

YES, WE DO BELIEVE IN BRITAIN.
WE BELIEVE IN A BRITAIN THAT IS
INDEPENDENT AND SELF-GOVERNING
WE BELIEVE IN A BRITAIN THAT
CONTROLS ITS BORDERS
PROPERLY AND SENSIBLY.
WE BELIEVE IN A BRITAIN WHERE NO LONGER DO
THE TOP THREE OR FOUR PERCENT GET ALL THE
PRIVILEGES, AND GET RICHER AND RICHER.
WE BELIEVE IN A BRITAIN OF
SOCIAL MOBILITY .
WE BELIEVE IN A BRITAIN THAT GETS AN EVEN BREAK
IF YOU BELIEVE IN BRITAIN.
IF YOU ARE PATRIOTIC.
IF YOU BELIEVE A CAREER POLITICAL CLASS
THEN COME WITH UKIP ON THIS JOURNEY.
COME WITH US AND LET'S PUT SOME
HONESTY, INTEGRITY, AND
REAL PEOPLE
BACK INTO BRITISH POLITICS.

BELIEVE
in **BRITAIN**

www.ukip.org



UKIP MANIFESTO 2015

– NIGEL FARAGE, 2015

THE NHS



“UKIP has a clear vision for 21st century healthcare: an efficient, affordable, world-class, national health service, free at the point of delivery and in time of need. The people of Britain are rightly proud of the NHS and we will invest £12 billion over the next five years to keep it working for them.”

LOUISE BOURS MEP
Health Spokesman

Britain's best-loved institution is in crisis. The founding of the NHS in 1948 was a victory for the people but, sixty years on, it is the NHS itself that needs emergency care and nursing back to health.

Our ageing population; the dramatic increase in the numbers of people suffering chronic, long-term conditions; uncontrolled immigration, encouraged by Labour and continued under the Tories: any one of these pressures might have been enough to bring the NHS close to breaking point. Combine these with EU directives that have prevented essential training and endless political interference and it is not difficult to understand why the NHS is in serious trouble.

Both Labour and the Tories have utterly failed our NHS by treating it as a political football instead of a cherished institution.

Patients are suffering because of poor policy, made all too often purely for reasons of political expediency. A GP appointment can no longer be guaranteed within any reasonable time frame. Coalition cuts to social care budgets are forcing elderly people to stay in hospital for longer than they should because there is no after-care available for them. Top-down targets forced on Accident and Emergency departments are not realistic; even some of the best hospitals cannot cope.

Despite a chronic shortage of doctors, nurses and midwives, David Cameron's government wasted billions on a top-down reorganisation he promised would not happen. Labour, which squandered money on financing capital projects at credit card rates through private finance initiatives and giving service contracts worth billions of pounds to private companies when they were in power, are now promising to repeal the Health and Social Care Act, meaning yet more billions will be wasted re-organising the NHS all over again. Both parties administered a disastrous £12 billion NHS IT project which ultimately failed.

UKIP will take better care of taxpayers' money. We will put an additional £3 billion a year into the NHS in England by the end of the parliament and make sure the money is spent on frontline patient care. We will provide the common sense, the money, the staff, the social care funding and the vital improvements to emergency medicine that the NHS needs.

We will fund: -

8,000 MORE GPs

We will train and employ GPs to meet this current shortfall and waive university tuition fees for new medical students who work in Britain for five years after qualifying.

To encourage those who have left the profession to get back into the surgery, we will fund the cost of re-training for GPs who wish to return to practice.

To cut GP waiting times and allow GPs to spend more time actually seeing patients, UKIP will reduce the burden of data collection, target chasing, revalidation and appraisal work that interferes with the care GPs can give to patients.

20,000 MORE NURSES AND 3,000 MORE MIDWIVES

Not only will UKIP fund the training of nurses and midwives, we will also fund return to practice training for those who have taken career breaks. Because we believe nursing starts and ends on the ward, we will bring back the State Enrolled Nurse, and put care and compassion back at the heart of nursing.



BELIEVE *in* BRITAIN

EMERGENCY MEDICINE

There is a shortage of emergency medicine consultants in our Accident and Emergency departments, just 1200 when the profession needs closer to 2000. The problem stems not so much from a deficiency in training capacity, but from poor retention once registrars or consultants have qualified. 500 UK-trained emergency medicine consultants are currently working in Australia, New Zealand and Canada alone, which illustrates the attrition rate.

Bodies representing this field of medicine believe the solution lies in improving working conditions, such as the extent of weekend cover, unsocial hours, extended shifts and leave patterns. Funding the additional consultants is not in itself a problem, as the cost of locums to cover the current shortage far exceeds that of increasing employed staff and this is what we will do.

GPs FOR A&Es

Patients who cannot get a GP appointment frequently turn up in A&E instead, putting additional pressure on already over-stretched resources. We will initiate pilot programmes in English hospitals to put GPs on duty in A&E departments seven days a week. If these pilots succeed in easing the burden on A&E staff by freeing them up to treat seriously ill patients more successfully, we will roll the programme out across the country, deploying approximately 1,000 of the 8,000 additional GPs we are committed to funding.

IMPROVED MENTAL HEALTH SERVICES

Patients with mental health problems frequently feel ignored and let down. UKIP takes a 'whole person' approach to health and that means giving mental health parity with physical health. We will introduce practical policies to improve delivery of mental health services, including: -

- Directing patients diagnosed with a debilitating long-term condition or terminal illnesses to mental health professionals when appropriate
- Recognising there is often a link between addiction and mental illness and offering appropriate treatment where this is the case
- Offering direct access to specialist mental health treatment for pregnant women and mothers of children under 12 months of age
- Fighting the stigma around mental illness and supporting those seeking to get back into work.

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Patients experiencing distress or exhibiting mental ill-health issues when admitted to hospital should have both their physical health and mental wellbeing assessed. This must not just be an optional extra: we will end the postcode lottery for psychiatric liaison services in acute hospitals and A&E departments.

To fund these initiatives, we will increase mental health funding by £170 million annually, phasing this in through the first two years of the next parliament.

DEMENTIA TREATMENT AND RESEARCH

This debilitating and distressing condition is the leading cause of death among women over the age of 55 and the fifth biggest killer of men.

We will be investing a full extra £130 million a year into researching and treating dementia by 2017.

UKIP will put the 'national' back into our national health service

We need to get tough on so-called 'health-tourism.' Every year the NHS spends up to £2 billion of UK taxpayers' money treating those ineligible for free care. This bill includes foreign nationals who come to Britain to deliberately seek NHS services at no cost to themselves; those who live here but who do not qualify for free care; treatment for illegal immigrants and those who overstay their visas.

The NHS is the National Health Service, not the International Health Service.

UKIP will insist migrants and visitors who come to Britain have approved medical insurance. Only those who have the permanent right to remain in Britain and who have paid UK taxes for at least five years will be granted an NHS number and be eligible for the full services offered by the NHS. Urgent medical treatment will still be given to those who need it, but non-urgent treatment will be charged for.

UKIP is the only party that is truly willing to face up to the harsh reality of how health tourism and treating those ineligible is sapping the NHS of funds. The other parties have their heads stuck well and truly in the sand.

HOSPITAL PARKING CHARGES

Hospital car parking charges are a tax on the sick. We will invest £200 million to make parking at English hospitals free for patients and their visitors.

EFFECTIVE AND POWERFUL HEALTHCARE MONITORING

We think NHS managers should be subject to disciplinary oversight in the same way as doctors and nurses who are regulated by the General Medical Council and the Nursing and Midwifery Council. We will introduce a 'Licence to Manage' as a statutory requirement to prevent incompetent, negligent or bullying managers being moved sideways or re-employed by the NHS as external consultants.

We will also abolish Monitor and the Care Quality Commission and place their inspectorate functions into the hands of county health boards made up of health and social care professionals elected locally by their peers. County health boards will have the power to inspect health services, conduct snap inspections and take evidence from whistleblowers. They will be charged with a statutory duty to investigate concerns flagged up by their local Healthwatch or local authority Health Scrutiny panels, so local democratic control and accountability is brought to healthcare decisions directly affecting our local communities.

ENDING LABOUR'S PFI SCANDAL

When short-sighted politicians are desperate for votes, they make appalling decisions. Labour's Private Finance Initiative (PFI) scandal is a case in point. By the time the £14 billion capital cost of NHS PFI contracts have run their course, the NHS will have been forced to pay out a total of £76 billion. UKIP will not continue to privatise the NHS by the back door, as both Labour and the Conservatives have done. We will end the use of PFI contracts within the NHS.

STRIPPING OUT UNNECESSARY EU REGULATION

Numerous EU Directives prevent medical institutions from operating in the best interests of patients. We will scrap at least two of them: the EU Clinical Trial Directive, which has led to a substantial drop in clinical research and threatened Britain's position as a world-class leader in this field; and the EU Working Time Directive which, by limiting working and training time to 48 hours in any one week, prevents medics learning essential new skills, putting patient care at risk.

THE TRANSATLANTIC TRADE AND INVESTMENT PARTNERSHIP (TTIP)

TTIP is a proposed EU/USA free trade agreement that is being negotiated in secret by the EU Trade Commission and other EU bureaucrats.

There is growing concern that TTIP may compel us to put many of our public services up for sale to US companies, thereby privatising significant parts of our NHS.

UKIP is committed to securing the exclusion of the NHS, by name, from TTIP.

The level of public concern around TTIP makes it a good example of what can potentially go wrong while we remain in the EU and allow EU Commissioners to negotiate every single trade agreement on behalf of twenty-eight member states, including the UK, en bloc.

Fears of what TTIP might contain precisely illustrate why UKIP believes we should leave the EU and negotiate our own free trade agreements again.

We find it astonishing that other political parties, while launching high-profile campaigns against TTIP, nevertheless remain committed to our EU membership. Their hypocrisy is shameless.



SOCIAL CARE

The coalition cuts went deep. UKIP will increase social care funding by £1.2 billion each year, phasing in this increase over a two-year period, to bring investment back to 2010 levels and pay for the additional residential, nursing and home care services that are so desperately needed.

Funding Crisis

The good news is we are living longer. The bad news is this is causing a crisis in elderly care.

According to Age UK, 900,000 older people between the ages of 65 and 89 have social care needs that are not met. Residential care, nursing care, home care, day care and equipment budgets have been cut. Meals on Wheels services have been scrapped in some areas, or frozen ready-meals have replaced freshly cooked hot food.

These cuts impact on the NHS: one million hospital bed days are lost every year when patients cannot be discharged because there is no after-care available for them. Operations are cancelled for the same reason.

How we look after our older people and others who are vulnerable in society because of ill health is a mark of how civilised we are as a society. It is scandalous that the current care system is failing those who most need our help. We believe putting back the investment that was taken away by the current government is more than expedient: it is our duty.

The £1.2 billion UKIP will invest every year by the end of the next parliament will fund social care directly and ease the path through a change we want to make to the way the current system is financed.

INTEGRATING HEALTH AND SOCIAL CARE

While local authorities manage social care, the NHS manages health. This makes for a complex, inefficient and fragmented approach. While attempts to integrate the two, while keeping funding and responsibilities separate, have been commendable, the common sense, long-term solution is simply to fully integrate health and social care.

UKIP will bring health and social care together, under the control of the NHS.

FUNDING OLDER PEOPLE'S CARE

In 2010, the Commission on Funding of Care and Support, chaired by Andrew Dilnot, was tasked by Government with reviewing the funding system for care and support in England. It concluded that an individual's contribution to social care costs should be capped at £35,000.

We agree in principle: easing the burden on the growing numbers of families who face ever-increasing elderly care costs is clearly desirable, if currently unaffordable.

We propose a possible future solution: the establishment of a Sovereign Wealth Fund from any tax revenue received from shale oil and gas exploration, with investment returns ring-fenced to fully implement the Commission's recommendations.

The viability of this proposal clearly depends on several unknowns, not least getting the go-ahead for shale exploration and unpredictable market forces, but we feel it is important to state this policy as an intention. Should fracking in the UK prove to be possible and profitable, we want to see the nation's income from it spent on looking after older people.

Establishing a Sovereign Wealth Fund from the tax profits of fracking, and ring-fencing the income it generates for a social care fund, will potentially release older people from the distress of having to sell their homes to pay for care and give them and their families peace of mind.

IMPROVING STANDARDS IN CARE

UKIP believes the elderly and vulnerable must be treated with compassion and dignity. We will:

- Introduce a legally-binding 'Dignity Code' to improve standards of professional care
- Pledge to protect services such as day care, home care and Meals on Wheels
- Abolish the practice of arranging home care visits in fifteen-minute windows

- Abolish the annual assessment process for continuing healthcare funding in respect of those suffering from degenerative, terminal illnesses
- Keep free bus passes, winter fuel allowances, free TV licenses for the over 75s and free prescriptions and eye tests for the over-60s, without means testing.

We will also fund a co-ordinating service for older people in every county, combining resources from across the NHS, social services, community agents and the voluntary sector. No vulnerable person should feel isolated or alone and this service will be proactive in identifying and assisting those suffering from loneliness.

A BETTER DEAL FOR HOME CARE WORKERS

Good home care starts with good home care workers, who provide a lifeline to some of the most vulnerable people in our society. Theirs is a difficult enough job to do at the best of times and long hours and low pay make an already challenging role even more onerous.

We cannot expect workers to give the best care if they themselves are not being cared for.

This is a serious issue UKIP will tackle head-on. We will not allow the NHS or third parties under contract to employ home care workers on zero hour contracts of any kind.

Neither will we allow them to end up being paid less than the minimum wage because they are expected to travel between appointments in 'their own time.' We will insist they are paid for the entire time they are on duty.

We believe that as Britain's largest employer, the NHS should set an example.