

MAYOR OF LONDON

Emma Best AM

Chair of the London Assembly Health Committee
C/o tim.gallagher@london.gov.uk

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Date: 26 August 2025

Dear Emma,

Thank you to the London Assembly Health Committee for sharing with me its report on End-of-Life Care in London. I am sorry for the delay in responding.

The challenges around end-of-life care are of great concern to me. It is crucial to ensure that every Londoner can die at home if they wish or in a place of their choice, in comfort and surrounded by people who care for them. Unfortunately, this is not always the case.

A lack of investment under the previous Government has led to a situation where too few Londoners are supported to die in the way they would wish. That is why I have been encouraged to see this Government taking vital steps to ensure every person has access to high-quality end-of-life care.

In addition to the £100m of funding going towards hospices this year, the Government, as part of its recently published plan, *Fit for the Future: 10 Year Health Plan for England*, is committed to a Neighbourhood Health Service that will be better able to support patient care. Neighbourhood health centres will provide easier, more convenient access to a full range of healthcare services, and neighbourhood teams can include a range of roles, including palliative care staff, community health workers and volunteers. This will enable Londoners to have choices around end-of-life care from hospices or the voluntary sector, in the location of their choosing, and ultimately make care more accessible for people and their families at what can be an incredibly sensitive and difficult time.

In response to recommendations 1, 2 and 3, it is worth reminding the Committee that I do not have any direct responsibility for the commissioning or delivery of health and care services – this includes support to Londoners for end-of-life care. However, I do have a statutory duty to tackle health inequalities through the 2018-2028 Health Inequalities Strategy (HIS) and the recently published HIS Implementation Plan 2025-2028. The Plan sets out the priority actions I have committed to taking forward in order to implement the Strategy over the next three years. One of its key objectives is 'supporting healthy communities', which includes initiatives to reduce social isolation and build stronger community connections. Work will include promoting community engagement, encouraging social integration and working with partners, including community organisations.

My Health Adviser and I meet regularly with the NHS and other health and care partners, and we will continue to use those meetings to focus on the needs of Londoners, such as end-of-life care. I continue to drive greater collaboration between key stakeholders and partners, including the NHS, Integrated Care Boards (ICBs), the Office for Health Improvement and Disparities, and local and national government, to support healthy communities.

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I share the Assembly's concern around the intersection between poverty, access to adequate and secure housing, and access to good quality end-of-life care. I also acknowledge the vital role of housing in this context and how poor housing conditions can hinder the delivery of safe, quality end-of-life care at home. That is why I continue to work hard to tackle the housing crisis head-on in London.

I also recognise there is substantial evidence that those at the sharp edge of inequalities, particularly people experiencing homelessness, face significant barriers to appropriate end-of-life care. My Rough Sleeping Plan of Action aims to provide leadership to join together services and make sure people can get the help and care they need, as early and as simply as possible, as well as to prevent rough sleeping wherever possible and to deliver rapid, sustainable routes away from the streets.

In response to recommendation 4 on the cost-of-living crisis, my Financial Hardship Team is carrying out a full content review of the Cost-of-Living Hub over the summer months, with a refreshed Hub expected for autumn 2025. Officers will make a point of considering how the Hub addresses the needs of Londoners at the end of life and the most suitable place on the Hub to include any specific information. The Financial Hardship Team will consult with the Public Health Unit on any decisions for final content included on the Hub, ensuring that health and health inequalities are considered.

Existing links on the Hub, such as the Government's own Universal Credit webpages and links to support from carers organisations, address issues relevant to financial support and wider assistance in preparation for the end of life. This can be very important because welfare benefits can be fast-tracked in such circumstances, and fewer conditions are applied to claimants. There is also a separate section for mental health support that Londoners could find useful if someone is expecting to come to the end of their life. My Financial Hardship Team will keep in mind the needs of Londoners at the end of life when considering its own data and research work and in the conversations it has with wider stakeholders.

I was pleased to read in your report about good practice in end-of-life care across London, especially in north west London. Where possible, I will continue to advocate for this joined-up approach to end-of-life care across the NHS and ICBs in London and encourage adoption of good practice across the ICBs.

Thank you for investigating this very important issue.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Sadiq Khan', with a small '2' written below the name.

Sir Sadiq Khan
Mayor of London