

## John Poynton's UKIP Policy Discussion Paper No.9

### **Social Care.**

#### **1. Quick summary of 2015 and current manifesto policies:**

2015: Integrate NHS and Social Care organisation and funding

Increase funding by £1.2bn each year

Protect support services such as meals on wheels

Reject Dilnot lifetime funding cap of £35k and substitute a Sovereign Wealth Fund

Maintain standards (doesn't say how)

Protect care workers from zero hours contracts and paying for travel time.

2020: Integrate NHS and Social Care organisation and funding

Exempt primary residences from means testing for funding

Increase funding by £5bn

Introduce a Sovereign Wealth Fund.

#### **2. Critique**

Unfortunately both these manifestos miss a number of crucial points:

**2.1. Outsourcing of patient care** does not work and horror stories abound of low standards and of abuse by staff. This is because the person receiving the care is not the person paying for it. Outsourcing of services like catering or IT can work because they are contracted out by managers responsible for those things, but with patient care complaints are just ignored.

**2.2. Many Local Authorities** have a poor record of management competence and such competent staff as they may have are undermined by councillors who have little or no experience of management.

**2.3. National public services** such as the NHS have no top management, resulting in large numbers of expensive middle managers running around like headless chickens going nowhere. Waste and inefficiency is reputed to be rife.

**2.4. As libertarians** our top priority must be to ensure people have a **choice** between using the public sector or private sector on a means tested basis, and that the publicly provided services are properly managed and funded through a clear chain of accountability directly to the relevant ministers and to Parliament rather than through the civil service.

**2.5. The cost of funeral arrangements** can be crippling for relatives and should similarly be supported on a means-tested basis.

#### **3. Proposed Policy**

**3.1. Scrap outsourcing of patient care** and make the NHS responsible for public sector care homes. Ensure the NHS has some proper top management responsible for resource allocation and performance review under a system of managed localism (conglomerate management – comparative management by results).

**3.2.** Ensure the **Care Quality Commission** can and does make surprise visits at any time and report directly to Parliament.

**3.3.** Encourage **in-house care for the elderly** from the private sector. Fees to be paid in full by the taxpayer through a National Credit Card backed by a Sovereign Wealth Fund, with the patients share of the cost billed back to the patient in the following year's tax demand after review with their normal tax assessment.

**3.4.** We cannot **afford** to increase funding from the taxpayer except in the last resort and therefore we cannot exclude savings, including the value of the patient's primary residence, from the means testing. However we can **guarantee that no one will be evicted** from their homes, whether owned or rented (subject to mortgage or rental terms and conditions) and any unpaid tax can be wrapped up into their estate as an allowable cost before IHT. Means-testing will check if there are sufficient funds in the estate for this each years and for basic funeral arrangements. Relatives should be able to purchase more elaborate **funeral arrangements** on their own National Credit Cards.

**3.5.** Encourage the use of **Housing Associations** in the provision of such homes as are still needed and where in-house care is not possible, working alongside charities specialising in the provision of care.

**3.6.** Needless to say, such funding can only apply to an essential minimum level of provision, to be carefully specified. Additional provision may be purchased directly from the care provider at the patient's expense, but specialist equipment and expensive drugs could be put onto the NCC thereby ending the postcode lottery in such things. Under this arrangement **we do not anticipate any increases in taxation** being necessary.

**3.7.** We do propose the setting up of a **Sovereign Wealth Fund**, seeded from cheap 30-year government borrowing, but its prime objectives must be to hedge the national debt and take over the funding of pensions. Here it would be used as working capital for which it would charge 5% interest to meet its own minimum return requirements. Patients/taxpayers may choose to pay on account to avoid these interest charges.

**3.8.** Providers of in-house care must provide an **apprenticeship** for a British citizen for every overseas worker they sponsor as a legal immigrant. Currently most care workers in this sector come from abroad.