unemployment.

These are unchartered waters, but as part of our strategy, Unite-the-Union has opened up membership to those not in paid employment – the unemployed, retired, carers, volunteers and students. Our Community Membership Initiative and Organising Strategy is providing a collective voice and an opportunity to engage communities in industrial struggles for jobs, decent wages, secure employment and dignity, whilst at the same time campaigning on community issues – social services, welfare protection (leading the campaign against the bedroom tax, the poverty premium.

We're politicising and organising in areas largely deserted by the trade union movement – packing up as quickly as the Corporations that once operated there, and we are proud to be playing our part in developing and supporting the People's Assembly. This is an organisation Unite is proud to support both nationally and in the regions and I am proud to be its chair. Born from a political necessity, the People's Assembly puts an umbrella over the fight against cuts and austerity to unite in action those unions, campaign groups, politicians and community activists for the right to protest, organise and mobilise, if necessary engaging in direct actions and mass civil disobedience.

Our history is a proud history – from the Chartists and Suffragettes to the Poll Tax Riots that brought down Thatcher, and thee Stop the War Protest (2 million on the streets); from student protests, to those against fracking; from the abolition of child labour and the fight against fascism to the creation of our welfare state and NH, from free education for all to thee fight for equal pay and the living wage; from dignity in retirement to maternity and paternity rights.

So join us at the People's Assembly National Demonstration in London this Saturday (21 June 2014). Affiliate and get involved in local Assemblies – you'll find on in a town near you or set up an Assembly where one doesn't exist.

The lessons of your struggles are the lessons for today! This is our chance – our opportunity to replace fear and despair with genuine hope and opportunity.

Support the public sector workers' actions on 10July 2014.

Let's keep busy. Solidarity!