



HEALTH

Values and Principles

HE100 Health is the condition in which individuals and communities achieve their full physical, intellectual, social and spiritual potential. Health for individuals is only possible in the context of a healthy environment and society. The healthy society is one which guarantees a safe and clean environment; material security for all its citizens; good work; adequate housing; a balanced and unpolluted diet and clean water; appropriate education; a safe transport system; accessible and sensitive public services; equality of opportunity; and a secure present and hope for the future. All Green Party policies are designed to promote the health of individuals, communities and society.

HE101 Ill health exists at many levels: a diseased organ within a stressed person, a sick individual within an uncaring society, or a sick society within an overstrained and collapsing ecosystem. To achieve improved individual, social and environmental health, effective interventions at all levels are needed. Current theory and practice place too much emphasis on interventions at the biochemical and individual levels, too little on the social and ecological. Achieving better health requires a balanced, integrated and holistic understanding and approach.

HE102 Health services are not in themselves a major determinant of the public health. Increased investment in health services alone will generate little improvement in the conventional

indicators of health and disease. Furthermore, expansion of health services on the basis of indiscriminate economic growth will inevitably be counterproductive, since such growth itself damages health at the individual, social and ecological levels. However, willingness and ability to care for its vulnerable members are essential features of a compassionate society.. Free market mechanisms cannot adequately meet health needs, or effectively constrain costs. Proper healthcare for all and the responsible use of resources both require the continued provision of well-financed and publicly-funded health services.

HE103 Health services can create dependence on the part of users, which is itself unhealthy. Individuals can through properly informed choice, and when adequately supported, acquire much greater responsibility for their own health, and the health of their families. However, true freedom of choice cannot be exercised without the economic and political power to choose, at present denied to the majority.

HE104 Healthcare is not a commodity to be bought or sold. The National Health Service must provide healthcare, free at the point of need, funded through taxation. It must be a public service funded by, run by and accountable to local and national government and devoid of all privatisation, whether privatised administration, healthcare provision, support services or capital ownership. The NHS is concerned with healthcare provision and should not be

subject to market forces either internal or external.

Aims

HE200 To promote public health through policies designed to secure a healthy urban and rural environment, healthy work, healthy agriculture and food, healthy education, a healthy transport system and healthy local economic development. (FD300s)

HE201 To devise new economic models using quality of life and health indicators as the target variables to be optimised. Policies to achieve these targets will be integrated into overall economic strategy. Health-promoting policies will be mediated by social investment at national, regional and community levels.

HE202 To develop a new public health consciousness, which, through individual and collective action, will challenge vested interests and promote the personal, social and political changes needed to achieve improved states of health.

HE203 To develop health services which place as much emphasis on illness prevention, health promotion and the development of individual and community self-reliance as on the treatment and cure of disease. Such services will of necessity be empowering, participatory and democratic and their development will be guided by users' own perceptions of their health needs.

Policies

HE300 Health services must be effective, efficient, comprehensive, accountable and

equally available to all. Effective health services will deploy a broad range of interventions, operative at many levels: pharmaceuticals, surgery, psychological therapies, complementary and alternative medicine, and community and social interventions will be used where appropriate. All services will be available without charge at the time of need.

Community Health Centres

HE301 Funding will be diverted away from centralised facilities towards community healthcare, illness prevention and health promotion. Community Health Centres will be the focal points for self-help and community-based initiatives and will also provide a full range of services including primary healthcare, and health education and health promotion programmes. A variety of specialist services, in particular midwifery, obstetrics, family planning, counselling and psychiatry, will also be available. The midwifery and obstetric service will be such that a real option of home delivery is created. To permit the availability of the widest possible range of services and interventions, staff will be organised into multi-disciplinary teams. The public will be provided with easier direct access to nurse practitioners and other non-medical health workers, including social workers, counsellors, clinical psychologists and complementary therapists. (see also [DU411-412](#))

HE302 Community Health Centres will provide walk-in facilities for patients with minor injuries and illnesses.

Maternity Services

HE303 All women should be entitled to the highest standards of care during pregnancy and birth, and post-natally. We will ensure that women are given the information they need to make appropriate choices about how they wish to give birth, and that a full range of options, including home birth and a range of styles of hospital delivery, is made available to all women.

HE304 The incidence of medical intervention in childbirth has escalated in recent years, particularly the rate of caesarean sections, which are expensive and, when not medically required, risky. We will work to reduce the number of interventions in childbirth, and change the culture of the NHS so that birth is treated as a normal and non-medical event, in which mothers are empowered and able to be in control.

HE305 All women will be entitled to the care of a single midwife through prenatal care, birth and the first month of post-natal care, in line with the model of care currently provided by independent midwives. This will be made possible by initiatives to improve the recruitment and retention of midwives.

HE306 We will ensure that the NHS embraces the current quality and style of care as offered by Independent Midwives so that they are able to work within the NHS system and offer this type of care to all women in a single tier system. We shall ensure that midwifery training places are increased to meet medium and long term needs. This will be achieved by: ensuring that terms and conditions for midwives are improved, increasing investment in midwifery services to ensure that these policies are delivered,

specific funding for midwife training along with targeted recruitment drives, and ensuring that the culture of midwifery services is supportive for both mothers and midwives.

HE307 All women and their partners will be offered a full range of psychological support after birth to help deal with trauma and post-natal depression. The Green Party will ensure that baby clinics are open for adequate hours, so that women can get access to health visitors and take their babies for regular check-ups at a location and time that is convenient for them.

HE308 Maternity units should be sufficient in number and located so that all women are within reasonable reach of one. Special Care Baby units will be expanded in line with the increasing number of babies that need intensive care, but special attention will also be given to preventative efforts to reduce the number of low birthweight and other problems that contribute to this need. Funds allocated for maternity services should be ringfenced to ensure that they are used for the intended purpose.

HE309 Throughout maternity services the focus will be on compassion and on providing a safe, supportive environment. Complaints will be treated with sympathy, and systems arranged to ensure that complaints can be registered easily and are investigated properly, challenging the 'conspiracy of silence' that discourages women from speaking about their traumatic experiences for fear of frightening other women.

Community Service

HE303 Increased and protected funding of community services will enable healthcare as far as

possible to be provided at home or in community-based facilities. Community services for frail elderly people and disabled people, including those with enduring mental and physical health problems or with learning disabilities will be increased. This will ensure that everyone who needs it will receive high quality care and support, and will put them in the position to lead as independent and self-determined a life as possible based on their individual needs and circumstances. Transfer of patients from hospital to community care will be matched by an appropriate allocation of resources.

Hospitals

HE304 Primary and hospital care will be more closely integrated. District staffing structures will be reviewed, with the aim of integrating hospital-based specialists into primary care and community health workers into hospital practice. The hospital programme will emphasise the development of appropriately sized district and community hospitals, with a reduced role for larger regional centres. However, some specialised services will continue to be provided on a regional or sub-regional basis.

HE305 Hospitals will focus on services for patients needing inpatient care. Accident and Emergency Departments will be for emergencies only with care for minor illnesses and injuries provided for by community health centres.

HE306 The Green Party is opposed to the development of "Foundation Hospitals" which, although argued to be locally controlled, could actually result in reduced democratic accountability given that they will

be unanswerable to parliament or local authorities.

Foundation Hospitals are in fundamental opposition to the Green Party policy of the public health service remaining fully funded by public taxation (see [HE335](#)), given that they are required to produce a profit and are able to seek commercial partnerships. This is likely to result in charging for ancillary services (disadvantaging the worse off), the reduction of medical education and training, the non-treatment of specialist or rare illnesses and early discharges. Foundation Hospitals risk undermining the principles of the NHS, creating a two- or multi-tier system of uneven provision. This also threatens de facto privatisation because the amount of $\frac{1}{2}$ commercial borrowing and diversification away from key NHS functions will be governed only by the interpretations of the regulator and not by clear rules.

We would abolish Foundation status, fully reintegrating any such hospitals into the NHS system.

Occupational Health Services

HE307 The statutory requirements that workplaces provide occupational health services, with standards of training and equipment appropriate to their particular hazards, will be strengthened. The criteria for such provision will be made as clear and as simple as possible, and loopholes permitting unscrupulous employers to minimise provision will be closed. Particular support and attention will be given to the occupational health needs of employees in small organisations and firms. The role of Health and

Safety inspectors in enforcing these requirements will be strengthened and enlarged. The provision of basic self-help medical training to all workers will be encouraged and we shall require employers to allow time off work for such training.

Health Promotion

HE308 Health education and health promotion will become central aspects of the practice of the majority of health workers, who should take part in health advocacy in all areas of local and national policy where health is at issue. In particular, health workers should promote community health initiatives. Closer working relationships will be developed between health workers, the voluntary sector, communities, families and individuals. (see [FD300](#), [DU410](#))

The Green Party will set up within legislation the practice of patient empowerment, with the right of individuals who are to receive treatment to have full and detailed knowledge as to their condition and the range of treatments available, both conventional and complementary/alternative. The role of Health Promotion practitioners would need to be extended (with appropriate timing) so that they can be in consultation with other health professionals to enable individual patient empowerment to operate effectively.

Patient empowerment would eventually encompass choice of treatment backed by NHS funding for patients' preferred treatment whether it be within the conventional framework of treating an illness and/or utilising alternative therapies. This would include collaboration between the Health Promotion practitioners and NHS treatment professionals.

(see also [HE307](#) on occupational health services)

Health in Schools

HE309 The Green Party believes much more can be done in schools to prevent illness by caring for children and educating children about health. We lament the disappearance of the School Nurse and would therefore bring back a dedicated NHS School Nurse in every school, both at primary and secondary level. Qualified nurses would be specially trained to give lessons in health awareness, including diet, as well as providing an on-site primary healthcare service to all pupils and students.

HE310 The Green Party believes a good diet is so important in the promotion of good health that all schools will be obliged to have their own kitchen so as to be able to provide for each child a freshly prepared lunch each day, using fresh, organic and local produce wherever possible. Food provided by schools must include both vegetarian and vegan options. $\frac{1}{2}$ We would continue the school Fruit and Vegetable Scheme, with a strong preference for organic and local produce. Such meals will be free to all children and will be paid for out of increased taxation: we believe that the consequent improvement in health will dramatically reduce the costs of illness and social care to the NHS and other public services. Junk foods and vending machines will become unavailable in state schools."

HE311 We believe physical exercise is beneficial to the promotion of good health development, and so more time and resources will be made available to allow children to participate in sports and games at school, ideally on a daily basis.

Research

HE312 The Green Party will support research into healthcare at all levels, but especially into public health, epidemiology, nursing and community care, and particularly in the community and primary care settings.

The Green Party will set in place methods whereby statistics necessary for research into assessment of health risks (particularly in areas where heavy, chemical and nuclear industries are located), are available with the maximum accessibility for all academic, commercial or individual use. All existing health statistics to also be made freely available.

The Green Party will introduce procedures for dealing with medical/scientific personnel whose positions in the research and/or licensing system give rise to conflicts of interest.

The Green Party will further introduce procedures for assessing existing research which has led to licensing of drugs where there is a case for stating there has been a conflict of interest affecting such original research which in turn led to licensing of drugs.

The Green Party will prioritise research and appropriate funding into the environmental causes of cancer. Treatment research will be promoted with particular emphasis on methods of integrated conventional and holistic treatments. We will encourage the development of a wider and more relevant range of research techniques, including methods appropriate to the assessment of complementary therapies.

Steps shall be taken to ensure that medical research should meet the identified medical needs of

society, and to make medical research institutions democratically accountable. We shall seek to end the situation whereby commercial investment determines research programmes in universities and public institutions. Attention shall be given to basic health research areas which have been neglected in the past.

Rigorous assessment, monitoring and audit of new technologies will be undertaken prior to their general application. The practice of vivisection is of questionable value and incompatible with ecological philosophy. (see [AR407-8](#) & [FD400s](#))

Environmental Illness

HE313 Where there is compelling evidence that incidence of an illness in society has a strong environmental factor, that illness shall be designated a notifiable disease. Cancer, asthma and ME/CFS shall be among those included on this list. This information shall form the basis of statistical research into the effects of polluting our air, water and food supply. As many synthetic chemicals bio-accumulate and are hazardous to health, a long-term strategy will be developed for stopping their production and use, beginning with the most dangerous, the most unnecessary and the most easily replaceable. This includes many fat-soluble chemicals, which become highly concentrated in breast milk, and are therefore a serious health risk to infants. Where this conflicts with existing "Free Trade" treaties, we would press for change to the treaties or withdraw from them.

The Green Party proposes that the right to legal aid for personal injury cases shall be maintained, in the interest of public health and

safety, and in accordance with the "Equality of Arms" clause in the European Convention on Human Rights.

Assessment of Medicines

HE314 We shall improve the protection provided under the law to users of medicines. Prescribed and over-the-counter medicines will be monitored more rigorously with regard to both efficacy and toxicity. Appropriate methods of assessment will be developed for both synthetic pharmaceuticals and natural medicines, involving practitioners expert in their respective uses. Assessment will not be dependent on commercial interest in production. (see [AR407](#)) All information gathered during the process of assessment and licensing shall be publicly available.

Assessment of Treatments

HE315 We shall identify health areas where existing treatments available under the NHS are either so expensive that they are unsustainable, where existing treatments have a poor record of restoring patients to health or where existing treatments pose a significant health risk in themselves. These shall become designated priority areas for assessing the comparative benefits of current health service practice and other treatments, currently available privately. This knowledge shall be used to draw safe, effective, treatments into NHS provision.

Prescription Charges

HE316 Prescription, and other charges, are wrong in principle, unfair in practice, and generate little income for the Health Service. They will be abolished as

soon as possible. The taxation system will require adjustment to compensate the Health Service for the revenue lost.

Natural medicines

HE317 When assessing the degree of control required over the availability of medicines, a balance must be reached between the right of the individual to freedom of choice, and the duty of society to protect the individual from the consequences of unwise choices. We are concerned to protect users from unanticipated adverse effects of novel pharmaceutical compounds, some of which may not be evident until the drug has been in use for many years. The Green Party proposes the founding of a regulatory agency with responsibility for natural medicines, including nutritional supplements, medicinal plants and herbal remedies, essential oils and homeopathic remedies. This agency should be founded on the principles of:

1. Freedom of information and full labelling of ingredients.
2. High standards of safety in production methods.
3. No animal testing.
4. Strong encouragement towards organic production.
5. A ban on GM ingredients.

However when the drugs have been in use for many generations, as with many natural medicines, the need for statutory control is diminished. Measures will therefore be taken to protect the availability of established herbal and homeopathic remedies, subject to basic safeguards.

Synthetic Pharmaceuticals

HE318 Novel compounds will not be introduced into general use

unless they can be shown to have significant advantages over existing drugs. Limited list prescribing will be extended across the full range of pharmaceuticals. The direct advertising of prescription only medicines to the medical profession will cease. Information to the medical profession will be the responsibility of medical schools and independent authorities with no vested interest in companies which manufacture or market pharmaceuticals.

HE319 The Green Party recognises the huge profits made by the drug companies out of the NHS. This is often through a form of cartel pricing, and we do not believe it is right that the National Health Service as a public health service should have to pay unfair prices. Therefore we will set up an independent NHS Pharmaceutical Body with power to set the price of drugs provided to the NHS. The Body will be composed of doctors, healthcare professionals, economists, and a legally trained chairperson, which will look at the cost of research and development in drugs and their manufacture, and receive evidence from chemists, the pharmaceutical companies, and other countries' health services. The Body will then decide what is a fair price for a drug which is to be provided to the NHS by the manufacturer, and that will be the price which the NHS will pay for the drug.

Abortion

HE320 The fact that the number of abortions carried out in England and Wales continues to rise should be of concern to all. Given the health risks associated with any medical and surgical procedure and many people's moral discomfort with induced terminations, it is entirely

understandable that many wish to see this number significantly reduced.

HE321 The Green Party recognises the problems caused by unwanted pregnancies and supports a multi-policy strategy to reduce them, including:

- a. ensuring adequate sex education in all schools (see [ED042](#)). This should be done at a sufficiently early age that children should be fully aware of the potential consequences of sexual activity before they are likely to become sexually active. Schools should also teach life skills, including those relating to caring for and raising children, so that young people feel better prepared to become parents when the time is right for them.
- b. ensuring adequate financial and social support for parents, particularly lone parents and those with disabled children, so that women do not feel pressure to terminate a pregnancy purely because they would be unable to make financial ends meet (see [EC730-733](#) and 'Social Welfare').
- c. ensuring adequate provision of free family planning advice by properly trained health workers and counsellors (see [HE301](#)) and the provision of free contraceptives. To ensure proper protection of their rights and wellbeing, children under the age of consent should feel fully able to seek such support and facilities without their parents necessarily having to be informed.

HE322 The Green Party will support a change in the law to remove the requirement for two doctors to approve a woman's decision to have an abortion, and will support a change in the law

to allow the procedure to be carried out by appropriately trained nurses and midwives up to three months of pregnancy. It will support NHS provision of such nurses and midwives and will support a widening of the number of locations at which an abortion can be carried out. This should reduce delays in service provision and prevent access being obstructed by doctors with personal anti-abortion views. The Green Party will not support any change to the current laws on abortions which would aim to make it more difficult for women to obtain them. Such a change in the law would do nothing to address the underlying factors which lead to women seeking abortions. Instead, it is likely to drive them into going elsewhere for the operations - either overseas or to illegal practitioners in this country - which will increase both the distress and the health risks for those involved.

HE323 The Green Party recognises that the decision whether or not to continue with a pregnancy is never undertaken lightly. The Green Party believes that counselling should be offered to every woman considering an abortion. However, the ultimate decision about whether or not to terminate a pregnancy should always lie with the pregnant woman who has to deal with the consequences of that decision.

End of Life Care

HE324 The Green Party recognises that medical decisions taken towards the end of a person's life should never be undertaken lightly. We believe that when the quality of life is poor (e.g. due to severe dementia) life prolonging treatments such as influenza vaccines and antibiotics should not be given routinely

without consideration of the whole situation including the wishes of the patient and relatives.

HE325 Many medical interventions provided at the end of a person's life will both relieve suffering and hasten death. We recognise that this can cause concern amongst health professionals and the public and will introduce clear guidance to protect all parties.

HE326 Assisted death presents moral and legal concerns to health care professionals and the public. We believe that people have a right to an assisted death within the following framework:

- The appointment of an independent advocate must be made when either diagnosis of terminal illness is made or the person receiving care expresses the desire to end their life
- Counselling must always be offered to every patient considering an assisted death
- Alternatives, such as palliative care must be discussed with the patient
- The patient's ability to make the decision must be established by joint assessment of two independent doctors, one of whom should ordinarily be the patient's GP, unless impractical in the circumstances, in which case it may be the patient's medical consultant, one of which must be a psychiatrist and a third independent registered health or social care professional who has undertaken approved training in this area and who has no prior knowledge of the patient.
- This decision must take into account evidence provided by the independent advocate.

- Treatable illnesses that may impinge upon the decision making ability, e.g. depression, must be treated and excluded from the rationale for requesting an assisted death
- The patient has the right to appoint individuals either during or prior to the process who will have access to their medical and other records and whom they wish to be involved in discussions
- The patient's informed consent must be clearly documented, full discussion of the outcomes of both the illness and the assisted death must also be provided in a language and form understandable to the patient
- The patient's close family should be involved in all discussions
- There should normally be a waiting period of at least 7 days, set by local policy, for the patient to reflect on their decision.
- Patients could orally revoke the request at any point
- Healthcare professionals can refuse to be party to any stage of assisted deaths for their own moral reasons
- Assisted death will be notifiable

We will introduce legislation based on this framework to ensure the protection of all parties.

Mental Health

HE327 Our competitive and highly stressed society results in increased numbers of mentally distressed people. Present methods of approaching this problem are inadequate, and sometimes conventional medical intervention escalates people's problems.

The particular vulnerability of mental health sufferers in society during illness and afterwards means that their problems become reinforced through lack of access to employment, adequate housing and social isolation.

The Green Party will legislate to protect those suffering mental distress from discrimination wherever it may occur. It will further legislate to prevent the "demonisation" of clients of the mental health services in particular by the media. It will legislate to provide those suffering mental distress with the opportunity to draw up individual "advance directives" thereby securing their treatment of preference in a crisis.

It will further legislate for the legal rights of individuals, once they have received a diagnosis, to be given full written details of that diagnosis appropriate to their ability to understand, together with information about relevant support/self help groups. Similar key written information being provided to the carer(s) of that person about their particular condition.

The Green Party will also legislate to have fast track reassessment by independent specialists of an individual's long term drug intervention particularly for those on multiple drug treatments over one year, should they/their carer(s) so wish.

People using mental health services and their carers should have the right to information at the point of diagnosis relating to complementary/alternative treatments and should be able to access these via the NHS as appropriate.

We will procure the systematic review of evidence to establish the relative usefulness of various psychological therapies, such as

Cognitive Behavioural Therapy, Imaging and relaxation with a view to the funding of techniques which are shown to be effective.

We will encourage a systematic and inclusive review of environmental components of mental illness, including nutrition, environmental agents, and food intolerance.

We will encourage research into positive mental health ("happiness"), with particular reference to economic, social and environmental conditions that foster such happiness.

Dentistry

HE328 Essential dentistry, including check ups, is necessary basic healthcare, and should be provided free under the NHS.

HE329 The Green Party recognises the great loss of dentists to the NHS in recent years, and so we will discuss with the Royal College ways of encouraging dentists back into NHS practice.

HE330 The Green Party will support measures to prevent dental health problems including:

1. the promotion of good oral hygiene
2. the use of tooth cleaning products made from natural ingredients
3. a reduction in the consumption of high sugar content foods and drinks

HE331 The Green Party is opposed to the artificial mass fluoridation of drinking water which is being promoted by the Government. There is conflicting evidence on the benefits to dental health of this practice and major concerns on the cumulative negative wider health effects of total ingestion levels of fluoride. There are further concerns on the

links with the chemical industry that supplies artificial fluoride and the compulsory nature of its addition to drinking water that denies consumers choice.

HE332 All mercury amalgam fillings are subject to constant erosion and the mercury released can accumulate in the body, potentially causing or aggravating a wide range of serious illnesses. The Green Party would therefore ban immediately the use of mercury in dental materials. In addition:

1. Patients should be given enough information about their treatment to enable them to give informed consent.
2. A range of non-mercury filling materials should be available to all patients, which should be bio-compatibility tested for each individual.
3. Investment should be provided to train and equip all dentists to use alternative filling materials successfully.
4. Investment should be provided to continually improve safety and effectiveness of alternative dental materials and procedures.
5. Dental restorations and appliances containing mercury, nickel and Bisphenol-A should be banned immediately for children under eighteen. Because minors have no right of self determination, our society should take responsibility for applying the precautionary principle on their behalf.

Administration

HE333 The Green Party believes it is wrong in principle that private health care companies and agencies should be able to employ or use staff who have been expensively trained by the

NHS without contributing something to the cost of that training. Therefore companies, including pharmaceutical companies, employing or using NHS-trained healthcare professionals outside the NHS will have to pay an additional training tax. This will take the form of a levy for each person-hour during which they employ or use NHS-trained staff outside the NHS. The proceeds from this levy will go directly into the NHS Tax which the Green Party is going to create.

HE334 To promote decentralisation and accountability, Primary Care Trusts will be supervised by, and accountable to, elected Local Government. Co-operation between Primary Health Trusts to improve services will be encouraged. The role of Patients' Forums as users' advocates will be developed to provide greater assistance to individuals in difficulties or disputes with the health services. Legislation will be introduced to allow individuals access to their medical records.

Funding

HE335 Health spending in the UK needs to reflect the needs of the country and should be maintained at around the average in the European Union. The party will continue to support the principle that the NHS is a national service, free at the point of entry and fully funded by taxation.

HE336 An NHS Tax, earmarked to increase direct funding of the NHS, shall be introduced as part of general income and other taxation. We believe this will have wide support.

HE337 The Green Party seeks to devolve more decision-making to local level, and widen local tax-

raising powers. As those proceed, local choice and accountability will be increased by part of the NHS Tax being raised by Local Government for NHS provision for the local area.

HE338 Health Service spending will be reviewed regularly, with a view to increasing the resources invested in health promotion, illness prevention, community care and community development, relative to spending on curative interventions.

Internal Market / NHS Trusts

HE339 The creation of NHS Trusts erases the democratic accountability of local NHS services. The rights of those who work in the NHS, especially to participate in its development and improvement, were widely undermined. Market forces cannot allocate healthcare fairly, nor even efficiently. The internal market has wasted badly needed resources on administration, and reduced the efficiency and morale of the whole system. The internal market opens the long term possibility of further privatisation of the NHS. The internal market should be wound up and replaced with clear financial and service accountability of decentralised service units to regional assemblies within a single corporate whole.

NHS workers

HE340 For too long the workers in the NHS have been underpaid, undervalued and ignored. They remain some of the most overworked in our society despite the importance of their day-to-day decisions and actions. The multitude of local staff contracts and conditions will be simplified within a clear regional structure. Privatisation of ancillary services

will cease and be reversed, so that all NHS workers of a particular grade can expect the same terms within the same region.

Collective bargaining arrangements will be strengthened and honoured. A particularly urgent commitment will be to reduce all staff working hours to a maximum in line with the Working Time Directive.

HE341 The Green Party deplors the poaching of healthcare professionals from other less privileged countries. Conditions and wages of nurses, and also doctors, need to rise to encourage more British people to train as nurses and doctors.

The NHS will not be allowed proactively to recruit non-British healthcare staff overseas by any means, including overseas advertising or direct approaches.

The Green Party will actively seek ways of ensuring that healthcare skills are shared between countries including by offering exchange opportunities to students and qualified staff.

Demand and Supply Management

HE342 Demand management will be maximised through prevention of illness and appropriate care of the chronically ill. Demand for hospital services will be managed through the best use of community services and through caring for patients as close to home as is safely possible.

HE343 Education of patients will be used to limit demand on healthcare services. National campaigns will encourage people not to automatically seek healthcare with self-limiting conditions like common cold, cough, sore throat, diarrhoea and vomiting, and flu-like illness. Information will be available to

help people self-manage these conditions, and to recognise when they should seek help. There will be a strong message to discourage the practice of going to work, or to any other social situation, when a person is suffering from a contagious illness such as flu-like illness.

HE344 Because of the escalating cost of healthcare there will always be insufficient funds to meet expectations of patients. This necessitates rationing. Where necessary this should be open and democratically accountable, rather than arbitrary and unfair as it is now.

Private Healthcare

HE345 The Green Party is opposed to private health provision in principle, Greens are opposed to a transfer of resources away from the public health system which is available to all. While private health insurance still exists, it should be a taxable employment benefit where offered.

Cloning and Genetic Manipulation of Embryos

HE346 Experiments on human embryos could have unforeseen outcomes harmful both to individuals and to society. The Green Party believes that an immediate international ban should be placed on all cloning and genetic manipulation of embryos, whether for research, therapeutic or reproductive purposes.

However, the use of 'adult' (or 'mature') stem-cells has promise for both research and therapeutic purposes and does not involve the same risks and ethical issues as embryonic stem-cells. The Green Party would therefore allow such use of adult stem-cells, subject to the precautionary principle.

Opposition to 'third way' health reform

HE350 We actively oppose and seek to reverse any public service health policy reforms which lead to:

- a. a two- or multi-tier health service with uneven standards and service provision,
- b. further disconnection of the service from public accountability - via local, regional or national government,
- c. the undermining of a fully integrated NHS, publicly funded and committed to high quality universal provision with free services at the point of use, or
- d. creeping privatisation.

Health chapter updates:
Autumn 2009 - HE335 replaced with new wording
Spring 2009 - HE303-309 Maternity Services added. Completely renumbered chapter from HE300 to end
Spring 2008

The following additional policy statements can be found in the Green Party Record of Policy Statements (RoPS) on [Health](#):

- [RHE97.1 Public Health \(Spring 1997\)](#)
- [RHE03.1 Water Fluoridation – the Threat to Health and Civil Liberties \(Spring 2003\)](#)
- [RHE04.1 Show Fluoridation the Yellow Card \(Spring 2004\)](#)
- [RHE06.1 Support for NHS Logistics Strike \(Autumn 2006\)](#)
- [RHE07.1 Downgrading of Mid-West Wales hospital services \(Spring 2007\)](#)
- [RHE07.2 NHS Pay Settlement \(Spring 2007\)](#)

- [RHE08.1 Call for Old Fashioned Dental Hygiene \(Spring 2008\)](#)
- [RHE08.2 Water Fluoridation \(Spring 2008\)](#)
- [RHE08.3 NHS Privatisation \(Spring 2008\)](#)
- [RHE08.4 Abortion in Northern Ireland \(Autumn 2008\)](#)
- [RHE09.1 UK Medical Research Centre \(Spring 2009\)](#)