Lecture by Prof Allyson Pollock
1.5.2014 Bath University

'The End of the NHS? How the government is privatising healthcare in England'

Summary of Nigel Gilbert’s Notes

2012 Act

This Act removed the duty of the Secretary of State to provide health care for all. (In effect, it removed the socialist basis established for the NHS in 1948.) The Act gives powers to providers to say what patients they wish to take.

CCGs will not commission all the services people need. They do not have a responsibility to cover everybody in a given geographical area. Only those who have a GP qualify for any services. Already a substantial number of people do not have GPs., such as homeless people and refugees.

Prof Pollock predicted that health care for the elderly will be abandoned by CCGs.

Prof Pollock is collaborating with the former Labour politician, David Owen who defected to form the Social Democratic Party, in preparing an Emergency Bill for the next government to reintroduce the duty of the Secretary of State to provide health care for all. Perhaps surprisingly, this is Owen’s initiative, but he was medically trained.

(His bill is entitled the NHS Reinstatement Bill)

Prof Pollock said that it is not known what positive measures the Labour Party will take concerning the NHS if elected to government, although they have stated they will repeal the 2012 Act.

Media

Prof Pollock stated that the changes have been slipped in by the government in a way which has left many people unaware of what has happened. (The packed audience looked relatively well informed, but several spoke about their astonishment about what they had heard from Prof Pollock.) The media is not covering the politics of the NHS in any detail. She referred particularly to the threat to mental health services. There have been occupations of mental health services to try to save them, but this has gone largely unreported.

The BBC’s weakness is in part due to the fact that it has been subjected to marketization just like the NHS. Prof Pollock is an acknowledged academic expert on the NHS, but the BBC did not once ask her to comment during the 12-month passage of the NHS Bill.
Politicians of all the main parties must share the blame for the suppression of the truth about what is happening to the NHS. (Prof Pollock referred in her lecture to the efforts of the NHA Party to counter this.)

**Drift to US style system**

There is a deliberate plan to create a United States type system based on private insurance. A deliberate effort is being made to make out that the NHS is unsustainable. But hospital financial deficits have been manufactured. £3bn has been returned by the NHS to the Treasury as “unspent”.

The government is considering a voucher system whereby you will get a certain amount of free health care, then you will be on your own.

£112bn of NHS funds are going to private providers.

The original NHS administration system was very simple. In the 1950s and 1960s it was regarded as the model of efficiency and other countries followed later with a similar system. It has been replaced by an extremely expensive and complex administrative system. Originally the administration was there simply to serve NHS staff and patients. Now managers of each part of a fragmented organisation serve their own corporate interests, and much is spent on servicing contracts.

As % of GDP, the US spends far more than any other country on health. Yet 61m of its people remain uninsured and so uncovered by the health services there. Many bankruptcies in the US are due to an inability to pay health bills.

A study by the US Institute of Medicine identified a number of problems in the US system:

1. Unnecessary services – Prof Pollock mentioned there had been a scandal about some patients receiving unnecessary cardiac surgery.
2. Inefficient services.
3. Excess administration.
4. Too high prices.
5. Missed opportunities for prevention of health risks.

(Still looking this up, but here is a possible link)


Other sites refer to the “US Health Disadvantage” – Americans (even rich ones) live shorter lives and are in poorer health than their counterparts in relatively wealthy countries.

And this is the type of health service being created for us. One or two baffled members of the audience asked “Why are they doing this?” Other members of the audience answered along the lines of financial self-interest. Prof Pollock commented that about 1 in 4 MPs have such financial interests in health companies.)
Privatisation

PFI is the engine of privatisation and is creating enormous problems. The government refuses to put PFI contracts (such as the one for Worcester Royal Hospital) in the public domain. PFI creates enormous fragmentation. The costs are high. In effect, we get one hospital when before we got two.

She referred to the reduction of Kidderminster Hospital as a casualty of the grossly expensive PFI contract for Worcester.

The private sector operates quite differently to the public sector. Markets operate through “risk selection”. Private bodies are “risk averse”.

In 1948 the private sector was not interested in taking on health services.

40% of nurses in the south west of the country are already in the private sector.

Principles

The origins of the NHS lie in the Beveridge Report of 1942. Beveridge, a Liberal, was scathing about those who told him the NHS could not be afforded.

The principles of the 1948 NHS were:

1. Redistribution (ie paid for out of progressive taxation)
2. Universality (ie for all)
3. Free
4. Public ownership
5. Public accountability
6. Integration (ie a patchwork of services were pulled together and organised – we are now recreating a disorganised patchwork)

Campaign

Although she is a prestigious academic, and although she presented a formal lecture, Prof Pollock’s purpose was to instigate as many of us as possible to campaign.

We must campaign against privatisation. We must campaign against every closure now, because so many beds have already been lost.

She expressed great concern about the use of our personal data held by the NHS. The government regards this data as an asset, and it will be made available to the many private companies hanging round the NHS.

For more on Prof Pollock see

http://www.allysonpollock.com