



Northern Ireland
Assembly

OFFICIAL REPORT (Hansard)

Northern Ireland Pensioners Parliament

Friday 16 November 2012
Parliament Buildings, Stormont

Northern Ireland Pensioners Parliament

Friday 16 November 2012

(Mr Speaker [Mr William Hay] in the Chair)

Delegates:

Nixon Armstrong
Joe Austin
Ross Bailie
Bernadette Baker
Ivan Baxter
William Calvin
Betty Campbell MBE
Bill Carson
George Cassidy
Sam Caul
Theresa Clarke
Lily Coleman
Winifred Cummins
Patricia Donald
Peggy Donaldson
Phil Evans
Mary Ferris
Maurice Forrester
Anne Gallagher
Anil Gautam
Nilam Gautam
Betty Gillespie
George Glenholmes
Joyce Griffin
Sadie Hamill
Emily Hamilton
Robert Hasson
Mary Hillis
Francis Hughes
Anne Kane
James Kennedy
Kathleen Keogh
Mary Marr
Ann Martin
John Martin
Michael Martin
Joseph Mathews
Eileen Maybin
Mike Maybin

Desmond McAuley
Kathleen McAuley
Mona McCallister
Martin McCartney
William McCombe
Gladys McCullagh
Anne McDaid
Mary McEneaney
Edith McLarnon
Mabel McNulty
Shirley McNulty
Michael Monaghan
Patrick Montague
Annabelle Morrison
James Morrison
Mary Morrison
Harry Murdock
Victor Murphy
Hugh Rafferty
Terry Ruddy
Geraldine Russell
Hugh Russell
Karen Scrivens
Charlie Simmons
Dympna Sinton
Margaret Thomas
Edward Vint
Anne Watson
James Watson

Staff Members:

Eddie Lynch
Alison McKenna
Seamus Lynch
Eleanor Mallon
Nichola Johnston

Ministers in attendance:

Mr David Ford (The Minister of Justice)

Mr Edwin Poots (The Minister of Health, Social Services and Public Safety)

Ms Jennifer McCann (Junior Minister, Office of the First and deputy First Minister)

Northern Ireland Pensioners Parliament

Friday 16 November 2012

The Pensioners Parliament met at 10.30 am (Mr Speaker in the Chair).

One minute's silence was observed.

Speaker's Business

Welcome Messages

Mr Speaker: Good morning, everyone. Before we begin our proceedings, I welcome you all to the Senate Chamber. I am particularly pleased to see that so many have come back again after last year's event, which, I must say, was hugely successful for everyone.

As representatives of the Pensioners Parliament, you will be able to take part in three real debates with three of our Ministers here in Parliament Buildings. That should help you to get a better understanding of how our Assembly works.

I hope that you will enjoy your time here and find the experience valuable. I also hope that those of you speaking in the debates can relax and do not feel overwrought by the formality of the surroundings. I really mean this: enjoy today. I am certainly looking forward to the debates as well.

We have three Ministers with us to respond to your debates. I am very pleased to welcome junior Minister Jennifer McCann. Minister, you are extremely welcome to the Pensioners Parliament. We will also be joined by Edwin Poots, the Minister of Health, Social Services and Public Safety, and, of course, the Justice Minister, David Ford.

Before we move to the formal proceedings, I invite Mr Michael Monaghan, Chairperson of the Pensioners Parliament to say a few words.

Mr Monaghan: Thank you, Mr Speaker, for that welcome and for your kind opening remarks, which are much appreciated.

Our membership warmly welcomes your invitation to host this event for a second year. Indeed, this year, the Age Sector Platform is taking the opportunity to officially launch the 2012 report of the Northern Ireland Pensioners

Parliament, and there is not a more appropriate place to do that than the seat of power, where we can outline the concerns of older people.

The report is the result of a major research exercise conducted right throughout Northern Ireland to determine the key issues that impact on older people. It is clear from our work over the past two years that the Pensioners Parliament model provides older people with an effective channel to get their voice heard. The fact that we are here today manifests that point very strongly.

The Northern Ireland Pensioners Parliament takes an inclusive, grassroots, democratic approach to tackling the issues of concern for older people. Although it is important for the Age Sector Platform to organise the parliament, it is also important for those in power to listen to the voice of older people. I say frankly that we are pleased that there were some significant responses to the issues raised in the Chamber last year. The Age Sector Platform recognised that and appreciated the outcome.

Two weeks ago, a delegation visited Westminster to lobby our MPs and to raise the issues that are determined there. It is very positive, therefore, to see the Northern Ireland Assembly open its doors to provide a constructive forum for older people to have the opportunity to make their views heard in such a formal and effective manner.

My 10 colleagues who will participate in the debate are not really speaking for themselves; rather, they have been mandated to speak on behalf of the thousands of older people who have taken part in the Pensioners Parliament over the past year. The 80 or so older people here this morning are the lucky ones, because we could, in fact, have filled this place three times over. That is testament to the interest in our organisation and the Pensioners Parliament.

What the Age Sector Platform has created in the Pensioners Parliament is an effective model of participative democracy. We hope that that is

something that the Northern Ireland Assembly will continue to value and support. Indeed, I personally thank you for your support and that of your office, which has dealt with us in a very considerate way and has made it possible for older people to have their views heard in such a constructive forum.

Mr Speaker: Thank you very much for your kind words this morning.

Parliamentary Business

Age Strategy

Mr Speaker: We now turn to today's formal business — your motions. The first item is a motion on a comprehensive strategy for older people. We have 40 minutes for the debate. The mover of the motion and two other members will each have up to seven minutes to speak. The Minister will then have 10 minutes to respond, before I call the mover of the motion to conclude the debate. I will let you know when you are coming to the end of your speaking time. If that is clear, we shall proceed.

Mr Caul: I beg to move

That the Northern Ireland Pensioners Parliament notes the important roles that older people play in society and recognises the issues arising from our ageing population; calls on the Northern Ireland Executive to ensure that a well-resourced and challenging age strategy is implemented with specific targets and timelines; further calls for age discrimination to be outlawed during this Assembly term in relation to the provision of goods, facilities and services and for the necessary resources to be provided to the office of the Commissioner for Older People so that it may fulfil its responsibilities.

If we may, Mr Speaker, on this occasion, we will depart slightly from the normal timetabling because, I understand, junior Minister McCann has to leave us on the dot of 11.00 am. We want to provide her with as much time as possible to respond to the first motion. Therefore, I will briefly recap the main issues that underlie the motion. For the sake of brevity I will do that in heading form only, and we will expand on the issues a little later.

The main issues are the need for the Northern Ireland Executive to ensure that a well-resourced, comprehensive and challenging age strategy for Northern Ireland is implemented with specific targets and timelines; to bring in effective legislation during this Assembly term that will ban unjustifiable age discrimination in the provision of goods, facilities and services; and to ensure that such legislation protects existing concessions such as the senior SmartPass but does not allow for widespread get-out clauses for service providers.

We welcome the establishment of the office of Commissioner for Older People for Northern Ireland, for which many of us here have been campaigning for many years. Now that the

commissioner's office is up and running, we want to make sure that it gets the resources that it needs to fulfil its responsibilities. However, it is also important that the office engages with older people and makes them fully aware of how it can help them.

Keeping warm in winter was the number one issue raised by pensioners in our survey this year. A new report by Lord Whitty, published earlier this year, said that three quarters of households in Northern Ireland with someone aged 75 or over are now in fuel poverty. To make matters worse, Northern Ireland pensioners cannot avail themselves of the warm home discount scheme, which is available throughout the rest of the United Kingdom and provides pensioners most in need with a discount of £130 off their electricity bill during the current winter.

The Pensioners Parliament calls for a similar scheme to be set up through Power NI and other electricity suppliers in Northern Ireland so that pensioners here get the same help. This issue was raised with Minister McCausland on this occasion last year.

The Northern Ireland Pensioners Parliament welcomed the fuel payment that was made by the Office of the First Minister and deputy First Minister (OFMDFM) earlier this year to help pensioners with their energy bills. We know that that made a huge difference to many older people. This year, we want OFMDFM to use some of the social protection fund budget to address this number one concern for the pensioners most in need. I look forward to the Minister's response on these issues.

Mr Speaker: I call Ivan Baxter.

Mr Caul: May I ask that the junior Minister be allowed to respond to my comments? You are obviously not aware of the change in the timetable.

Ms J McCann (Junior Minister, Office of the First Minister and deputy First Minister): I am sorry for the mix-up. I thank the Speaker and the members of the Pensioners Parliament for inviting me here today. I have to apologise in advance because I have a previous commitment. I will try to cover some of the details of the motion.

Obviously, I take a keen interest in the issues that affect the daily lives of our older people. Through my constituency work, I deal with people and their families on a regular basis, and I am aware of the many pressing issues that you all face.

Today is an excellent example of people getting involved in helping to influence and shape our shared future. It is important that we engage with a diverse range of people so that we can ensure that any new legislation meets their needs. Everyone in the Executive and the Assembly was elected by you, so it is only right that you hold them to account and make sure that your voice is heard.

10.45 am

The most recent population estimate showed that there are approximately 554,000 people over 50 living here at the moment, which is 31% of the population. It is estimated that, by 2028, the number of people over 50 will increase to 38% and by 2046 to 43% of the population.

Improving existing service provision for our older population is essential, and I am here today to confirm the Executive's commitment to that. Older people possess a lifetime of experience, knowledge and know-how that our communities must always tap into. You have a very valuable contribution to make.

You have called on the Executive to ensure that a well-resourced and challenging age strategy is implemented, with specific targets and timelines. The draft ageing strategy was extensively reworked over the summer, following feedback from the ageing strategy advisory group, which is chaired by Claire Keatinge, the Commissioner for Older People.

The advisory group has said that it is content with the draft strategy in relation to the issues addressed and the evidence provided. In addition, we have begun drafting an early action plan to implement the strategy through the Delivering Social Change framework. Those early actions will reflect the discussions that took place with the advisory group in October, during which it offered suggestions for improvement, including some of the proposed targets it put forward.

We are taking a new approach with the delivery framework. It has clearly defined governance structures, and it is designed to pursue a smaller number of additional key objectives to add real value. My ministerial colleague Jonathan Bell, who unfortunately cannot be here today, and I recently met Claire Keatinge and representatives of the age sector to listen to their views. To address the issues raised by them, officials have arranged meetings with Departments in the next few weeks to agree how we can add value to the ongoing work on a number of key issues for older people. Those issues are fear of crime; fuel poverty, including social energy tariffs, which you have just mentioned; and adult social care.

We are particularly aware of the significance of the fuel poverty problem that older people here face. We are also aware of the initiatives that operate in other areas, such as the warm home discount scheme you mentioned, which operates in England Scotland and Wales, and the electricity or gas allowance that is available to people over 70 in the South, as part of the household benefits package. We are considering how to address that issue here, and officials are meeting the Department for Social Development and the Department of Enterprise, Trade and investment next week to see what can be done.

Officials will also soon meet Belfast City Council to consider whether the World Health Organization's age-friendly cities initiative can be extended here, following Belfast's successful designation as an age-friendly city.

We have also consulted the Public Health Agency on how the Office of the First Minister and deputy First Minister can contribute to the active ageing agenda. It will respond to advise us on what we can do to give further priority to active ageing, which is critical to improving the quality of our lives as we get older.

Following those meetings, our officials will undertake further work on the early actions plan and consult the advisory group before the end of the year. Our aim is to go out to public consultation on the strategy and the early actions plan in February or March 2013.

We want to move forward through an evidence-based approach, and your input is important. We are aware that the Pensioners Parliament will be taking place around this time, and we will consider whether we can link in with it to ensure that as many older people as possible get the opportunity to shape the development of the strategy. Following the consultation, the final strategy will be published later in 2013.

Today, you have also called for age discrimination to be outlawed. There is no doubt that inequality still exists and represents a significant barrier to people's opportunities in life. Age discrimination is no exception. In fact, it is perceived as one of the most prevalent forms of discrimination today. At some point in our life, every one of us will be vulnerable to age discrimination.

The Executive take age equality very seriously and have included a commitment to make it unlawful to discriminate on the basis of age in the provision of goods, facilities and services in their Programme for Government. Such a step will require new legislation in the Assembly, and we are committed to making that happen.

The other piece of anti-discrimination legislation that relates to age is the Employment Equality (Age) Regulations 2006, which make it unlawful to discriminate on the grounds of age in the areas of employment, occupation, vocational training and further and higher education. We are committed to enhancing that protection and eradicating harmful and unjustifiable age discrimination.

It is proposed that a proportionate and flexible approach to the new legislation is preferable. It will not prevent service providers offering age-specific goods and services that are beneficial or justifiable; you mentioned some of those in your opening remarks. At the same time, it will provide individuals with a right of redress if they are discriminated against. This approach will also signal clearly to service providers that ageist attitudes and the discriminatory practices that result are no longer acceptable. It will also set out a clear legal framework within which service providers can design and deliver services.

We want to remove the barriers to services that reflect past assumptions about which services are suitable for different age groups and consider the well-being and dignity of the people who use those services. There are, of course, some justifiable or beneficial uses of differential treatment on the basis of age for which provision needs to be made in the proposed legislation. I can reassure you that we intend, through specific exceptions, to include those in the same primary legislation. It is intended that those exceptions, which have to be scoped out in liaison with the sectors concerned, will provide legal certainty for service providers and service users alike.

We are determined to consign age discrimination to the past and to transform the ageist culture that has been prevalent in our society for too long. The proposed legislation, which will impact only on areas where differential treatment is harmful, is intended to improve the lives of everyone now and in the future.

Your motion calls for the Commissioner for Older People to be appropriately resourced to enable her to fulfil her responsibilities. I support that entirely and can confirm that our officials work closely with the commissioner and will continue to do so to ensure that the necessary staffing resources and public funding will be made available to her to enable her to discharge her full range of duties in the service of all our older people. I can also confirm that, within the terms of the current comprehensive spending review settlement, approximately £1 million has been allocated to the

commissioner's office for this financial year and the next two financial years.

It is our job in the Assembly to make sure that the issues that matter to older people are addressed. We do that by working in partnership with a wide range of bodies and developing good practice but also by reviewing, scrutinising and challenging and, where appropriate, laying down standards that we expect to be met. It is incumbent on us all, therefore, to make sure that this is a good place to grow older, not just for some but for everyone.

Thank you all very much for inviting me to be here. Thank you for listening and for taking time out to add your views and insights to the process of establishing the way forward. I really look forward to working with you all in the future. I am very sorry that I cannot stay, but I committed to the other event prior to committing to this one.

Mr Speaker: Thank you for your attendance, Minister.

I understand that some people are having difficulty hearing the debate. I can assure people that we are trying to rectify the problem as soon as possible. It is important that, as far as possible, everybody in the Senate Chamber can hear the debate. We are trying to rectify the problem.

I call Mr Baxter.

Mr Caul: I will perhaps add some detail to the headings that I mentioned earlier. We are now back on the original programme. If you do not mind, I will start, and Mr Baxter will follow me.

Mr Speaker: OK.

Mr Caul: I will add some detail to the points that I set out briefly at the beginning. I am very grateful to the junior Minister, in her absence, for her comprehensive and positive response to the motion. There are definite things that will happen. There is the age strategy and discrimination legislation. There is a clear path there. We are gratified to know that there will be resources and finances for the Commissioner for Older People.

I will deal in detail with the first of those issues. For many years, one of the key calls of the age sector has been about the need to develop a new and more comprehensive ageing strategy for people in Northern Ireland. Unfortunately, the previous strategy, Ageing in an Inclusive Society, failed to have the impact on the lives of older people that everyone might have expected. At this year's Northern Ireland Pensioners Parliament, 96% of members called

on the Office of the First Minister and deputy First Minister to develop the strategy that we have described with specific targets and timescales to improve the lives of older people.

We are all well aware that there is an ageing population in Northern Ireland, if not across the world. That is a very good thing. In the broadest sense, that fact is testament to our health services, to our education services and to people themselves, who, nowadays, are much more aware of the long-term benefits of, for example, healthy eating and physical and mental exercise.

We have a stark choice: do we plan for the future in a way that allows our older people to flourish and continue to contribute fully to society, while protecting those who are most in need, or do we continue to treat older people as some sort of burden and build up even bigger problems for society further down the line? It is really a no-brainer. Government must set the conditions that allow our growing older population to remain active and engaged citizens, so that they can benefit from society and, in turn, society can benefit from the experience and expertise that they offer. A new comprehensive age strategy can be a springboard for that.

Representatives of the Northern Ireland Pensioners Parliament sit on the advisory panel that has been working on the draft strategy. We welcome the junior Minister's assurance that the developing strategy is positive in nature and recognises that older people have a meaningful role to play in our society. However, if the strategy is to succeed and impact positively on the lives of older people, it must have the clear, ambitious and measurable targets with timelines that the Minister has acknowledged already. It also needs to be properly resourced in respect of staffing and budgets.

Ongoing and meaningful engagement with older people needs to be embedded as a key strand of the strategy. The Pensioners Parliament has proven that older people want to be involved in policy making and in developing solutions. That is something good that should be harnessed by government.

An age strategy might, on the face of it, be for older people. In fact, it is a strategy that will benefit all of society. The development of good policies and schemes for our older population will also benefit future generations. It is important that, as an ageing population, we harness and utilise the potential of this age group, while responding to the needs of the more vulnerable in our society.

Mr Speaker: I call Mr Baxter; finally.

Mr Baxter: Third time lucky, Mr Speaker. I am standing in for Margaret Galloway, who is unwell. I am sure that we all wish her a speedy recovery.

I wish to address two areas of interest to older people: age discrimination and the office of the Commissioner for Older people, which Mr Caul and the Minister mentioned. I will attempt to fill in some of the detail, but I will repeat one or two points that have already been made.

On the age discrimination side, earlier in the year, the Pensioners Parliament welcomed the commitment in the Programme for Government to introduce legislation that will ban unjustifiable age discrimination in the provision of goods, facilities and services. Our view is that, for too long, older people have been treated as second-class citizens in the provision of many goods and services. That must be brought to an end as soon as possible. We are already behind other countries in the UK, as the legislation came into force elsewhere on 1 October.

11.00 am

While we are behind some other countries, we can perhaps turn that to our advantage by building on the legislation by providing even better protection in respect of financial services for older people, as the general feeling is that the exemptions provided for financial providers in GB are too wide. It is important that age discrimination legislation here allows only very strict exceptions and does not allow widespread get-out clauses for service providers.

It is also vital that the legislation allow for the continuation of positive discrimination, such as important concessions to people in certain age groups like free travel for pensioners and other discounts provided by businesses such as hairdressers, cafés and retailers and discounted fees at colleges of further education.

For many years, older people have claimed that they have been discriminated against in a range of areas, particularly in relation to health and social care and in financial services. In our Pensioners Parliament, 97% of members voted in favour of the motion, which highlights the importance that older people place on this work. It is vital that the Northern Ireland Executive ensure that the new legislation tackles the discrimination that exists across these areas.

The Age Sector Platform is working very closely with Age NI on the issue to provide advice and information on what needs to be included in the legislation. We look forward to working with OFMDFM and other stakeholders as the

legislation goes through its stages of development.

As my colleague has mentioned already, many of us campaigned for many years to have the office of the Commissioner for Older People set up. It is vital that it meets the expectations of older people. For that reason, there was much discussion about that office during the local and the main Pensioners Parliament events earlier this year.

We were very pleased that the commissioner, Claire Keatinge, came and delivered a presentation to us and took part in a question and answer session. We wish her well in her post.

This year, our parliament debated and reflected on what was needed to make the office a success. Three separate motions were passed. The parliament believes that it is vital that the commissioner creates an effective system to ensure ongoing contact with older people and their organisations. Communication was at the top of the list. The parliament also believes that it is important that older people are made aware of what the office can do for them and that the office can support them in whatever way they need. In addition, the parliament called on the Office of the First Minister and deputy First Minister to provide the necessary resources, which the junior Minister has already alluded to. Nevertheless, we emphasise that we need the resources to ensure that the office of the commissioner has the capacity to fulfil its responsibilities.

Mr Hughes: I wish to speak about the biggest issue that affects older people in Northern Ireland: fuel poverty. As you know, fuel poverty is defined as a household that spends 10% or more of its income on keeping warm.

The Pensioners Parliament recognises that the issue comes under the umbrella of a number of Departments and under the jurisdiction of the Northern Ireland Assembly and the Government at Westminster. The Northern Ireland Pensioners Parliament called on the Northern Ireland Executive to make this issue a top priority and to develop and implement an action plan to eradicate fuel poverty and on all relevant Departments to produce a unified strategy.

OFMDFM has the opportunity to play a constructive role in bringing together all the relevant Departments to tackle fuel poverty. The Minister for Social Development attended the Northern Ireland Pensioners Parliament last year. He outlined what his Department was doing, but he also acknowledged that there were many factors in fuel poverty that were

outside his control. That is why we call on the Northern Ireland Executive to look at taking a lead role in tackling this serious problem.

In the winter of 2010-11, there were 741 excess winter deaths in Northern Ireland. The vast majority of those were of people aged 65 or over. That is hardly surprising, given what has happened to pensioners over the past couple of years. Not only did pensioners lose up to £100 from our winter fuel payment, but our pensions have been attacked by the change in the uprating measure from the retail prices index to the consumer prices index. The UK Government plan to further rob the wallets of pensioners in 2013 when they freeze the age-related personal tax allowance patronisingly known as the "granny tax".

We recognise that all age groups are finding it difficult to get by and that the austerity measures are hitting hard across society as a whole. However, older people are in a unique situation because our incomes are fixed. We also face the highest levels of inflation of any age group due to higher expenditure on food and fuel.

Fuel prices are still at an all-time high, and pensioners face the winter months with fear yet again. The 2012 Northern Ireland Pensioners Parliament survey saw yet another increase in concern about being able to stay warm in winter, with now more than four out of five — 81% — listing that as a major concern.

Fuel poverty in Northern Ireland is much higher than in any other part of the UK. A new report published this week showed that 42% of homes are in fuel poverty. However, that is much higher in the older population, where almost two thirds — 62% — live in fuel poverty. That leads to an increased risk of sickness and ill health among that age group.

In his introduction, Mr Caul referred to the Lord Whitty report. That is an independent report entitled 'Energising Northern Ireland 2012'. It revealed that 75% of households in Northern Ireland with someone aged 75 or over live in fuel poverty. The rural community is much worse than that because of the greater dependence on oil for heating.

The Joseph Rowntree Foundation report of 2012 outlined that pensioner poverty in Northern Ireland had risen by 29% since 2009. To make matters worse, Northern Ireland pensioners — the junior Minister referred to this — cannot avail themselves of the warm home discount scheme, which provides pensioners in the remainder of the UK with a discount of £130 off their electricity bills during the winter. The Pensioners Parliament calls for a similar

scheme to be set up through the energy companies that operate in Northern Ireland so that pensioners here get the same help as those in the rest of the UK.

Northern Ireland pensioners welcomed the fuel payment made by OFMDFM last year to help with our energy bills. It really made a difference to many older people. This year, we would like to see OFMDFM using some of the social protection fund budget to address the number one concern for the pensioners who are most in need. That is needed to make up the shortfall due to the fact that we cannot avail ourselves of the £130 paid to our fellow pensioners who live in the rest of the UK.

The Northern Ireland Executive have stated on many occasions that parity with the rest of the UK must be maintained or we will pay a price through the Westminster block grant. The Northern Ireland Pensioners Parliament calls at this time for the Northern Ireland Executive to fall into step with the rest of the UK and to put the pressure on our energy companies for UK parity to be established and maintained and for energy bills to be reduced as a matter of urgency. I support the motion.

Mr Speaker: Mr Caul, do you want to add anything to the debate?

Mr Caul: I will wind up, Mr Speaker. I apologise to you and others present for any duplication that there may have been in the presentations. The timetabling was sprung on us at a very late stage.

All of what has been discussed so far is set against the past week, in which it was revealed that the official United Kingdom cost of living in the year to October had risen from 2.2% to 2.7%. That 0.5% rise was largely accounted for by increases in food.

We are given to understand that commodity traders have been manipulating the price of gas and electricity and, in the process, lining their pockets, no doubt with the end user paying for it at some point. Large companies such as Amazon and Starbucks try and fail miserably to explain to MPs how they pay little or no tax in the United Kingdom while they make millions here. The disgraced director general of the BBC is forced into retirement by his own incompetence and that of others and is then offered £450,000 severance after 54 days in the job. I make that a bit over £8,000 a day, not a bad reward for incompetence. As we say in Northern Ireland the world is ill divid.

Next April, approximately 11 million pensioners throughout the United Kingdom will get a 2.5% rise in their state pension, less tax, of course.

Question put and agreed to.

Resolved:

That the Northern Ireland Pensioners Parliament notes the important roles that older people play in society and recognises the issues arising from our ageing population; calls on the Northern Ireland Executive to ensure that a well-resourced and challenging age strategy is implemented with specific targets and timelines; further calls for age discrimination to be outlawed during this Assembly term in relation to the provision of goods, facilities and services and for the necessary resources to be provided to the office of the Commissioner for Older People so that it may fulfil its responsibilities.

Mr Speaker: I ask people to take their ease as we move to the next item of business.

Fear of Crime

Mr Speaker: I welcome the Minister of Justice to the Pensioners Parliament. We have 30 minutes for the debate. The person moving the motion and one other member will each have up to seven minutes to speak. We will then have 10 minutes for the Minister to respond before I call the mover of the motion to conclude the debate.

I call the chairperson of the Age Sector Platform community safety campaign committee, Mr Bill Carson.

Mr Carson: I beg to move

That the Northern Ireland Pensioners Parliament notes the consistently high levels of fear of crime among our older people; and calls on the Minister of Justice to make this issue a top priority so that older people can live free from crime and the fear of crime within their homes and communities; and further calls on the PSNI to provide more visible policing and to improve police response times to such crimes.

It is worth repeating some parts of that motion. The Northern Ireland Pensioners Parliament does note the consistently high levels of fear among our older people, and we do call on the Minister of Justice to make tackling this fear a top priority. Older people should be able to live in their own home and in their own community free of those worries. As we have heard, they have enough worries about some of the expenses that they have. They should not have to worry about the fear of being attacked. We call on the Minister to provide more visible policing, to ensure tougher sentences for those who target older people, to secure a higher conviction rate for such crimes and to improve police response times.

Looking again at the fear of crime, crime against older people and the fear that these crimes generate in our older population is one of the main areas of concern for older people throughout Northern Ireland today. Age Sector Platform supports the older person's right to live free of the fear of crime in their home and in their community.

We believe that it is vital for our society to create the conditions that enable older people to live as active and engaged citizens, and fear of crime must be tackled if this is to happen. However, survey results from the 2012 Pensioners Parliament report, which is launched today, highlight the fact that we are far, far away from creating those conditions. These stark results show just how big an issue

this is across every county in Northern Ireland. It is worth repeating that: across every county in Northern Ireland.

11.15 am

Fear of crime is now the second-biggest concern of older people, with two out of three fearful of becoming a victim of crime. In all fairness, we realise that the reality is that it is an unlikely event that you will be the victim of crime, but that does not match the perceptions that older people have in that regard. Remember that perception is truth for many people, and the perception is that it has happened to someone so it must be my turn next.

We had a case at one of our parliaments in Antrim, where a lady had been held up at knifepoint by a young lad of 14. She seemed to be getting over that and then another crime happened in Newry — miles away — and it just brought back all the fears and put her right back to where she was when the crime was committed against her. That is part of the problem. How do you get that out of people's minds? Even if fear is largely unfounded, that does not mean that it is not real and does not need to be tackled.

The fear of crime is having a serious impact on the lives of older people in Northern Ireland and leads to many problems, including social isolation and poor health. Remember that it does not stop with the older person; it affects their relatives and their friends, who then feel a great sense of responsibility. That stress reaches out beyond the family circle, and all the older people in that area are affected by that stress. What we are concerned about is that they turn their house into a fortress, and, if they fall ill, you cannot even get in to help them. It really is a serious problem.

Again, I stress that it is an unlikely event to happen to an older person, but when it does happen — we have seen the terrible photographs of people who have been abused — I would like to see it treated as a serious event in the same way as hate crime is treated. I saw some documents on the recommendation for the police procedure. There were six pages for dealing with a crime against an older person and 36 pages detailing how a hate crime is to be handled. It seemed very disproportionate.

Given the seriousness of the situation, Age Sector Platform strongly believes that a dedicated programme of work is needed to tackle this major issue for many of our most vulnerable citizens. It is a complex issue. It will not be solved overnight, but we must dig below the surface and find out what causes the high

levels of fear and, more important, how we can reduce them. Age Sector Platform and the Pensioners Parliament are very willing to assist in any way they can to dig out that information.

We are pleased that there is a clear commitment in the Programme for Government to tackle the issue, and the recently published community safety strategy also gives a commitment to tackle it. We also know that the recently established policing and community safety partnerships (PCSPs) wish to engage with many of the most vulnerable groups in society, and that is most welcome. We really look forward to something happening. Those commitments are welcome, but, at this stage, they are only in writing. We want to see action. What we need now is a clear programme of action to start tackling the problem head-on.

I finish by touching on the issue of sentencing. This year, the Pensioners Parliament passed a motion calling on the judiciary in Northern Ireland to use the powers at its disposal — by that we mean all the powers at its disposal — to hand down stiffer sentences that will act as a serious deterrent to those committing crimes against older people.

Our understanding is that judges have the power to hand down a longer sentence in cases where the victim is vulnerable. At many of our events this year, people talked about those convicted of crimes against older people as getting nothing more than a slap on the wrist. Again, that is a perception. The truth is that sentencing does not get the same coverage as the crime, and it is therefore hard to know whether that perception is true.

We make a plea to the judiciary to exercise its powers in such cases to send out a strong signal that crimes against older people are abhorrent and deserve a severe sentence. When something such as that happens in certain states in America, there is an immediate tariff because it is a crime against an older person before they deal with the actual crime itself. Maybe that is an area we could look at here.

Ms Watson: I will speak on the same subject, but my remit is that people are afraid not only outside but in their own home, which is absolutely terrible. The lack of a police presence is one of the most important points. Fear of ringing the police because of the repercussions also affects people.

When I speak to people on the subject, what they say most often is that they cannot remember the last time they saw a policeman walking. Ringing the police is now centralised, which is difficult for older people. Local police

stations are being closed, which gives a feeling of insecurity. Less contact with the police needs to be rectified.

When people are apprehended — maybe one in 20 — those who are prosecuted are often told to go home and not to be a bad boy. What good is that? Conviction rates and sentences need to be higher and stronger. The effect of crime on anyone is horrific, but with older people it can be life-threatening.

Mr Ford (The Minister of Justice): Thank you very much, Mr Speaker. It is a great pleasure to be at the civilised end of the Building for a change, responding to points put in a civilised way. It is very much the dignified and civilised end, which gives me the opportunity to speak in perhaps a different way from the abrasive way we speak when we do real business on Mondays and Tuesdays.

I thank you for the invitation to participate in the debate, and I thank Mr Carson and Ms Watson for the way they introduced the topic. I commend the Age Sector Platform for the work that it has done, particularly in engaging with my officials and ensuring that the voice of older people is heard.

I will try to give a general outline of some of what we are doing and respond to some of the points that were made by the proposers. I am not sure whether it is customary in the Pensioners Parliament that members seek to intervene during ministerial speeches, but I am happy for them to do so, if there are points that need to be clarified.

I again applaud that commitment of the Age Sector Platform for the engagement there has been because I am concerned that my Department is seen to work in partnership and engagement with a range of organisations across this community to get the benefits of the devolution of justice, which we have had for the past two and a half years.

I must express a slight caution on some of the points that were made. In specific calls for improvement of a policing response, I have to duck slightly and say that those calls are the operational responsibility of the Chief Constable. One of the things that we have established is that it is not for politicians to instruct the Chief Constable on how to behave. So, although I hear the points that are being made, I am not in a position to respond directly.

From what I know from statistics, I was surprised to hear Mr Carson say that you never see a policeman these days. People have stopped saying that to me over the past year or so because the Chief Constable has put so

many more officers out on the ground in response to neighbourhood policing. The use of technology means that they are out on much longer shifts. I certainly believe there has been an improvement in that way, but that is just me exercising my view from my position, which is no more valid than Mr Carson's when he expressed those concerns.

There is clearly a significant role that the PSNI has to play in ensuring that people feel safe in this community. Part of that involves the kind of partnership that we have referred to in terms of the policing and community safety partnerships and so on.

Let me talk about some of the things that are more directly my responsibility. There is something of a media stereotype that would suggest that all old people are huddled in their home, locked up with several locks, passive, frail and feeling extremely vulnerable. The very fact that you ladies and gentlemen are here this morning proves that that may be correct for some people but is not a valid representation of the majority of people who are among the older section of society — one that I am rapidly joining myself.

When I go out and engage with local communities across Northern Ireland, I see an active, vibrant community sector that includes many older people. Much of the work that is being done to make communities better is done by people who are no longer in full-time employment using their opportunities, and, in that respect, I want to thank you because I suspect that you are amongst those active citizens doing so much on the ground.

I accept that that does not mean that some people are not feeling vulnerable, and those who have been affected by crime are particularly fearful. However, it is, of course, the case that the fear of crime is different from the reality, and we need to look at what the fear of crime really means. It is certainly real and has a real impact, and that was outlined for us. People feel vulnerable because they have been attacked because they have heard of something else. That can have drastic effects on physical and mental well-being, and I certainly accept that that is why we must have a key priority to reduce that fear of crime.

The problem is that there is a disconnect between the fear of crime and the actual likelihood of it. It is not just the case for older people; the reality is that younger males are most likely to be the victim of crime. The fear is real for anybody who feels vulnerable, and there are people among the older section of the community who feel particularly vulnerable. That is alongside the fact that crime rates have

been decreasing for the past decade and, at the present time, are amongst the lowest we have seen in Northern Ireland for many years.

Crimes against older people, especially violent crimes, are relatively rare, but, when they happen, they cause serious concern. The perception is, to some extent, reinforced by a small proportion of reality but is not really matched by the reality for many people. People still seem to believe that crime rates are going up at a time when all the evidence is that they are going down. I am not sure why that is; it may be something to do with the actions of the media in the way that certain crimes are reported. It is also interesting that crime surveys tend to suggest that people feel that their own neighbourhood is not too bad but there is a generality of a problem. That may be where the media come in.

We have two sets of statistics. Mr Carson quoted one, so I will quote the other side. The Northern Ireland Crime Survey, which is a reliable and robust annual survey, measures experiences and perceptions amongst the entire adult population. When asked about the impact of the fear of crime on their quality of life, only 5% of survey respondents said that it had a great impact, with two thirds stating that it had minimal effect. We also know from Age Sector Platform's research, which Mr Carson quoted, that 65% of older people said that the fear of crime was among their top concerns. Perceptions are shaped at many levels, and the way questions are asked can shape perceptions. They are, to some extent, independent of the reality that people live with day to day in their own neighbourhood.

It is not that the findings are contradictory, but they look in different ways at the issue. That shows the complexity of the issue, and it requires a greater understanding. I hope that this debate is, in part, about that.

The impact of the fear of crime is absolutely real and can affect people from any age, either gender and any background. The common thread seems to be the sense of vulnerability, and age can be a strong factor that impacts on that sense of safety and fear. To some extent, there is an issue with vulnerability to the impact of possible crime and its consequences, and those who fear crime most are those for whom the impact is greatest rather than those who are necessarily most likely to be vulnerable to crime.

We have heard examples of the impact on health and well-being and on a sense of control and about the loss of independence and all the difficulties that brings. If it is not addressed, the emotional impact of the fear of crime leads to a

greater sense of isolation, withdrawal from the community and normal social activity and a deep impact on health and well-being. The ripple effect of one crime highlighted in the media or of antisocial behaviour that is not properly checked can be quite serious and go way beyond any immediate victim into that wider community.

11.30 am

How do we address the issue? The motion correctly states that a priority should be to ensure that older people can live free from crime and from the fear of crime in their homes and communities. The proposer highlighted the fact that that is reflected in the Programme for Government, which has a commitment to tackle crime against older and vulnerable people. One element of that is around the sentencing framework, where I need to be slightly careful about infringing on the responsibilities of judges, although we are doing some work around developing sentencing guidelines, which is led by the Chief Justice. However, the starting point has to be preventing crime happening in the first place.

As has been highlighted, the new community safety strategy sets out the framework for reducing crime, reducing the fear of crime and building safer, shared and confident communities, as in the title of the document. It aligns itself with the overarching ageing strategy of the Executive, which is led by the Office of the First Minister and deputy First Minister, to ensure that government genuinely works together to address all the issues that matter to people.

That overarching strategy will guide the work of the Executive and, from that, the different agencies of government, including the justice agencies, councils and local communities around tackling crime and antisocial behaviour and reducing the fear of crime. My Department is investing £20 million over the next three years into that work to be delivered mostly through local projects and some regional projects to address that fear.

Action plans for that strategy are being finalised, and I accept that, at the moment, a strategy is just words. However, you have to start with the words before you know what the right actions will be.

I welcome the contribution made by Age Sector Platform as we seek to develop that, because that action plan will direct our work over the next two years. My officials are in discussion with, among many others, the Age Sector Platform on how we can work together and how we can reach out to older people and have

those conversations on how we build up and maintain a sense of safety and well-being. That has to include raising awareness of the initiatives that we have to prevent crime and, where older people have been victims of crime, it has to ensure that they are supported through the justice system, which ties in with a lot of the work that we are doing and the strategy that we have published recently to change the way in which the justice system operates to ensure better treatment for victims and witnesses, to ensure that they are treated with greater dignity and respect and to ensure that they are allowed to give better evidence in court, which will help to bring about a greater measure of conviction.

We have already highlighted the issue of PCSPs at a local level. We have partnerships bringing together policing and wider community safety functions with local council representatives, independent members and, shortly, a number of relevant agencies playing a key role in working together to tackle crime, to build confidence and to engage and consult with communities in their districts on the key issues that matter to them and how to resolve those problems.

A range of initiatives is already under way to tackle crime and improve the safety of older and vulnerable people. One example that I like to quote, because it is a beautiful example of how money is being used best, is the Agewell project in Magherafelt. It is aimed at providing reassurance to older citizens through a "Good morning" call or through the provision of crime-fighting equipment and is funded by the seizure of criminal assets. We take goods off criminals and use them to provide direct protection through home security equipment for older people, which is a wonderful example of the recycling that we should do to improve the personal safety of individuals in their home. That sort of initiative, involving practical measures, reassurance to help reduce the fear of crime and to help provide peace of mind for those who need it most, is being replicated in every part of Northern Ireland.

On the specific issue of sentencing, there are real responsibilities on the judges, but we are seeking to improve the way in which an initiative of the Chief Justice is being taken to ensure greater consistency of sentencing and more appropriate sentencing by the addition of independent members to the body that otherwise just consists of judges, one of whom will be a specific representative of victims. That is all about trying to get the system joined up while recognising that, at the end of the day, the judge is the person who hears all the facts in a case and who has to take that decision. That is part of the wider reform programme in which I want to consider the safety of older people,

work to reduce reoffending and work to reduce offending in the first place to ensure that there are fewer victims of crime of all ages. The draft strategy for victims and witnesses feeds into that.

In closing, I thank those who put forward the motion. I welcome and support it, with the slight caveat of not treading on the toes of judges or the Chief Constable. I also welcome the fact that we have had a focus on this important issue. My Department's aim, which I am sure is shared with the vast majority of our community partners, is to ensure that older people are safe and feel safe, are informed and empowered and have confidence in the agencies that are here to serve them in the justice system. The partnership that has been established between the Age Sector Platform and my Department and so many other NGOs will be central to supporting that aim, so I thank the Platform for its approach and its contribution this morning.

Mr Speaker: Before I call Mr Carson to wind up and conclude the debate, I say to the Member that he may want to seek further clarification from the Minister. The Minister has already suggested that. So, when the Member is summing up, if he wants further clarification from the Minister, so be it.

Mr Carson: Not so much further clarification; I want to thank him —

Mr Speaker: I just wanted to say to the member that we still have the seven-minute time limit. So, I advise members and the Minister to be brief.

Mr Carson: I thank him for his openness.

I stress this sense of vulnerability. I will give you a personal illustration, if I may. At the height of the Troubles, I noticed that some lights at the head of my driveway — about 300 yards from my house, which is in the country — had gone out. This was at a time when bombs were being put across driveways. So, I jumped into my car and drove up, putting the lights on only at the last minute. The car took off. I overtook it and brought it to a halt, only to discover that it was a courting couple. *[Laughter.]* I really had not worked out whether, if it had been a terrorist, I was going to poke him in the eye with my finger. So many years later, I would not undertake such a venture because I no longer the physical capacity to deal with people in that way. Vulnerability comes with age because people feel physically vulnerable, and I am not sure what we can do to remove that element of that fear.

One aspect that has not been raised by the Minister or by us is whether he feels that

intergenerational work would be useful in marrying up young and older people, in getting them together.

Mr Ford: I am conscious of your time limit. A fair bit of intergenerational work sponsored by voluntary groups in different parts of Northern Ireland is going on. It seems that it is one of the ways in which we make young people aware of the real effects on others of their actions, which they may see simply as boisterous play. That helps to prevent such boisterous play spilling over into antisocial behaviour and, eventually, crime.

Mr Carson: Whereas, after a physical attack, bruises on a younger person will heal, an older could be left with a fracture that quite often causes death shortly afterwards. It really will shorten the life of an older person. That message has got to be hammered home, so that people understand.

In my youth, there was a sense of respect between young people and old. I no longer sense that. The local policeman would have had a sixpence up his glove or somewhere to give you a clip round the ear. Worse still, some of your neighbours would give you a clip round the ear and, when you went home to complain to your mammy, she would give you another clip round the ear for bringing disgrace on the family. That sense of community seems to be lost. I do not know where that fits into the mix, but I feel that something of that nature needs to be rebuilt.

Again, though, I thank the Minister. I am glad to see that he has got a new aspect to recycling, which is very welcome. Thank you for the work that you are doing.

Mr Monaghan: Mr Speaker, the Minister suggested that he was prepared to take an intervention.

Mr Speaker: Yes, of course.

Mr Monaghan: I thank the Minister for what I thought was a very positive response. However, one issue that has raised its head a few times and resonates with older people is that there is a feeling that we are not represented — certainly not proportionately and sometimes not at all — on the policing and community safety partnerships. Now, as a failed applicant for a partnership, I think that we need to have greater input from older people on those partnerships.

Mr Ford: To some extent, that is up to each of the partnerships and how they choose to work. Certainly, I was not responsible for appointing members of the partnerships.

My impression was that older people were fairly well represented in general terms. However, the key issue is to ensure that the partnerships take account of local concerns and, when they engage to look at their work programme with local groups, the local age sector groups should lobby to ensure that their interests are taken into account.

Partnerships certainly have the liberty to set up specific working groups — subgroups in some areas — and bring in other people. So, if there are particular concerns for elderly people in such-and-such a district, there should be some working group set up to deal with that.

Mr Monaghan: Maybe we will raise it within the consultative framework, but it is an issue that probably needs guidance from the centre. There are areas where older people are well represented, but there are others where older people are hardly represented at all.

Mr Ford: Some of those sitting behind me have specific responsibilities on that issue. So I have no doubt that they are scribbling hard at the moment. Are you not?

Ms Watson: Excuse me. Can I just mention something? You have two sets of statistics as far as older people are concerned: ours and yours. In my opinion, people will tick a piece of paper, but, when it comes to ringing the police or going openly to the police, they are very reluctant. So maybe that is where the two sets of figures differ.

Mr Ford: Certainly, there is, I accept, sometimes a reluctance to speak to the police. One of the pleasant things about other statistics that we have is that the level of confidence in policing is going up. That can only mean that there is greater willingness to engage with the police. It is at a high level, and it continues to go up.

I accept that that does not mean that every issue is treated correctly by every constable at every time. However, the general trend is a very positive one. This is an issue that needs to be worked on all the time.

Mr Carson: I commend the motion.

Question put and agreed to.

Resolved:

That the Northern Ireland Pensioners Parliament notes the consistently high levels of fear of crime among our older people; and calls on the Minister of Justice to make this issue a top priority so that older people can live free

from crime and the fear of crime within their homes and communities; and further calls on the PSNI to provide more visible policing and to improve police response times to such crimes.

Health and Social Care for Older People

Mr Speaker: We have 40 minutes for the debate. The person moving the motion and two other Members will each have up to seven minutes to speak. Then the Minister will have 10 minutes to respond before I call the mover to conclude the debate. I call the chairperson of the Age Sector Platform Compton campaign committee.

Mr Hasson: I beg to move

That the Northern Ireland Pensioners Parliament recognises the importance of good dental care in maintaining health amongst our older population and calls on the Minister of Health, Social Services and Public Safety to provide free dental care for all pensioners; further calls on the Minister to provide better care for dementia patients, ensuring that clinics are designed and managed to provide dignity and respect to each individual; further calls on the Minister to consider the negative impact that local pharmacy closures will have on older people; and, finally, calls on the Minister to clarify how the Compton report's main thrust of providing care at home and in the community can be achieved in the current financial climate.

We sincerely thank the Minister for giving us his time. This is a massive subject, and I hope to speak on four topics.

The first is the funding of service delivery to older people. I could alternatively have called it "the elephant in the room". It is not mentioned a lot.

The Northern Ireland Pensioners Parliament supports in principle the proposals in the Compton report. Older people are, however, concerned about whether comprehensive day-to-day delivery is and will be sustainable. The elderly already dominate health and social care demand, both numerically and in their individual need, and the number of older people is mushrooming. Largely because of that, the current service, unchecked, would, within a couple of years, face an annual deficit of £500 million. That takes account of the current projected budget increases, and we should remember that 'Transforming Your Care' — Compton — makes no claim to eliminate that deficit.

With their needs shooting up and funding falling short, older people are worried about how they will be affected. They make a specific plea for positive action to counteract this. I ask what assurance the Minister can give that their fears are unfounded. Alternatively, what positive action can be taken to minimise any detriment

to meeting the health and social care needs of older people and thereby ensuring that they will genuinely receive high-quality healthcare?

11.45 am

The second topic is the delay in operating on older people. Anything that I mention is of high concern to the elderly as demonstrated in the network of pensioners' parliaments. Pensioners are concerned about older people waiting longer for surgery than the rest of the population.

We are told that elderly people admitted to hospital can have complex conditions that may interact and slow things up. Waiting for geriatric assessment can take a while. It is good to see from the strategy for older people that, for elderly fractures, the patient will have routine access to an orthogeriatrician from admission, with geriatric assessment within 72 hours. This is considered to be good for all concerned, expediting treatment through to and including discharge.

We are not aware of actual targets for surgery on older people or of whether, indeed, it is at all practicable, on the basis of averages, to allow for variables. Can the Minister advise us, fractures apart, what steps are taken to ensure that all elderly admissions will be urgently and appropriately assessed and, subject to complications, scheduled for treatment or surgery with the same priority as the general population? I should say that our evidence is anecdotal, but it is mentioned sufficiently persistently that it seems to have a sound foundation.

The third topic is carer support. There is great concern about carers, the work that they do and what it takes out of them, for lack of a better phrase.

The Northern Ireland Pensioners Parliament has called for better support for older carers, including more respite care. We are pleased to see the intention to provide more respite for longer periods and at times that better suit the carer. We are disappointed, however, that the specific 'Transforming Your Care' recommendation for the provision of psychological therapy, which has not been mentioned explicitly in the proposals but is in the body of the report and set out as a bullet point, has not been highlighted in the strategic framework for older people.

Pensioner carers, often elderly spouses and siblings who may be unwell themselves, are most likely to work 50 hours upwards a week. Presumably, with the discharging from hospitals of older people who are taking up beds, those

carers will now have to look after people with more dependency, who would previously have been looked after in hospitals, residential homes and nursing homes.

The strategic framework for older people recognises that

"Carers suffer from a great deal of worry or stress and high levels of psychological distress, including anxiety, depression, loss of confidence and self-esteem."

It would be a lifeline to have a trained, dedicated contact to talk about concerns that are emotional, personal or just private, issues that people would not want to talk about in public or to just anyone who came into their house from time to time. It might well help the carer to continue in that role. Can the Minister advise whether the issue has had any consideration, given that it was mentioned in Compton in general terms? In any event, does he agree how productive this would be for carers, patients and, ultimately, the Exchequer?

My third topic is carer's allowance. I ask for the Minister's indulgence. I know that it is not directly within his province, but I will be brief. It was raised here last year and is an item of considerable concern to the elderly, given the work that carers do.

Elderly people are concerned that pensioner carers are denied carer's allowance because of a rule that two benefits cannot be paid to the same person. One such benefit — carer's allowance — is a recognition of the carer's work and the other — the state pension — is broadly founded on a lifetime's contributions. Is either a benefit? I think that that, at least, is arguable. Nevertheless, the work is there, and the pensioner carers do it. Carers are estimated to save the public purse up to £4 billion a year.

This issue is the direct responsibility of the Social Development Minister. However, because of the crossover with his Department, can Mr Poots tell us whether he is aware of any developments? I know that it was discussed in the House earlier in the year. In any event, will the Minister be kind enough to mention our concerns to Mr McCausland, including our strong feeling of inequality?

The final topic is — sorry, that is my contribution. I beg your pardon; I had lost myself.

Ms Gallagher: Thank you, Mr Speaker. Good morning, Minister.

I would like to address two issues in the motion, both of which have significant implications for

the well-being of many older people in Northern Ireland.

First, the Northern Ireland Pensioners Parliament would like to request that Minister Poots give serious consideration to providing free dental care to pensioners. The section on older people in the 'Transforming Your Care: From Vision to Action' consultation document informs us that longer life expectancy is something to celebrate and that many older people enjoy good health. We want to continue that trend and focus on keeping older people well through the prevention of ill-health and the promotion of health and well-being. The Northern Ireland Pensioners Parliament wholeheartedly agrees with those sentiments.

According to the American Dental Association:

"There is no conclusive research showing that [tooth decay] causes heart disease...studies indicate that severe gum disease may be associated with several other health conditions...heart disease, diabetes or stroke. However, saying that two conditions are associated is not the same as saying that one causes the other.

Talk to your dentist about your overall health, especially if you have had any recent illnesses or have any chronic conditions."

The Northern Ireland Pensioners Parliament would agree that talking to your dentist about your overall health is good advice. However, that said, talking to your dentist and getting dental treatment costs money.

Let me give you some examples of dental costs from the Dental Centre's brochure. If you normally pay for National Health Service dental treatment, there are three standard charges: examination, diagnosis and preventative care advice costs £17.50; additional treatments, such as fillings, root canal treatments or extractions cost £48; and more complex procedures, such as crowns, dentures or bridges cost £209. In the private sector, new patient assessments cost up to £42; implant consultations £52; routine extraction £47.25 — I take it that is per tooth — and, if it is complex, up to £126; fillings cost between £42 and £78; and root canal therapy costs £99.75 per root.

I am sure you will agree, Minister, that the charges I outlined are way beyond what a substantial section of those of us in later life on the state pension could afford. An older person having to pay for any of the said procedures would be left with very little to live on out of their weekly state benefit of £107.45. As a result of their inability to afford those charges for dental treatment, many older people fall into ill health.

If they had access to free dental care, however, they could live longer and even save the National Health Service money in the long run.

The second issue I wish to address is the negative impact that local pharmacy closures will have on older people. For those of us in later life with different levels of well-being, the local pharmacy is as important to us as the Post Office, the bank, the GP surgery, hospital, police station or community facility. Many older people in Northern Ireland are dependent on the comprehensive service they receive from their local pharmacy. In the course of discussion on the closure of local pharmacies at the Northern Ireland Pensioners Parliament, delegate after delegate from all over Northern Ireland told the parliament how the local pharmacy often went well beyond the call of duty in the interest of older persons' well-being.

Community Pharmacy Northern Ireland informs us that dispensing fees have been cut, payments for drugs have changed dramatically and grants to pay for training are also affected. Accordingly, we in the Pensioners Parliament are extremely concerned that the £38 million community pharmacy cuts could have a major impact on the excellent services provided to older people throughout the community. Furthermore, the Northern Ireland Pensioners Parliament in May this year asked this question: can the community pharmacy service provide the enhanced role as outlined for them in the 'Transforming Your Care' document with a major reduction in its budget?

On behalf of the Northern Ireland Pensioners Parliament, Minister, I could ask you the same question. In fact, I think that the pharmacy is the first port of call for many older people because it is sometimes so difficult to get an appointment with your doctor.

Ms Clarke: Those of us who have dementia — I am in the third year — and who attend outpatient clinics for that and other illnesses really need to experience at all the outpatient clinics we attend dignity and respect, be allowed sufficient time to complete the appointment comfortably, be allowed to speak for ourselves and, most importantly, be seen for who we are. Whatever the stage of dementia, we remain persons and individual beings.

Memory clinics appear to be the main means of charting the progress of those who live with dementia. The clinic in my area is poorly organised and is, at times, overseen by members of staff from the local psychiatric hospital, including ward staff. I have no problem with that, if they know what they are doing and show some interest.

From the time of my diagnosis in March 2010, the memory clinic had been held at Antrim health centre. In December 2011, I received an appointment to attend the memory clinic in January at Holywell Hospital. That change of venue was not well received by Antrim residents with dementia or their relatives. The previous location at Antrim health centre was almost next door to the bus and train stations, much more convenient than where it is now. The present location of the memory clinic is at the furthest end of the grounds of Holywell Hospital. It is isolated and lonely.

12.00 noon

On 3 November 2011, I had what was for me an extremely traumatic experience at a memory clinic at Antrim health centre. My memory can be poor at certain times and in certain circumstances, but I cannot forget that occasion. Never before in my life was I made to feel like a non-person. My response, when the tears and humiliation eased, with the help of family and Wilma McIlroy from the Alzheimer's Society, was to think about and then write about how memory clinics could be simple, effective and, above all, welcoming and kind.

I have already sent a letter of complaint voicing my concerns. A meeting was arranged at Holywell Hospital with a doctor in charge of memory clinics, me, Wilma McIlroy and Thelma Abernethy from the Alzheimer's Society. At that meeting, I presented my written ideas regarding memory clinics, their setting and my expectation from quite a large nursing experience.

Memory clinics are held at six-monthly intervals, and, since the memorable one on 3 November last year, I have attended two. I honestly think, Minister, that they are a waste of time as they are, because they are not eliciting my state of mind or providing any evidence of my ability or inability to cope with the activities of daily living.

I know that my memory is failing and that other illnesses I have can complicate matters. If I attend a memory clinic, I would like it to be worthwhile — an honest sharing of where I am at. The memory test should be scrutinised. Does it fully give an adequate evaluation of where a person with dementia stands from test to test? What about asking a group of people with dementia — those who can — to give our opinions and suggestions regarding the efficacy of the memory test?

Lastly, I am very aware that the dementia strategy implementation group is working very hard, and I have the utmost confidence that its efforts will bear fruit. The Minister has been influential in getting a person with dementia on

to that committee, and it is a very good move. Thank you very much.

Mr Poots (The Minister of Health, Social Services and Public Safety): We do not have the wee clocks in this Chamber, so I will try to watch my time. First of all, thank you all very much for coming down today and for the valuable contributions that I have been able to hear thus far.

My dad complains from time to time that it is not much fun being older, and I always say to him that the alternative is not much fun either. Nonetheless, demographic changes have been a very positive thing, and we have lots more older people in our society, which is something that we should value. For example, we anticipate that by 2025 there will be 83% more people over the age of 85 than there are today. We want to ensure that we improve quality of life as opposed to just longevity. Mr Hasson raised the issue of demographic change along with a number of other areas that I would like to respond to.

In terms of high-quality healthcare and the financial implications, we are in a circumstance where there has been a worldwide recession. It has been particularly bad in the United Kingdom, where there has been a double-dip recession, and it has been worse in the Republic of Ireland. Consequently, the Northern Ireland Budget has been cut, and that has put pressure on the healthcare budget as well. It has not been reduced, but it has been largely flatlined. While inflation ensures that the prices of lots of the things that we are buying go up, we have the same amount of money to spend, so, essentially, that is a cut in healthcare funding. However, if funding alone could resolve the problem of healthcare, it would have been resolved. Funding was basically doubled over the 10-year period before the recession happened, and I do not think that we saw the requisite improvement in healthcare. I think that an awful lot of that money was lost. We need to apply our thinking to how we can do things differently and better.

Prevention and early intervention are key elements. I would far rather, for example, pay more podiatrists to ensure that older people had fewer falls and consequently did not end up in hospital requiring hip operations and all of the complications that go with that than pay for the hip operations. It is better for the person not to have the fall in the first instance.

I would rather see the roll-out of what we are doing with clinics that will have a GP under the same roof as radiographers, who can carry out an X-ray when someone has a chest problem, and physiotherapists who can find solutions that

involve a patient staying at home or being admitted to hospital. That would reduce the number of hospital admissions and deal more effectively with the respiratory and chest problems that people have.

We need to look at healthcare differently. If we keep doing the same thing, we will keep getting the same answers. We cannot keep doing the same thing in healthcare; we need to change it. When it comes to hospital admissions and surgery, it is right that older people should receive surgery at the appropriate time.

I cannot second-guess clinicians. Older people often develop complications after surgery, more so than people in their 20s and 30s. Therefore, clinicians will have to take all those complexities into account. Nonetheless, just because you are an octogenarian does not mean that you are not entitled to heart surgery. Octogenarians are getting heart surgery as things stand; that should continue to be the case, and we should support them in that.

Carers are absolutely critical to our society, and, as was rightly pointed out, the assessment is that somewhere in the region of £4 billion of taxpayers' money is saved as a result of the work of carers. I will be perfectly blunt: we cannot do it without carers. We cannot provide that from a government level. We need to support our carers and to ensure that we have appropriate respite to support them.

I heard the comment about payments. I can have that conversation with Nelson McCausland, but he will then have to have a conversation with Lord Freud at Westminster because all of this is driven from there.

I will move on to Anne Gallagher's comments and her call, in the main, for free dental care for the elderly. I welcome the interest in maintaining good oral health among the older population of Northern Ireland. My Department has invested a considerable amount of money in the provision of health service dentistry, ensuring that more dentists are available and more patients are registered in Northern Ireland than ever before.

There was a time, particularly when things were booming, when a lot of dentists would take on only private patients, and consequently the problem was much worse a number of years ago than it is now. There are more healthcare dentists available now.

Older people who receive the pension credit guarantee or have a low income are and will continue to be entitled to free dental care. I know that many pensioners already receive help in that way, and I trust that being able to

use health service dentists as opposed to private dentists will be of some assistance to the remainder. We are not in a position financially to offer universal free dental care at this stage, but it is an option that we can continue to keep open over the years.

Ms Gallagher also mentioned pharmacy closures and the potential for them. More pharmacies were opened last year, so, at this stage, we have not got to the point of pharmacy closures. Pharmacies have come under a fair degree of pressure to reprofile how they are paid for the work that they do.

I value the skills of pharmacists and the work that they do. Their skills are not as well utilised as they should be, nor are they fully exploited to the benefit of the public. We are working with pharmacists, saying that we do not want them to be solely a facility for dispensing drugs. There is so much more to which their skills can be applied, and we want that to be the case. Pharmacists are one of the most if not the most accessible points of healthcare in Northern Ireland. We want to use that resource better and find out how we can reimburse them for doing that. That discussion is ongoing.

I trust that we will arrive at a situation where we can support pharmacies to carry out a greater extension of what we are looking at in Transforming Your Care, which is to bring healthcare closer to the population, as opposed to focusing on hospitals and everything filtering down from that. Those negotiations will be ongoing. We were able to give additional financial support to pharmacies largely operating in areas of disadvantage and, indeed, to rural pharmacies.

Theresa — I think that we have met before — raised the issue of dementia care. Of course, dementia is one of the really big problems we face. If we do not find better ways of dealing with dementia, it will place a huge cost burden on the taxpayer. More important, it will have a hugely detrimental impact on the lives of individuals. We expect the number of dementia sufferers to rise from what it is now — around 19,000 — to closer to 60,000 by 2051. So, clearly a course of work needs to be done.

We need to invest in research. If we could delay the onset of dementia for five years by getting the appropriate treatments and support for those showing early signs of dementia, the benefits for the individual and for us financially would be very significant.

We launched the dementia strategy last year. The strategy requires us as a Department to look more critically at how we deliver services for those with a dementia diagnosis. I noted

what you said about how the Northern Trust and the Antrim area has dealt with it and about the issues at a local level. That should be looked at under the strategy.

We want to ensure that people with dementia are treated with awareness and respect, especially by those providing the services, and are supported to maintain their independence for as long as possible. Importantly, more needs to be done to promote the key message that a healthy lifestyle can delay or prevent the onset of dementia in the first instance and, indeed, many other long-term conditions.

How are we for time, Mr Speaker?

Mr Speaker: Minister, you are all right for time.

Mr Poots: He is not being as strict as he usually is. *[Laughter.]* He has me really scared, so he has. Did you see how nervous I was?

The key messages in the strategy include the following: prevention, raising awareness and addressing stigma; improving access to early diagnosis; developing a staged approach to care and support; improving staff awareness, which Theresa referred to, and skills; and redesigning services to provide care and support, as far as possible, in people's homes.

In respect of the clinics mentioned, the strategy states that a minimum range of care, support and advice services provided by a memory service should be agreed at a regional level. Memory services should be developed to meet local needs, on the basis of an agreed minimum range of services and in line with the principles outlined in the strategy.

Also underpinning the strategy has been the development of values and principles that are considered key to guiding the future development of services for people with dementia and the people who care for them. Those are dignity and respect; autonomy; justice and equality; safe, effective person-centred care; care for carers; and skills for staff.

So, one year on from the publication of the strategy, we have managed to establish a regional group between the Health and Social Care Board and the Public Health Agency that will oversee the implementation of the strategy and its actions. We have also been able to identify £1 million to invest in the development of the strategy. There is a course of work to be done on dementia. We recognise that, if we do not do this better, we will run into a huge amount of problems in later years. We recognise that challenge.

I hope that I have covered most if not all of the issues raised. I am available for questions, if that is appropriate.

12.15 pm

Mr Speaker: I call Mr Hasson to conclude the debate. Mr Hasson, you may want further clarification from the Minister, and other members may want to ask for clarification from the Minister as well.

Mr Hasson: Mr Poots, I have worn out a couple of pairs of glasses trying to read all the reports, consultations and policy. It is a deluge. There is much in 'Transforming Your Care' that is good. Unfortunately, we are inclined to concentrate on what we think needs looked at.

The elderly are a vulnerable group and were seen as a big part of the problem in the sense of occupying hospital beds that were not needed and so on. They are inevitably a big part of the solution, and 'Transforming Your Care' devotes a large part to older people and to long-term conditions, which normally affect older people.

Older people are a very broad target for resource rationing, and they feel vulnerable. Minister, you outlined where you were at. We understand that and largely agree with it, but, nevertheless, the elderly seek an assurance that they will not suffer unduly and that steps are being taken to protect them, because they still feel that vulnerability. The money is not there for the service, and the elderly are a part of it. As I say, they are a broad target because they take up more than half of the health and social care demands. That is the biggest concern. That is all that I wish to say, Mr Speaker.

Mr Speaker: Does anybody else want to speak?

Ms Clarke: You hear about the group in Scotland of people with dementia. Is there any hope that, some time soon, we will be able get together a group of people with dementia in the fairly early stages to help with understanding of it? I have been beating on about that for a long time and have just discovered the one in Scotland.

Question put and agreed to.

Resolved:

That the Northern Ireland Pensioners Parliament recognises the importance of good dental care in maintaining health amongst our older population and calls on the Minister of Health, Social Services and Public Safety to

provide free dental care for all pensioners; further calls on the Minister to provide better care for dementia patients, ensuring that clinics are designed and managed to provide dignity and respect to each individual; further calls on the Minister to consider the negative impact that local pharmacy closures will have on older people; and, finally, calls on the Minister to clarify how the Compton report's main thrust of providing care at home and in the community can be achieved in the current financial climate.

Silver Saver Campaign

Mr Speaker: At this point, I call Patricia Donald, chairperson of the Age Sector Platform, to say a few words about the Silver Saver campaign and to make some concluding remarks.

Ms Donald: Thank you, Mr Speaker, for inviting us back again; we must not have been too bad last year. We appreciate very much the opportunity to come back and thank the Ministers who were able to attend.

The Silver Saver campaign is a card that looks like this, and you sign it on the back. There are some in the packs, and you can take them away with you. The idea is that we ask the shops to run a discount day similar to the one in B&Q. We hope that you will take them away.

To date, we have 5,000 signatures, and I do not know how many people in the House could sign them, but perhaps you could give some to some of your Members. Mr Poots might take some for the people in his Department. We would be grateful for that.

We are very grateful to you and to the Ministers for coming. I am sorry that Mr Bell is not here. I do not what he is learning about old people in China, but we will be very interested when he comes back. *[Laughter.]*

Mr Speaker, it is my very pleasant duty to present to you the Pensioners Parliament report for 2012, and I am sure, Minister, that you will get one, too. It is my pleasure on behalf of the Pensioners Parliament to present it to you. I will check with you when you have read it. *[Laughter.]*

Mr Speaker: Thank you very much for the report.

Ms Donald: Before I leave, I want to say, "Thank you" to your staff, the staff of the Assembly, the Speaker's Office, the Business Office and Communications. We seem to have got a little bit muddled about the date, but I come from Fermanagh and a Methodist Church background that floats on tea, and I was glad to see that, even though we arrived on the wrong day, they were able to get us tea very quickly. We want to say, "Thank you very much indeed" for organising that for us.

And to our own staff I say how often it is the family that everyone takes for granted. I would like to say that we do not take our staff for granted. We are very grateful to them: Eddie Lynch, who is our chief executive; Alison McKenna, who chases us all around and gets us gathered up and get us in the right place at

the right time; and Seamus Lynch, who brings broad political aspects. Where I am trusting, he is suspicious, so perhaps it is a good combination. I also want to say, "Thank you" to Nicola Johnston. She is on the phone or on the e-mail, and she makes sure that we are kept up to date with what happens.

We had a lovely experience with Eleanor Mallon. Eleanor was with us for a year out of her university course. Talk about recycling? She went off, and then we appointed someone who could not come, and Eleanor came back. So we are very glad to have Eleanor with us. She is heading off to Australia next year. We will wait to see what the services there are like. I offer a very sincere "Thank you" to the Members of Pensioners' Parliament, many of whom are here today.

I have come from Fermanagh. I do not know how far the rest of you have come. We enjoy coming; we enjoy the parliaments; and we love the privilege of coming here. Thanks to the members who spoke and presented the motion so brilliantly. Thank you very much for all you have said and done. And again, I say, "Thank you" to the Ministers.

I hope that you have all enjoyed the day so far. I know that some of you will stay for a tour of the building and for the tea dance. Unfortunately, I have not brought my dancing shoes, so I will head back to Fermanagh. Thank you and safe home.

Mr Speaker: Thank you very much, Patricia. As Speaker of the Assembly, I thank everyone present. A special word of thanks goes to the organisers from Age Sector Platform. I know that this event certainly would not happen without people behind the scenes organising the arrangements and ensuring that the event is a success.

I hope that you have all enjoyed the occasion as much as I have. I have to say that I found the contributions very informative. They were delivered in a very passionate and caring way. I believe that today's event was even better than last year's, and I hope that today has given you a better insight and understanding of how the Assembly works in Parliament Buildings.

Of course, you had opportunities to raise issues that deeply concerned yourselves, as the older generation and I thank the Ministers for coming along and taking time out of their busy schedules to be with us.

Certainly, older peoples' issues concern us all and are raised continually in the Northern Ireland Assembly. They are uppermost in the minds of all the MLAs and public

representatives as we move forward into the future.

The debates have been interesting and informative, and, for me, it has been a real pleasure to chair the debates. Once again, to all of you, "Thank you" for coming along and taking part in all the debates.

We now come to the formality of closing our proceedings, in the normal way, through an adjournment.

Adjourned at 12.25 pm.