

# KEEP OUR NHS PUBLIC STATEMENT ON THE NHS

## April 2007

### PREAMBLE

1. Over its lifetime the National Health Service has proved itself to be effective in delivering healthcare to the population on the basis of need rather than ability to pay. It has enjoyed (and in many ways still enjoys) an international reputation for high standards in professional terms and in terms of accessibility, apart from the longstanding problem of waiting lists for some services, particularly non-urgent surgery.
2. Members of Keep Our NHS Public welcomed at the time the Labour government's massive injection of additional funding for the NHS. However, we also recognised that this huge investment carried high risks if the money was not used effectively and budgets were not well managed. An organisation of such size and complexity as the NHS requires rigorous attention to ensure efficiency and effectiveness. There has been much evidence of the need for improvements in this area.
3. The particular strength of the NHS has been in its 'public service ethos', a culture in which its staff see themselves as making a worthwhile contribution to society and take pride in their work of caring for others. Its emphasis is on a cooperative and collaborative way of working- whether between primary and secondary care, between and within hospitals, or in conjunction with local authorities.
4. This integral character of the NHS is now being put into question by the introduction of competition or 'contestability'. Much of the additional money has been wasted on ill thought out change, expensive and unnecessary private sector deals, and on the inevitably high transaction costs of turning a service into a market. This has been exacerbated by short term financial pressures resulting in cuts, closures, redundancies, failure to employ much needed newly trained staff, and falling morale.
5. We acknowledge that there have been some significant improvements but these have tended to be concentrated in politically sensitive areas like surgical waiting lists with neglect of many other important parts of the service. With spending now well over twice the level of 10 years ago, what evidence is there that health care is twice as good?
6. We support government in maintaining payment for health services out of general taxation (as advised in the Wanless review of 2002) as the most efficient and equitable means of funding healthcare. Provision through progressive taxation as against insurance systems does not have the burden of transaction costs and is much fairer for poorer sections of the population.

### PROPOSALS

There must be an end to the waste of public money, fragmentation and destruction of a highly valued public health service. The essential measures are:

#### In the immediate future

- a) No further private sector involvement, except for short-term contracts where there is a clearly demonstrable need whilst NHS facilities are being built up.
- b) No vague use of the term "reform" unless the purpose and meaning are clearly set out.
- c) No further use of expensive management consultants unless authorised by the National Audit Office (which is answerable to parliament). Where specialist skills are

required in the long term, such as in IT, staff should be directly employed by the NHS so that continuity and ongoing responsibility are secured.

- d) No further extension of market methods e.g. Foundation Trusts, misnamed 'Payment by Results', Choose and Book.
- e) Restoration of the right of General Practitioners to use their clinical judgment in referring patients to specialists, but subject to peer review and clinical audit.
- f) A greatly simplified and therefore cheaper system of financing NHS organisations by the allocation of budgets according to population needs, allowing for better work planning and ensuring better budgetary control.
- g) To enable this, replacing the system of separate purchasers (commissioners) and providers by direct management of the planning and delivery of services, subject to clinical governance.

## Looking further ahead

- a) The NHS has suffered from frequent, ill-considered and major organisational changes throughout much of its history by governments of both complexions. We are therefore against such changes. If not well thought through they are damaging both to service efficiency and staff morale.
- b) There are, however, elements of the health service the country needs for the future that should be put in place. The NHS should continue to be overseen politically. However, at national level we have experienced ill-advised and inappropriate 'micromanagement'. These problems can be dealt with by separating the NHS Executive from the Department of Health so that central government limits its role to setting the strategy, providing the funding, and holding the NHS to account for proper delivery of the service. There is without doubt a need for greater democratic accountability at local authority level. The emphasis on managing the NHS should be bottom up, not top down as at present, to make use of the know-how and experience at every level and in each area of expertise so involving the workforce in the management process. Better means of involving patients, carers and the wider community need to be implemented without further delays.
- c) Public health needs particular consideration. At national level there should be a Secretary of State for Public Health with a remit across departments to drive all aspects of health promotion and ill-health prevention. The lead on public health at local level should be transferred to local authorities re-establishing the role and authority of the Medical Officer of Health (or some such title). Thus at both national and local levels all areas of life impinging on the health of the population should be involved.
- d) KONP therefore urges the government to give consideration to the proposals set out above. Further, KONP believes that, having done so, the government should carefully plan in conjunction with the workforce and the public how best these changes should be implemented. We believe such an approach would go a long way to re-establishing the health service the people need.