

Consultation Response

Public consultation on the human rights of older persons

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Name: Katherine Hill, Policy Adviser Equality and Human Rights
Email: katherine.hill@ageuk.org.uk

Age UK
Tavis House
1-6 Tavistock Square
London WC1H 9NA
T 0800 169 80 80 F 020 3033 1000
E policy@ageuk.org.uk
www.ageuk.org.uk

Age UK is a charitable company limited by guarantee and registered in England (registered charity number 1128267 and registered company number 6825798). The registered address is Tavis House 1-6 Tavistock Square, London WC1H 9NA.

About this consultation

Human Rights Council Resolution 21/23, “Human rights of older persons” requests the Office of the High Commissioner for Human Rights (OHCHR) “to organize, in Geneva, an intersessional public consultation on the promotion and protection of the human rights of older persons, with the participation of States Members of the United Nations, relevant international organizations, United Nations agencies and stakeholders, in order to receive information and share good practices on the matter”.

OHCHR is seeking comments in relation to the following:

1. Information on the main challenges related to promotion and protection of the human rights of older persons at the country level.
2. Information on constitutions or legislation explicitly forbidding discrimination on the basis of old age, and on the existence of specific bodies which protect against age discrimination or are mandated to protect and promote the rights of older persons.
3. Information on specific national legislation, national policies, strategies and plans of action adopted to ensure the equal enjoyment of rights by older persons, particularly in the areas of prevention and protection against violence and abuse, social protection, food and housing, employment, legal capacity, access to justice, health support, long-term and palliative care.

About Age UK

Age UK is a charity and a social enterprise driven by the needs and aspirations of people in later life. Our vision is a world in which older people flourish. Our mission is to improve the lives of older people, wherever they live.

We are a registered charity in the United Kingdom, formed in April 2010 as the new force combining Help the Aged and Age Concern. We have almost 120 years of combined history to draw on, bringing together talents, services and solutions to enrich the lives of people in later life.

Age UK provides information and advice to around 6 million people each year, runs public and parliamentary campaigns, provides training, and funds research exclusively focused on later life. We support and assist a network of 170 local Age UKs throughout England; the Age UK family also includes Age Scotland, Age Cymru and Age NI.

This submission covers issues that are the responsibility of the Westminster Government. Age UK work with our national partners Age Scotland, Age Cymru and Age NI to influence administrations across the UK where issues are devolved. Age UK also supports programme and policy work in lower- and middle-income countries through our partner and subsidiary charity Age International.

1. Key Challenges

- **Demographic change**

There are 10.3 million people aged 65 or over in the UK and over 1.4 million people are aged 85 or over.¹

The number of people aged 65 + is projected to rise by nearly 50% (48.7%) in the next 20 years to over 16 million. The proportion of people aged 65+ will rise from 17.2% currently to 22.4% in 2032.² The number of people over 85 in the UK is predicted to double in the next 20 years and nearly treble in the next 30.³

- **Prevention and protection against violence and abuse**

Abuse of older people in the UK is largely a 'hidden problem'. Official police statistics consistently report low levels of abuse and domestic violence against older people. But prevalence surveys suggest that around 340,000 (about 1 in 25) older people living in the community are affected by abuse every year.⁴ There are significant differences between nations. Wales has twice the level of identified abuse as Northern Ireland. Scotland is the second highest, with men more likely to face abuse than elsewhere.

There are many possible reasons why older people do not report abuse: stigma, shame, feeling guilty for 'having provoked' the abuse, dependency upon the abuser, isolation, and lack of contact with care providers or criminal justice agencies. It is also the case that the wide range of types of abuse – and the fact that different forms of abuse often occur simultaneously - also present a challenge to agencies to work in partnership to tackle abuse holistically.

- **Social protection**

There are 1.7 million older people living in relative poverty in the UK despite welfare falls in poverty over the last decade or so.⁵ Means-tested benefits provide a safety net to protect people on the lowest incomes but low take-up of benefits means that some older people continue to miss out.

Age UK estimates there are currently approximately 3.5 million older households (60+) in fuel poverty in the UK. This equates to about 6 million older people (60+).⁶ The government's current definition of fuel poverty is where a household is spending more than 10% of its income on fuel to maintain a satisfactory heating regime.

¹ Mid-2010 Population Estimates UK Office for National Statistics, 2011

² National population projections, 2010-based, Office for National Statistics, 2011

³ National population projections, 2008-based, Office for National Statistics, 2009

⁴ Action on Elder Abuse (2007) Briefing Paper: The UK Study of Abuse and Neglect of Older People 2007

<http://www.elderabuse.org.uk/AEA%20Services/Useful%20downloads/Prevalence/Briefingpaperprevalence.pdf>

⁵ DWP (2012) Households Below Average Income (HBAI) 2011

⁶ Age UK estimate derived from National Energy Action (NEA) analysis

<http://www.nea.org.uk/media/presspack/>

[fuel-poverty-by-region](#) and *Trends in Fuel Poverty England*, DECC 2012

http://www.decc.gov.uk/en/content/cms/statistics/fuelpov_stats/fuelpov_stats.aspx (Table 17).

- **Food**

Malnutrition is a major cause and consequence of poor health and older people are particularly vulnerable. There are over 3 million people across the UK either malnourished or at risk of malnourishment. Over 1 million are over the age of 65, of these 93% are in the community, 5% in care homes, 2% in hospital.⁷ In winter, about 34% of people admitted to hospital (all ages) are found to be malnourished. This is an over 20% rise from summer and autumn months.⁸

- **Housing**

The majority (90%) of older people live in general needs housing and would prefer to continue living independently at home, where possible. There are 7.3 million older households in England (containing no-one under 55) living in either mainstream or 'specialist' (but not care home) housing.⁹

Shocking numbers of older people in England live in non-decent housing – 26 per cent of households with people over 60.¹⁰ Of particular concern is the lack of suitable housing for disabled older people. Overall some 4.5 million households (one in five) include somebody with a mobility problem, most of whom are aged 60+, but only 3.4 per cent of homes have the four essential features that would make them accessible to a person with mobility problems, such as level access to the main entrance.¹¹

- **Employment**

Following the phasing out of the default retirement age throughout 2011/12, employees can no longer be forced to retire just because they turn 65, and more people are continuing to work in older age. By 2020, about one-third of the workforce will be aged 50+.¹² Average retirement ages have been increasing since the early 1990s, with no sign of slowing down, and the past year has seen an increase in the number of over-65s remaining in employment. 959,000 people aged 65+ (9.2 per cent), are currently in employment, an increase from 860,000 (8.6 per cent) a year ago.¹³

Older workers, typically those aged 50+, still face barriers in accessing work and training – age discrimination is still rife, in spite of it being illegal under the Equality

⁷ *Malnutrition in Older People in the Community; Policy recommendations for Change*, European Nutrition for Health Alliance/ BAPEN/ ILC-UK 2006
http://www.bapen.org.uk/pdfs/malnut_in_the_community.pdf.

⁸ BAPEN press release, 1 November 2010, http://www.bapen.org.uk/res_press_rel_2010conf5.html

⁹ Older people's housing: choice, quality of life, and under-occupation. Jenny Pannell, Hannah Aldridge and Peter Kenway, Joseph Rowntree Foundation. 2012

¹⁰ Non-decent housing (England): English Housing Survey Household Report 2010–11, Department for Communities and Local Government (DCLG), 2012

¹¹ Ibid.

¹² *The Shape of the Older Workforce*, Age UK, 2011

¹³ *Labour Market Statistics*, Office for National Statistics, December 2012

Act 2010. 40 per cent of 50+ workers believe they have been disadvantaged in work for appearing too old.¹⁴

Long-term unemployment remains a particular problem for the 50-64 age group. Of those in this group who are unemployed, 48.7 per cent have been so for more than 12 months, while 28 per cent have been so for more than 24 months.¹⁵

Older workers may also need to work flexibly because of, for example, caring responsibilities or health needs. Age UK's report published in 2012, *A Means to Many Ends*,¹⁶ found that many older workers struggle to access the flexible working options they may need in order to remain in work, and to ensure they are as productive as possible.

- **Legal capacity**

With over 820,000 people estimated to be suffering from late onset dementia in the UK, supporting people experiencing problems to make decisions for themselves is becoming ever more important.¹⁷ The question of financial abuse of people who have difficulties managing their own finances is of particular concern.

- **Access to justice**

A major threat to older people's access to justice comes from the cuts to legal aid funding in England and Wales. From April 2013, 650,000 people a year who are currently helped through legal aid will no longer be able to access this assistance after the Legal Aid, Sentencing and Punishment of Offenders Act comes in to force.¹⁸ These changes will also make it harder for not-for-profit advice agencies, such as Citizens Advice Bureau or Law Centres, to continue to function and provide advice to older people on their rights.

The Equality and Human Rights Commission, Northern Ireland Human Rights Commission and Scottish Human Rights Commission are all accredited National Human Rights Institutions (NHRIs) in the UK. Recent Government moves to narrow the remit and cut the budget of the Equality and Human Rights Commission pose a serious threat to older people's ability to seek redress for breaches of their human rights.

- **Health support**

The National Health Service (NHS) provides primary and secondary health care to all, free at the point of delivery. Two thirds of NHS clients are aged 65 and over but they receive only two fifths of total expenditure.¹⁹ Age UK research has shown a clear vision of what people want and need from health and care systems. Recurrent themes include coordination between different agencies, services which are

¹⁴ CIPD/CMI (2010), *Managing an ageing workforce*

¹⁵ *Labour Market Statistics*, Office for National Statistics, December 2012

¹⁶ *A Means to Many Ends: Older workers' experiences of flexible work*, Age UK, 2012. Available at: www.ageuk.org.uk/professional-resources-home/policy/work-and-learning

¹⁷ *The economic burden of dementia and associated research funding in the United Kingdom*. Alzheimer's Research Trust, 2010

¹⁸ http://www.citizensadvice.org.uk/index/policy/policy_publications/out_of_scope.htm

¹⁹ *A Recipe for care – Not a Single Ingredient*, Philp, I, Department of Health 2007

physically accessible, and being treated with respect, in a way that maintains dignity, continuity of care and control during decision-making. We are a long way from seeing such needs and preferences built into the design of health and care systems.

Difficulties include: restricted access (12 % of people aged 65+ describe access to a GP surgery as difficult²⁰); poor coordination between specialisms (up to half of people in later life in hospital may have cognitive impairment including dementia and delirium but very few access specialist mental health services²¹); and commissioning practices that do not recognise the needs of older people (only 66% of primary care sites are shown to have commissioned an integrated continence service, for example). Time and again we find a system which is poorly developed to deal with the needs of those who need it most – frail older people.

There are also worrying trends relating to the quality of care older people receive in hospitals. The report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (the Francis Inquiry) published in February 2013 highlighted the serious failures to uphold basic human rights that took place at Stafford Hospital between 2005 and 2008.²²

There is now an extensive body of research revealing evidence of age discrimination in healthcare services. In 2012, Age UK published a report with the Royal College of Surgeons and MHP Health Mandate which looked at access to common surgical procedures. The research found that, despite limited reference to age in professional guidance, treatment rates dropped rapidly for people over 70–75 years. For example, access to surgery for prostate cancer drops by 80 per cent, comparing 65–69 with 75–79 age groups and breast cancer surgery peaks at 65–69 yet incidence peaks at 85+.²³

- **Long term care**

Social care in the UK is in crisis. Unlike NHS care, social care is privately funded unless an individual passes a strict means-test. Older people's care has already faced years of austerity, with almost no net spending increase, despite growing demand because of rising numbers in late old age.²⁴ Many local councils are tightening their eligibility criteria, so that only older people with the most severe health problems are supported. Now further reductions in funding and support, as a result of public spending cuts are having a devastating impact on the most frail and vulnerable older people.

Current care and support provision is often of poor quality and frequently fails to support fundamental entitlements to an acceptable quality of life, and to be treated with respect for dignity and human rights. In 2011 a report from the Equalities and

²⁰ *Physical access to amenities (UK): Age UK, 'Later Life Omnibus Survey', fieldwork 16–22 January 2013 (2,567 adults aged 16 and over, UK)*

²¹ *The prevalence of mental health problems among older people admitted as an emergency to a general hospital.* Sarah E. Goldberg et al. *Age and Ageing* 2012;41: 80-86, 2012; and *Dignity in the Care of Older People.* Jackie Morris. *BMJ* 2012;314:e533 doi:10.1136/bmj.e533, 2012

²² <http://www.midstaffspublicinquiry.com/>

²³ *Access All Ages: Assessing the impact of age on access to surgical treatment*, Royal College of Surgeons/Age UK/MHP Health Mandate, 2012

²⁴ *Personal Social Services Expenditure and Unit Costs, England, NHS Information Centre (2008/09, 2007/08, 2006/07).*

Human Rights Commission on home care services identified a number of shocking examples of human rights abuses and poor-quality care. These included:

- failure to ensure that adequate food and drink were available
- chronic disregard for privacy and dignity
- financial abuse.

Some of these problems were associated with underfunding of care, resulting in short visits (as little as 15 minutes) with no time for human interaction while carrying out personal care tasks.²⁵

- **Palliative care**

Older people approaching the end of their lives face a number of challenges. Health professionals still find it difficult to talk about death and dying, diminishing the chances of planning and preparing for death. Persistent break downs in coordinated and joined-up care make it harder to respond to crises or ensure a person's whole needs are being met. The under-provision of social care services in many parts of the country means a greater need for hospital admissions while a lack of nursing care at home leads to the majority of people dying in hospital, as opposed to at home which is most people's preference.

2. Age Discrimination legislation and institutions

Age discrimination in employment

The Employment Equality (Age) Regulations came into force in October 2006. The Regulations covered many aspects of working life from recruitment to retirement and pension. The legislation generally made it unlawful to discriminate against a person on grounds of their age. However there were some exemptions.

On 1 October 2010 the Equality Act became law and the 2006 Age Regulations were incorporated into this new legislation.

The Default Retirement Age (DRA) was introduced in the UK in the 2006 age regulations, giving employers the ability to force employees to stop working on or after their 65th birthday, providing the employer followed a set process. The DRA was subsequently phased out between 2011 and 2012, and no longer applies.

Age discrimination in services

A ban on harmful age discrimination in the provision of goods and services is introduced under the Equality Act 2010 and came into force on 1 October 2012. It covers those aged 18 or over, in both the private and public sectors, and is applicable in England, Wales and Scotland (legislation is planned in Northern Ireland). It aims to prevent discrimination, harassment and victimisation. The main area in which Age UK expects the ban to improve the lives of older people is in health and social care, where there is compelling evidence of the harmful effects of age discrimination.

²⁵ EHRC (2011) Close to home: An inquiry into older people and human rights in home care

The legislation recognises that not all discrimination on the grounds of age is harmful and service providers should not automatically adopt a 'one size fits all' approach in response to it. In some circumstances there may be good reasons for treating one age group differently or providing a discrete service for them. The legislation provides for a number of mechanisms in order to ensure that these beneficial age based differences in treatment able to continue. For more details see:

http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Equality-and-human-rights/Age_Disc_Reg_Oct_2012.pdf?dtrk=true

It is of concern that the UK Government does not believe there is sufficient evidence of harmful age discrimination to apply the ban to the financial services sector. The regulations include a wide exception allowing financial service providers to continue to use age when assessing risk and deciding prices; and permitting the use of age banding and age limits. They stipulate that any such use of age will need to be based on relevant information which is from a source on which it is reasonable to rely. In response to concerns expressed by Age UK and others that these arrangements will continue to unfairly disadvantage older people, the insurance industry has put in place a voluntary signposting arrangement under which providers will refer people refused an insurance quote because of age to another provider who will quote or to a signposting service. However it is not yet clear how effective this is.

Human Rights Act 1998

The Human Rights Act 1998 (HRA) incorporates the articles of the European Convention on Human Rights into UK law. It did not create any new rights but made it clear that as far as possible the courts in this country should interpret the law in a way that is compatible with Convention rights. It also places an obligation on public authorities to act compatibly with Convention rights.

Private individuals and bodies are not public authorities for the purposes of the HRA unless they are performing a public function. Age UK has campaigned to ensure that older people in private residential care homes or who are paying the costs of their residential care are protected by the HRA. It also believes that independent home care providers should fall under the remit of the HRA.

Equality Bodies

The Equality and Human Rights Commission has a statutory remit to promote and monitor human rights; and to protect, enforce and promote equality across the nine "protected" grounds - age, disability, gender, race, religion and belief, pregnancy and maternity, marriage and civil partnership, sexual orientation and gender reassignment. The Commission covers Great Britain i.e. England, Scotland and Wales, but not Northern Ireland (which has its own bodies). For more details visit <http://www.equalityhumanrights.com/about-us/vision-and-mission/>

3. Legislation, policies and strategies to ensure rights of older people

- **Prevention and protection against violence and abuse**

In 2000 the Department for Health issued statutory guidance on safeguarding adults entitled *No secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse*. The document gives guidance to local agencies that have a responsibility to investigate and take action when a vulnerable adult is believed to be suffering abuse. It offers a structure and content for the development of local inter-agency policies, procedures and joint protocols which will draw on good practice nationally and locally.

While this guidance offers some limited protection to older people, Age UK has argued strongly for over-arching framework legislation to ensure better accountability between agencies and to require that suspected abuse is investigated. The Care and Support Bill currently before Parliament includes important proposals for statutory duties to take steps to safeguard adults at risk of abuse or neglect.

Additionally the Adult Social Care Outcomes Framework published by the Department of Health in 2012 emphasises the need for services to safeguard adults whose circumstances make them vulnerable, and to protect them from avoidable harm. The document recognises the current difficulty of including outcome measures in this domain due to the paucity of national data available in this important area. It has highlighted this as a priority area going forward.²⁶

- **Social protection**

The UK state pension is the largest single source of income for the majority of pensioners. Currently the main elements are the basic state pension and the additional state pension. Key issues with this system are: the low level of the basic pension, gaps in coverage, the complexity of the systems and on-going debate about state pension age (SPA). Following the Pensions Act 2011, SPA will now reach 66 for both men and women by October 2020 and the Government plans to increase State Pension age from 66 to 67 between April 2026 and April 2028 and will introduce five-yearly reviews of State Pension age to take into account increasing longevity. The first review will be in 2017.

The Coalition Government published a white paper on State Pension reform in January 2013. This proposes replacing the current complicated State Pension arrangements with a single-tier State Pension for future pensioners of around £144 a week in today's terms. The aim is for a simpler, fairer system that reduces means-testing and encourages saving. It will particularly benefit people with lower lifetime earnings, especially women who have spent time caring. However it is concerning that the new system will not benefit existing pensioners, particularly those with low State Pensions.

Currently, only 37 per cent of working people pay into a private pension but it is hoped that automatic enrolment, which began to be rolled out from October 2012, will

²⁶ Adult Social Care Outcomes Framework 2013/14 DH Nov 2012

improve this. Automatic enrolment means that employers have to enrol all their eligible employees, broadly those earning over a certain amount, into either a workplace pension or the National Employment Savings Trust (NEST) – and to make a contribution on their behalf. Employees can choose to opt out of these arrangements, meaning they will lose the benefit of the employer contribution.

The UK Government is currently implementing a major programme of welfare reform. Many of these changes will not affect people who have reached State Pension age. However some aspects of the reforms could adversely affect some groups of older people including replacing Disability Living Allowance (for people disabled before the age of 65) with Personal Independence Payment, restrictions to Housing Benefit and replacing Council Tax Benefit with local support. Even where older people are not directly affected, Age UK is concerned that cutting welfare payments for younger people will stoke intergenerational tensions.

- **Food**

Age UK is working as part of the Malnutrition Task Force - an independent group of experts across Health, Social Care and Local Government - to address the problem of avoidable malnutrition in older people. The objective of the Task Force is to influence behaviours across the NHS, residential care and in the community, developing mechanisms and collating examples of how to identify, prevent and minimise the risk of malnutrition. For more information see www.malnutritiontaskforce.org.uk.

- **Housing**

The Coalition Government has made a number of policy decisions that have the potential to improve the housing situation for older people:

- The Care and Support Bill currently before Parliament introduces a requirement for local authority housing and social care departments to collaborate to meet the needs of vulnerable people, including older people.
- In October 2012 the Government announced an additional £300 million²⁷ for specialised housing (estimated to provide 9,000 new homes) including extra care housing and housing for people with dementia.
- The Government has allocated £6.5 billion over four years to local authorities to provide housing support under the Supporting People programme. This includes a range of basic support services in the home (including emergency alarms and warden services in sheltered housing). This has so far helped 825,000 older people.²⁸ But this funding is not ring-fenced and so there is a risk of resources being diverted to fill gaps in social care provision.

- **Employment**

Jobcentre Plus (JCP) is part of the Department of Work and Pensions. It aims to support people of working age from welfare into work. Older jobseekers find they are often unable to access sufficient support from JCP, with many finding that advisers

²⁷ Further details available online at: <http://mediacentre.dh.gov.uk/2012/10/26/300m-to-create-homes-for-independent-living>

²⁸ Available online at: <https://www.gov.uk/government/policies/providing-housing-support-for-older-and-vulnerable-people/supporting-pages/local-councils-housing-support>

lack knowledge of the specific issues facing this age group, for example how to minimise the effects of age discrimination or help with online job searching.

The Work Programme is a Government funded initiative designed to support the long-term unemployed and other disadvantaged jobseekers, and help them counteract barriers to work. Analysis undertaken by Age UK has found that it has been less effective at helping the over 55s than younger age groups.

The Government has said that it will extend the 'right to request' flexible working to all employees but it needs to do so as soon as possible, while employers need to consider how they can implement alternative patterns of working that benefit all parties.

- **Legal capacity**

The Mental Capacity Act 2005 gives a clear legal framework governing situations when a person's capacity to make decisions is in question. At present there is sketchy evidence of how far its principles have been implemented, even by specialist dementia services.

The Act has also been amended to include safeguards concerning situations where people without capacity to make a decision may be being deprived of their right to liberty, as a result of being confined to a hospital or care home. Care homes and hospitals now have to seek authorisation if they consider they are, or may have to, deprive a person of liberty. These 'Deprivation of Liberty Safeguards' (DOLS) came into effect in April 2009.

People can bestow a 'Lasting Power of Attorney' whilst they still have capacity so that someone else can manage their affairs. If they have not done this the Court of Protection can appoint a Deputy to act on their behalf.

The Office of the Public Guardian is responsible for ensuring this system works effectively, for example maintaining a register of LPA's, supervising Deputies and making reports to the Court of Protection. The OPG has now introduced risk assessment into its supervision and also set up protocols with local authorities for dealing with abuse.

Banks and other financial institutions have a role in detecting financial abuse, and the Financial Services Authority has a statutory duty to prevent financial crime. Additionally the National Fraud Authority (NFA) is the Government's strategic lead organisation on counter-fraud activity.

- **Access to justice**

See Challenges in response to Q.1 above

- **Health support**

Health Services in England are currently undergoing major reform. Through this process the Coalition Government is aiming to give patients more choice and control over their care and give professionals the freedom and responsibility to design services to meet patients' needs. While this reform programme offers a major

opportunity to address some of the problems outlined briefly above there is also concern that change on this scale will bring with it a high risk of serious disruption of the day to day functioning of the health service that could have very serious consequences for older people. Furthermore the NHS is currently under severe financial pressure. Since 2009, the NHS has been tasked with achieving £20 billion of efficiency savings and the deadline for achieving this target is only two years away.

- **Long term care**

The 'Caring for our Futures' White Paper and the accompanying draft Care and Support Bill set out a range of new proposals relating to assessment and eligibility for care services in England and Wales, aimed at improving the current system by introducing greater national consistency and clarifying rights and processes. These include establishing new national eligibility criteria by 2015 based around the outcomes that care should achieve for the individual and setting a new national minimum level of eligibility which local authorities must accept as triggering entitlement to services.

However, the potential of the proposals outlined cannot be fully realised until the Government resolves the crucial issue of funding. In July 2011 the Dilnot Commission on Funding of Care and Support published their review of adult social care funding in England, concluding that the current system is not fit for purpose and needs urgent and lasting reform. In February 2013 the Government announced that it would implement the proposals of the Dilnot Commission although at a much less generous level than recommended.

In July 2011 Age UK, the NHS Confederation and the Local Government Association launched the Dignity in Care Commission in response to a series of reports exposing shocking failures in the care of older people. Against this deeply disturbing context the Commission sought to understand why poor care persists and to put forward the best solutions. The Commission produced its final report, *Delivering Dignity*, in summer 2012, with 37 recommendations impacting on many different aspects of policy and practice.²⁹

- **Palliative care**

The Department of Health produced an End of Life Care Strategy in 2008 and set up the National End of Life Care Programme to implement it.³⁰ This programme is due to run until April 2013 in its current form. Since 2008 there has been a significant amount of progress; the profile of end of life care within health and social care has improved which has meant more services are available to people in the final weeks and months of life.

However a Government review into Palliative Care Funding that was published in 2011, concluded that funding was fragmented and that large numbers of people were

²⁹ <http://www.ageuk.org.uk/home-and-care/improving-dignity-in-care-consultation/>

³⁰ <http://www.endoflifecare.nhs.uk/>

still not able to access the care they needed.³¹ Following this the Government has committed to reform the funding of palliative care by 2015.

In 2011 the National Institute for Clinical Excellence (NICE) produced a quality standard for end of life care for adults (2011).³²

³¹ Hughes-Hallet Tom; et al; (July 2011) Palliative Care Funding Review: The right care and support for everyone

http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_133105.pdf

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³² <http://guidance.nice.org.uk/QS13>