

Northern Ireland Assembly Election 2022

Election Asks

Our priorities for improving
the health of our people

**TIME
FOR
ACTION**



Northern Ireland Assembly Election 2022 - Time for Action

The upcoming elections to the Northern Ireland Assembly come at a crucial time for the health sector. The COVID-19 pandemic starkly revealed the underlying weaknesses in our NHS. We are now coming out of that crisis and strong political and management leadership will be more important than ever.

How do the political parties intend to deal with health over the 5-year lifetime of the new Assembly?

The answer to that question will impact on the health of the people of Northern Ireland for decades to come.

In past decades, since the advent of devolution in 1998, all the parties have supported the principle of reform but often baulked at the reality of implementation. Politicians from all parties are too quick to pursue the populist defence of the status quo in their own constituency rather than seeking to explain both the benefits and necessity of change. The result is, at best, piecemeal and gradual change which is no substitute for real reform.

Now is the time for action:

1. COVID-19 has not only revealed the weaknesses of our structures; it has also shown how the service can manage significant change and challenges successfully.
2. There is a three-year financial settlement for public expenditure and a proposed significant uplift to health expenditure that should facilitate change. There may be a delay to the formal approval of the budget, but this should not preclude preparing for change.
3. Finally, we are entering a new Assembly term giving the new Minister sufficient time to implement change.

Northern Ireland Chest Heart and Stroke is a charity concerned with prevention, acute/hospital care and secondary/community care across cardiac, stroke and respiratory conditions. It follows that there are a large number of issues that NICHHS would seek to see addressed in the next Assembly.

Stroke

Reform and renewal of stroke services in Northern Ireland has long been recognised as essential, however, progress has been extremely slow. This means that people experiencing stroke are not getting the services they could and should be receiving. In 2021 NICHS launched our Stroke Manifesto to highlight the actions that need to be taken;

1. Northern Ireland must emulate the 'CVD Prevent' initiatives in Great Britain.
2. Health Service Commissioners must explore all opportunities to drive up detection rates especially with regard to High Blood Pressure.
3. All key stakeholders should work to adopt the recommendations of the AF Inquiry commissioned by NICHS.
4. Set a date for the introduction of 24/7 Transient Ischemic Attack assessment.
5. Set a target of 20% for thrombolysis treatment using 'clot-busting' medicines and a date for its achievement.
6. Highlight the achievement of the Thrombectomy service – and support its development.
7. Make a decision on the number and location of Hyper Acute Stroke Units.
8. Outline a timeline to make Early Supported Discharge available to all who can benefit from it.
9. A detailed response to 'Struggling to Recover' – the Stroke Association's study of how people with stroke are supported – including how NICE guidelines are to be met (*including a detailed workforce plan*).
10. A commitment to work with the voluntary sector to enable them to support the statutory sector, including details of how the cost of services provided by the voluntary sector can be properly reimbursed.



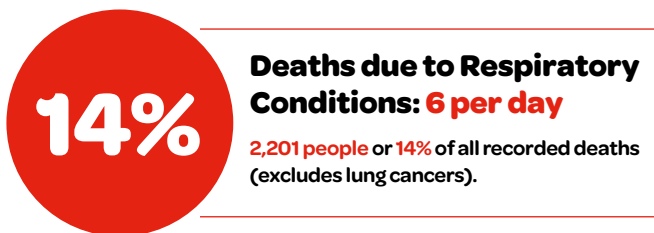
Respiratory

A broad spectrum of issues fall under the term respiratory including air quality, asthma diagnosis and management, and tobacco control.

Air Quality

NICHs is concerned about the current and future impact of air quality and pollution on our health and is calling for further actions and measures to limit these effects. Air pollution can exacerbate existing conditions, including **respiratory diseases**.

Over 165,000 people - or just under 8.5% of the population - are on registers for respiratory conditions.



NICHs supports the creation of a Clean Air Strategy for Northern Ireland and a broad range of measures to tackle air pollution including:

- Increased investment in public transport and the promotion of electric vehicles, cycling and walking.
- Measures to improve the insulation of homes, measures to discourage the burning of solid fuel and increased awareness and enforcement of Smoke Control Areas.
- More extensive monitoring, more planning of concerted action and better communication regarding air quality.



Tobacco Control

NICHs has been at the forefront of campaigns for stricter controls on tobacco for many years and welcomes the many measures introduced so far including the ban on smoking in cars with children. There has been a welcome drop in the numbers of people smoking but too many continue to smoke, particularly in deprived areas.

NICHs is calling for: a new, ambitious Tobacco Control Strategy with a focus on addressing health inequalities and which aims for less than 5% of people smoking by the mid 2030s.



Asthma and COPD

Over **182,000** people in NI have asthma and over **43,000** have COPD (*chronic obstructive pulmonary disease*). Like all people living with long-term conditions the challenges they face in accessing care and treatment have increased significantly due to the COVID-19 pandemic.

Respiratory conditions cause over **2,000** deaths in Northern Ireland and they cost the health system £250 million annually.¹ Latest available figures show that the number of hospital admissions in Northern Ireland due to respiratory conditions was **59,708** in 2019 – 163 per day, and **52,589** emergency admissions – 144 per day.²

¹ British Lung Foundation. BLF Bulletin – Summer 2020. 2020. Available from: https://www.blf.org.uk/sites/default/files/Bulletin-newsletter_Summer_aug20%20NI%20FINAL.pdf (accessed January 2022)

² Northern Ireland Chest Heart and Stroke. Statistics. 2021. Available from: <https://nichs.org.uk/research-policy/statistics> (January 2022)

Improvements in asthma care are needed in many areas including;

- Better diagnosis.
- Better management – including better inhaler technique training.
- Better awareness amongst patients e.g. of over-reliance on (*blue*) relievers, under compliance of (*brown*) preventer inhalers.
- Better awareness amongst the public about the risks posed by asthma attacks – asthma can kill.

COPD improvements required include:

- Proactive screening, early identification and early diagnosis.
- Improved access to spirometry.
- Prevention of exacerbations and disease progression.
- Financial support for voluntary and community sector services such as NICHs's Breathing Better programme.



Cardiac

Heart Matters

Approximately **225,000** people in Northern Ireland have cardiovascular disease and despite a steady decline in mortality since 2008, it still accounts for the cause of a quarter of all deaths in Northern Ireland – an average of ten people each day.

The development of cardiac services and patient support has not been at the pace that NICHS would have wished. Like many areas of our health service, the size and length of the current waiting lists are completely unacceptable:

- **Echocardiography** – **15,000** people are on the waiting list. **7,000** of these patients have been waiting over 26 weeks for this straight forward diagnostic examination.
- **Cardiology Outpatient appointments** – over **10,000** people are waiting for their first appointment with a consultant. Over **3,000** are waiting over a year (*up from 147 as recently as 2016*).
- **Input appointments** – nearly **2,500** people are waiting for their first inpatient appointment with a cardiology consultant. Nearly **700** are waiting over a year (*in 2016 this was 6*).

NICHS welcomed the current Elective Care Framework launched last year. The Framework sets a target for March 2026 of no patient waiting more than 52 weeks for a first outpatient appointment and inpatient/day case treatment; or 26 weeks for a diagnostics appointment.

NICHS calls on all political parties to;

- Endorse the targets in the Elective Care Framework and commit themselves to finding the funding required to make this happen.
- Pledge to replace the Cardiac Service Framework which lapsed in 2018.
- Put in place a long-term strategy to challenge the prevalence, impact and complications of Heart Disease, which affects over **18,000** people in NI.
- Increase the focus and resource available for Cardiac rehabilitation, addressing both workforce requirements in the statutory sector and recognising the role of the voluntary sector in developing support in the community.



Other issues

NICHS has outlined above our particular concerns across the specific areas of chest, heart and stroke. There are other cross cutting subjects we would like to see addressed.

Long COVID

COVID has had a huge impact on everyone. Thousands of people have been left experiencing a huge range of symptoms afterwards – Long COVID. NICHS recognised the need to support these people early on and we adapted our services to do this. We have to date helped hundreds of people affected by Long COVID.

More statutory services have been put in place in recent months but NICHS have concerns about both the level of service provision and the financial resource allocated to this area.



Prevention

Our health service concentrates on treating the ill. Everyone – individual members of the public, every part of society (*for example schools*) and every arm of government i.e. not just the Department of Health, need to consider what we can do to help people live longer and healthier lives.

For example, we must devote more attention to detecting high blood pressure, high cholesterol and atrial fibrillation. The Health Trusts and the Public Health Agency must lead the charge on detection – working closely with partners across the community.

NICHS believes much more can be done to detect the **80,000** plus who are unaware they have high blood pressure and to detect the **10,000** plus who are unaware they have atrial fibrillation – a quarter of all strokes are AF related.

Schools must address the health of their pupils and do more. This must include continuing to improve the food and drink pupils consume, addressing their awareness of issues such as tobacco and asthma, and considering how they improve the physical literacy of all – not just those pupils involved in sports.

The abuse of alcohol is rightly being addressed as part of a recently adopted Substance Use Strategy. Responsible consumption of alcohol is vital to healthy living. We believe there is strong cross party and community support for the introduction of Minimum Unit Pricing as part of moves to tackle dangerous levels of consumption of very cheap alcohol. Tackling inequalities and root causes of poverty must also be addressed, as a cross department, government and health priority to improve health lifestyles and outcomes for all.

Almost 90%

of NICHS's care and prevention services and research are funded exclusively by public donations.

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