

Macmillan's 2015 General Election calls

Why cancer matters in 2015

The UK is facing a cancer crisis. By the end of the next Government's term in 2020, almost 1 in 2 people will receive a cancer diagnosis in their lifetime. While the majority of these will receive a good standard of care, sadly this isn't the case for everyone. Macmillan is calling on the next Government to tackle this looming crisis in care.

Cancer survival rates in the UK are among the worst in Europe – not least because thousands of people are diagnosed too late. And many thousands more are treated with a lack of compassion or denied the right to die where they want.

If the current system is struggling to ensure everyone receives a good standard of care now, how will it cope as the number of people diagnosed with cancer grows by half a million over the next 5 years?

Next year's General Election is an opportunity to make sure the next Government tackles this looming crisis. Without urgent action, we will continue to fail people with cancer.

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Macmillan Cancer Support is calling on all parties to make three commitments in their manifestos to improve the lives of people affected by cancer.

1. The next government should commit to deliver cancer outcomes that match the best in Europe by the end of the next Parliament.

To improve the UK's cancer outcomes, we are calling for:

- I. The government should significantly reduce the number of people diagnosed in A&E.
- II. The government should reduce variation and inequalities in access to treatment, by publishing an action plan to tackle older people having some of the worst survival rates in Europe and ensuring that every cancer care team should comprehensively assess the needs of older people with cancer.
- III. The government should ensure that people with cancer are better supported after treatment has ended. This includes ensuring everyone diagnosed with cancer receives a cancer Recovery Package.

A recent major study of more than 29 European countries found survival rates for almost all common cancers are worse in Britain than the European average.

The next government can and must change this. Nearly 1 in 3 people with cancer in the UK die within one year of diagnosis, suggesting many are diagnosed too late. And too many cancer patients, especially older people, do not get the best possible treatment and care. Many patients also feel abandoned after their treatment ends.

To ensure that people with cancer in the UK receive care and treatment that matches the very best in Europe it is crucial that they are diagnosed at the earliest opportunity, able to access the best treatment that is right for them, irrespective of their age or where they live and are properly supported once their treatment has finished to recover more quickly and improve their quality of life.

2. The next government should commit to ensure that all patients, including cancer patients, are treated with the highest levels of dignity and respect and NHS staff should be supported to deliver this ambition.

To ensure all cancer patients are treated with the highest levels of dignity and respect and staff are fully supported to deliver this, the Government should:

- Actively **shine a light on poor care** and demand hospitals **take action** to improve by:
 - Publishing a clear comparison of cancer patient experience in hospital trusts across the country.
 - Requiring trusts to publish action plans addressing weaknesses in cancer patient experience and staff engagement and reporting annually on their progress.
- Make sure all frontline staff have **time to access training to deliver care with dignity and respect**. This could include courses on advanced communication skills to have sensitive conversations with cancer patients, their families and carers.

Almost 1 in 5 cancer patients say they are treated as a ‘set of symptoms’ rather than as a person, and more than 2 in 5 said doctors or nurses sometimes failed to ask what name they would like to be called whilst in hospital.

Evidence suggests this is linked to unhappy staff. In hospitals where staff experience discrimination and are not valued, people with cancer are up to 18 times more likely to receive poor care.

All organisations across the health service must take decisive steps to deliver a better patient experience as soon as possible. NHS leaders must treat patient experience and clinical outcomes with parity of esteem and recognise that both good patient and staff experience are vital for good clinical outcomes.

3. The next government should commit to ensuring everyone at the end of life is given free social care to support them to spend their final weeks and days in the place of their choosing.

To support people to die in a place of their choosing, we are calling for:

- I. Free social care for people at the end of life
- II. A package of health support to help people die in a place of their choosing

We only get one chance to get the care right for someone at the end of their life. Yet people are often failed by a system ill-equipped to allow them to choose where they die. A finding of the Palliative Care Funding Review (PCFR) was that providing free social care to people at the end of life is key to allowing them to die in their preferred place of care.

The vast majority of people (79%) want to die at home. However, less than a third (23%) are able to. Macmillan estimates that in 2012 36,400 cancer patients died in hospital in England when they would have preferred to die at home and if nothing is done then by 2020, another 1.3m people will also have their dying wishes ignored.

The Government stated in the Care and Support White Paper that it sees “*much merit*” in the principle of free social care. Paul Burstow, said in September 2014 on behalf of the Lib Dems: “*We will introduce free end of life care for those placed on their local end of life register*”.

Andy Burnham, Shadow Secretary of State for Health, has confirmed the Opposition’s commitment to the policy during his 2014 Conference speech: “*a right to be in your own home at the end of your life... with your care provided on the NHS and no worry about its cost.*”

The stumbling block is uncertainty around the cost, but a report from Macmillan estimates that £345m could be saved by supporting people to die in the community rather than in hospital.

Furthermore, free social care at the end of life is supported by a range of stakeholders including policy experts, health and social care senior decision-makers and the public. There are also already examples of the policy working well proving it is a realistic and achievable policy ambition for England even within current financial constraints.

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