

Green councillors support NHS dentistry...

The market town of Stowmarket, Suffolk, became the first in the county to open a new NHS dentist surgery after a lengthy campaign by Green councillors.

WE WILL ACT TO PREVENT ILLNESS AND EXPAND PRIMARY AND COMMUNITY CARE

The Green Party takes a whole society approach to health. We care about what happens before you access the NHS. Get that right, and a lot else falls into place.

How to achieve this affects how we organise the health service. Those involved in primary and community care – GPs, practice nurses, district nurses, health visitors, midwives, counsellors, pharmacists, occupational therapists and all the other community-based professionals – are best placed to prevent ill health from developing in the first place. They can carry out checks and give advice or treatment to people who, for instance, are stressed, obese, inactive, or alcohol or nicotine dependent. Intervention by a trusted health professional can make the difference at an individual level. This can often be linked to local services, such as advice centres, opportunities for physical activity, lunch clubs and so on.

And it's primary care that is most important in dealing with problems before they become acute and require costly and distressing interventions such as admission to hospital. Local health professionals can also manage chronic illnesses such as diabetes, respiratory and cardiac conditions and mental illness in ways that are both more patient centred and less expensive than hospital-based care. They are best placed too to integrate medical and social care.

Where parents want it and there are no medical complications, normal childbirth could take place at home, increasing satisfaction for the woman in labour and reducing costs for the NHS. Similarly, many people would prefer to spend their last days at home rather than in hospital and a small increase in community care would save hospital beds and make the experience better for the dying patient, their family and friends.

We would therefore place more emphasis on prevention and on primary and community care and less on hospitals.

We would:

- Restore the proportion of *NHS funding for primary care from the present 7% to 2005 levels (11%)* and review the case for increasing it further; we would also ensure that the distribution of funding reflects the local need.
- Always consider whether services currently offered in or by *hospitals* could be transferred to the community.
- Look for *low-tech, local solutions* as well as technical advances.
- Encourage *cooperation* between all the primary care providers, e.g. pharmacies and hearing, optical and old age care organisations.
- Tackle *air pollution*, which causes an estimated 29,000 premature deaths each year in the UK. UK and EU standards on air pollution are out of date, and we would follow more rigorous standards that respect World Health Organization guidelines.
- Give special attention to the well-being of *children* from conception to 2 years old, *the first 1001 days*. For example, there should be national investment in evidence-based parenting programmes in order to improve the life chances of children and the well-being of families, and a free and universal early education and childcare service should be introduced.
- *Extend VAT* at the standard rate to less healthy foods, including sugar, but spend the money raised on subsidising around one-third of the cost of fresh fruit and vegetables. This could prevent around 5,000 premature deaths every year.
- Put a *minimum price on alcohol of 50p per unit*. This will reduce the physical, psychological and social harm associated with problem drinking, and will have only a negligible impact on those who drink in moderation.
- Put the UK at the centre of efforts to end the *AIDS, TB and malaria epidemics* and the threat they pose to the health of women, men and children living in poverty.
- Treat *drug addiction* as a health problem rather than a crime, making drugs policy the responsibility of the Department of Health in order to ensure that resources are targeted at supporting, not punishing, drug users.
- Adopt an evidence-based approach to the step-by-step regulation, starting with cannabis, of the drugs currently banned under the *Misuse of Drugs Act* as well as 'legal highs', with a view to introducing a system that reduces harms and brings the market under state control as a potential tax revenue generator. A Royal Commission or similar body would be established to review currently controlled drug classifications, within a legalised environment of drug use.
- Introduce a regime of presumed consent for *organ donation*, which respects the right of relatives to refuse consent.