

Western Morning News

THE VOICE OF THE WESTCOUNTRY

Debate on NHS funding must include all options

Making our National Health Service fit for the future is going to cost more money than is currently being spent. Few people disagree on that point. But the estimate that households could have to fork out between £1,200 and £2,000 a year more in taxes, to provide proper health care for an increasingly ageing population will have caused alarm in many homes across the Westcountry, where low wages and a relatively high cost of living, already leave many families short at the end of every month.

It is right, however, that people are told, in terms of hard cash that everyone can understand, the scale of the extra funds required to update and future-proof the NHS. There is only so much than can be achieved by improved efficiencies, new technology and other advances. In the end, as life expectancy rises and our medical expertise enables doctors to carry out more and more successful procedures, someone is going to have to pay more.

Dr Sarah Wollaston, Conservative MP for Totnes and the chair of the House of Commons Health Committee, is right to urge an all-party approach to tackling this issue. For too long the NHS has been a political football with both major parties using it to score points. That has never been a sensible way to bring

about improvements. As Dr Wollaston tells the *Western Morning News*, progress can only be made if MPs from all parties work together.

Dr Wollaston rightly concludes that people want to see fairness in the way the health service is funded with "those with the broadest shoulders carrying the biggest load." Raising taxes, however, might not be the only option available. Even done fairly, that puts extra strain across the working population. Dr Wollaston says the UK's spending on healthcare needs to match that spent in France and Germany. In both of those countries, there is an element of cost which falls on the patient, either through top up insurance schemes or directly. Even suggesting such a change to the NHS has, for years, been politically unacceptable in the UK. That is one reason we have seen the NHS fail to get the extra money it needs.

If we are to have a truly open and cross-party debate – without the risk that politicians will consider some suggestions just too "toxic" to even mention – then we need to get over that issue here in Britain and at get the possibility of patient contributions to primary health care onto the agenda. It may prove unwanted or unworkable. But given the importance of the issue, no solution should be ruled out from the start.



We want to hear your views

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On this day

1805: Napoleon was crowned King of Italy in Milan Cathedral.

1733: John Kay, Richard Arkwright's assistant, patented the Flying Shuttle to operate on Arkwright's spinning frame.

1865: The Confederate Army surrendered, ending the American Civil War.

1868: Irish terrorist Michael Barrett was hanged outside Newgate Prison for causing an explosion in London which left 13 dead – the last public execution in England.

1906: The rebuilt Vauxhall Bridge over the Thames was opened.

1913: Emily Duncan became

Britain's first woman magistrate.

1950: Petrol rationing ended in Britain.

1969: John Lennon and Yoko Ono began a 'bed-in' for world peace in a Montreal hotel.

Birthdays

Stevie Nicks, singer, 70

Pam Grier, actress, 69

Michael Portillo, ex-politician, 65

Lenny Kravitz, rock guitarist, 54

Helena Bonham Carter, actress, 52

Patsy Palmer, actress, 46 *pictured*



Thought for the day

Ephesians 1:7 – In Christ we have redemption through his blood, the forgiveness of sins, in accordance with the riches of God's grace.



Social interaction is key in helping people with dementia to live well, research shows

PICTURE: ALZHEIMER'S SOCIETY

How you can support people who have dementia to live well

Many small things can make a big difference, writes **Dr Anthony Martyr**

It is estimated that more than 850,000 people in the UK have dementia, a number set to increase to 2 million by 2051. This year, 225,000 people will develop dementia – one every three minutes. It's therefore critical that our research efforts don't focus exclusively on finding a cure. Even if it could be identified now, any treatment would only be likely to benefit people currently in mid life.

Dementia is now the most feared condition in the UK, but it is possible to optimise quality of life and support people to live as well as possible. Many people don't know how to react when they hear an acquaintance or loved one has dementia. I hope my research helps give people confidence to try ways to support those with dementia, as well as informing policy.

As part of the University of Exeter-led IDEAL study, a large-scale approach to identifying which factors can support people to live as well as possible with dementia, I recently led a review of all the available evidence in the field. It involved the four-year task of analysing 198 studies worldwide, encompassing information on nearly 38,000 people with dementia.

Amid this mound of data, one of the key factors that emerged as making a real difference was how socially active people were. Too often older people can be socially isolated, and we know this contributes to dementia risk. Maintaining social activity and being included and

involved in social activities were both lined to better quality of life.

Family, friends and neighbours can all contribute here, and many organisations run excellent initiatives such as memory cafes and day centres to meet this need. One arm of the IDEAL study is the A Life More Ordinary project where, photographer Ian Beesley, cartoonist Tony Husband and poet Ian McMillan worked with people with dementia who were involved in Age UK Exeter's Budding Friends allotment group. The group itself is an outstanding example of social interaction with real

together to establish personalised everyday goals, which could range from cooking food without burning it to successfully going to the shops or remembering neighbours' names. Therapists worked with family carers and people with dementia to establish ways to meet the goals that suited people's individual needs and abilities.

Good relationships with friends and family was another key element to higher quality of life. Interestingly, certain factors that can be seen as "life goals" had no bearing on differences in people's

residential care, receiving specialist person-centred care, which involves the individual in their own care plan, is linked to better quality of life, when combined with just ten minutes a day of social interaction. The average amount of social interaction in care homes is as low as two minutes a day, so even a brief daily visit could increase quality of life.

Unsurprisingly, our findings did not identify a "silver bullet" for supporting people to optimise their quality of life. As individual as we all are throughout our lives, so are our preferences on how we want to live in older age. However, our research did identify that a number of factors can combine in small ways to make a real difference to the extent to which people enjoy their lives. I hope this encourages people that making their own small difference can contribute to a real overall benefit. This could be through engaging someone in conversation or an activity they enjoy like a jigsaw, perusing a photo album or some gentle gardening. The key factor is taking the time and care to ensure that it is individualised to what the person enjoys in life.

Find out more about dementia research at Exeter at exeter.ac.uk/dementia/ or #exeterdementia on Twitter.

Dr Anthony Martyr is a founding member of the Centre for Research in Ageing and Cognitive Health at the University of Exeter



Monday:

BACK THE SOUTH WEST Action is needed now on skills and infrastructure, says Susan Davy

purpose, and the artists' project saw them produce works put on display outside Mothercare in Exeter's Guildhall Shopping Centre as part of Dementia Action Week.

People with dementia also valued being able to manage everyday activities. The GREAT Trial, which along with the IDEAL study is led by Professor Linda Clare at the University of Exeter, recently found that an approach called cognitive rehabilitation therapy can help people with early stage dementia significantly improve their ability to engage in important everyday activities and tasks. It involves working

quality of life – particularly education level, marital status and income.

People with dementia who had poor mental or physical health, who had unmet needs, who experienced pain, or whose carer experienced low well-being were more likely to have poor quality of life. We also found that quality of care and support was important. For instance, where a person with dementia is supported by a family member, quality of life is better where the family member feels more positive and better able to cope. Professor Clive Ballard, at the University of Exeter, has led studies concluding that people with dementia in