



10 DOWNING STREET
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THE PRIME MINISTER

18 August 2009

Dear Mr Ford

I am writing following the recent campaign by the Parkinson's Disease Society for Fair Care for Parkinson's, which was launched in response to a report by the All-Party Parliamentary Group for Parkinson's disease. I would like to assure you that the Government welcomes the work undertaken by the Parkinson's Disease Society, and supports this inquiry into access to health and social care services for those living with the condition.

Your report raises a number of important issues for people with Parkinson's disease, which are common to people living with other neurological conditions. I note that it is addressed to all UK Governments. As you will be aware, health is a devolved matter in the UK, and therefore I am replying regarding the situation in England, and you may wish to approach the other devolved administrations directly for their response regarding the situation in Northern Ireland, Scotland and Wales.

Officials within the Department of Health are currently working in partnership with stakeholders to develop further plans to progress implementation of the National Service Framework for Long-term Conditions. This work will identify areas of action for the Department of Health, local health and social care communities and the third and voluntary sectors and should help support the improvements to Parkinson's disease services that you seek.

To support the better commissioning of neurological services, the Department of Health commissioned a learning event, which was delivered by the Care Services Improvement Partnership (CSIP) in November 2008, for voluntary sector organisations on how to achieve better services locally. This is being followed up by a series of ten

regional workshops, 'Levers for Change', to enable third sector organisations to engage with commissioners. These workshops will facilitate work between stakeholders and NHS commissioners around World Class Commissioning Competencies and will support local improvements to commissioning for neurological conditions.

Through the World Class Commissioning process, Primary Care Trusts (PCTs) will undertake a Joint Strategic Needs Assessment with their local authority partners to assess the priority areas for investment in services depending on local need. Additionally, the World Class Commissioning process requires PCTs to follow a more formal process than previously regarding the amount of investment required in comparison to the expected health benefits.

We have commissioned the Long-Term Conditions Delivery and Support Team (formerly the CSIP) to deliver a series of regional events that bring together commissioners, the voluntary sector, carers and service users to improve communication and ensure better partnership working in the commissioning process.

From April 2009, the Care Quality Commission took over from the Healthcare Commission and will consider, in discussion with stakeholders including the National Institute for Health and Clinical Excellence (NICE), how to take account of NICE guidance as it develops its compliance criteria.

We recognise the important role that specialist nurses play in co-ordinating the care of those with Parkinson's disease and in providing a reliable source of information and support. Such nurses are instrumental in raising awareness of education and training for healthcare professionals. There is no doubt that they are making an impact by supporting and improving the lives of people affected by Parkinson's disease. However, the responsibility for specific decisions on staffing numbers and skill mix rests with the local NHS. We have given local NHS organisations the freedom to decide how best to use their resources, in consultation with local stakeholders, as they know the health needs of their local communities best.

Workforce planning is a matter for local determination as workforce planners are best placed to assess the neurology needs of their local populations. The Department of Health continues to ensure the

mechanisms are in place to support this. There has been recent encouraging progress in ensuring we have an adequately qualified workforce in neurology:

- The number of medical staff in neurology has increased from 638 in 1997 to 986 in 2007, an increase of more than 54 per cent.
- The number of consultants in neurology has increased from 278 in 1997 to 539 in 2007, an increase of more than 93 per cent.

However, we believe increasing the number of consultants is only part of the solution. We need better communication between GPs and neurologists, help for people to manage their own conditions and live a normal life rather than being permanent patients, better information for patients and families about their conditions, and improved community services to ensure people can have a better quality of life at home, not in hospital. We need to improve independence and quality of life.

Finally, I would like to thank the Parkinson's Disease Society for highlighting the variation in access to the services across the country, and for the important work they have done over the years in raising awareness of this condition.

I am copying this reply to Baroness Gale.

Yours sincerely

A handwritten signature in black ink, appearing to read "Alan Burt". The signature is written in a cursive, slightly slanted style.

Mr Steve Ford