

Why DOES Britain care so little for its sick and elderly?

...asks IAN BIRRELL,
whose experience with
his disabled daughter
and aged war hero dad
has given him a unique
and depressing insight

MY DAUGHTER Iona had a seizure at 5am yesterday. Her eyes rolled, she screamed, her limbs flailed and her body shook.

After five minutes her carer, a kind middle-aged woman from Poland, gave her emergency medication. This action, under an agreed protocol, ensured Iona did not need hospitalisation. Seven minutes later, she slumped back into deep sleep.

This is a routine occurrence in my household, living with a 25-year-old woman who has profound disabilities. Iona is a gorgeous, smiley person, despite a rare genetic flaw that means she cannot see, talk or walk — but epilepsy is a cruel condition and each seizure potentially a killer.

When Iona woke almost five hours later, the carer gave her breakfast, bathed her and dressed her before the day could begin — just as she has done for almost five years working in our home.

But this dedicated, supportive woman departs our team this weekend. She is going home to Poland.

growing complexity of conditions. And these problems are intensified by dismissive attitudes still prevalent in society towards old and disabled people.

This means care gets low priority, leaving a system coming apart at the seams with home closures, crumbling services, complaints soaring and elderly people blocking much-needed hospital beds for lack of alternative provision.

Meanwhile, carers themselves are chronically undervalued despite doing tough and essential work such as looking after elderly people with dementia like my father or assisting those with life-threatening disabilities such as my daughter.

Stress

The legacy can be seen with a series of appalling abuse scandals in care homes, most infamously at Winterbourne View near Bristol. The bullies are callous inadequates who do not have a caring bone in their bodies but struggle to get jobs elsewhere.

This is the flip side to our strong employment figures. For such staffing issues become even more pertinent and they terrify families such as mine who fear their children ending up in poorly staffed centres.

It is all very well saying Britons should do these jobs. But what if the right people are not applying to care for someone with complex needs or fail to turn up for interviews, as has happened with us.

We have spent a quarter of a century caring for our daughter. The early years were filled with bewilderment and depression, then came years sleeping on floors and in hospitals as we fought for support in a system designed to thwart parents.

Now, at least, we have a personal health budget to fund care, although at a time in our 50s when friends look to retirement we have had to remortgage our house to adapt it to Iona's needs. The stress has soared and a sense of alienation grown stronger with age.

We worry if we will be able to keep her in the warmth of a family environment rather than hand her over to a struggling system. We tried it once before — and she came home under palliative care.

When will Britain wake up to the deficiencies of our creaking welfare system, the need for realistic migration and our shameful failings in caring for our elderly and disabled citizens?

the dying,' she said. Why is it that this nation seems to care so little for its disabled, sick and elderly? We have a Health Secretary, Matt Hancock, who is virtually silent over a crisis that impacts so hard on the NHS while he promotes mobile phone health apps like an excited teenager. As for Labour, their activists decided Palestine and fracking are more important for conference debate.

This week, the Cabinet finally discussed how our migration system might work after leaving the EU, with some experts predicting numbers coming from Europe will fall by 80 per cent. The danger is that efforts to slash migration fall on the sort of people who keep my family afloat but are deemed 'unskilled' by self-serving politicians and bureaucrats.

Similar issues plague the National Health Service. Vacancies for medical staff have soared, driving up costs for taxpayers when expensive temporary workers must be used to plug gaps.

In London, where I live, more than four in ten carers looking after adults come from abroad. We have had some brilliant Britons and people from further afield helping Iona — but the bulk have been dependable staff from Eastern Europe.

I see something similar with my father, who at 95 has severe dementia. He is a ghost of the man who once captained a landing craft on Omaha Beach amid the brutal D-Day assaults, then enjoyed a successful career in business. Like my daughter, he is assisted at home rather than in the arms of the State. His carers this year hail from Estonia and

Lithuania, along with South Africa and a lone Briton.

Brexit plays a role in this problem. I have heard from East European carers disturbed by the tone of debate in Britain that implies they are not wanted here. Meanwhile their native economies are thriving and the pound has fallen, shrinking their earning differentials — most notably in London.

But this crisis, hidden among rising despair in thousands of homes such as mine, goes beyond Brexit. There are a welter of issues building like flood waters behind a dam that will one day burst — with devastating consequences.

Disastrous

Some are, as ever, financial. I backed austerity after the 2008 fiscal crisis, but it was always wrong to overload cuts on local authorities to lessen pain in Whitehall, given the inevitable consequences as they slashed services and support.

The National Audit Office has warned that councils saw central government funding halve in real terms since 2010, leaving many on the brink of breaking point as they face rising bills for core services. Yet the foreign aid bill keeps rising.

This impact is disastrous in an ageing society with more people living longer lives and often with debilitating conditions — especially at a time when amazing medical advances mean more children are surviving with profound disabilities.

So we see dwindling staff numbers and declining services at a time of rising demand and

Scandal

So we must resume the nightmare task of searching for replacements. Much of this burden falls on my exhausted wife, who fills any rota shortfalls for the long, waking nights alongside Iona before spending her days desperately seeking carers.

For while Westminster bickers over Brexit, our country is suffering a staffing crisis that is crippling an already weak care system — and threatens my family's future.

Training charity Skills For Care says there are 110,000 vacant posts in England alone, the vacancy rate surging by 22,000 posts over the past year. More than two-thirds are jobs helping elderly, disabled and sick people in their homes.

Niall Dickson, chief executive of the NHS Confederation, talks about a service facing meltdown. He calls this 'the scandal that has not dared to speak its name'.

One friend told me of a superb care home in Plymouth where her aunt died in May, set in a beautiful former convent. It is profitable, highly rated — but faces closure due to staff shortages. 'This is really desperate if we don't have enough workers to look after