

NHS and the predicted £30 Billion deficit: It's time for change, but change is about much more than simply saving money

Adam Tugwell | 11 July 2013



You can't really help but admire the audacity of Sir David Nicholson, the outgoing head of the NHS, for his latest attempt to sidestep and cover the tracks of his questionable tenure by shining a light on what could become a £30 Billion deficit within the NHS.

His failure to fall on his sword over the Stafford Hospital outrage was beyond what many will agree as being in good taste and was compounded yet further by his indignant refusal to accept any form of responsibility, despite being the Executive Officer at the

very top of the tree and arguably placed within the one position where there simply is nowhere to run or hide when it comes to carrying the can for mismanagement on what appears to have been an unprecedented scale.

The most regrettable facet of this latest twist is that the lack of respect which Nicholson holds with people now will surely deflect attention away from the cold reality of his message, which in a perhaps more capable set of hands would have not only been brought to public attention much sooner, but effectively acted upon too.

Many of us already realise and understand just how serious the problems throughout the NHS actually are. In local politics, where we closely scrutinize the real-world impact of ward and department closures; the centralisation of services, and the amalgamation of GP's practices into so called 'community hospitals', there has been little doubt for us all of the real purpose of such changes for a considerable time.

Cost aside, the principles upon which the National Health Service were created and the application of universal care are still however very much valid even today.

But it is the continued compromise of those very principles at their heart which has led to the seemingly insurmountable financial and management problems that we face today.

These were principles that were intended to prioritise the care of the end-user; not the interests of managers, union leaders and politicians, who have all had something to gain at various points by moving those priorities elsewhere; often at everyone else's cost.

Any commercially run business or ethical organisation is created and run to efficiently provide a particular product or service to its customers. It is not created or subsequently evolved to disable itself by prioritising the working conditions of its workforce and certainly not run for the benefit of harvesting statistics as part of some politically expedient mind warp which is simply designed to spread the message that things are running far better than they actually are.

Tragically, this is pretty much in a nutshell what the NHS represents today and evidence would suggest that people are dying needlessly as a result of it.

It's not as if health professionals are oblivious to the realities of the situation either. Talking to a career nurse only a few weeks ago who freely admitted that she had been a lifelong socialist and Labour Voter, even I have to admit to my surprise when she clearly told me 'Adam, I love the idea of socialism and what it stands for; but in my experience, it simply doesn't work'.

Herein lies the greatest problem with the NHS; Its culture.

The culture within the NHS is the base issue which much be faced, understood and addressed if the Organisation as we have known it and the services that it provides are to be saved and our society is to be protected from the arrival of either tiered health provision across the board or UK-wide service which is only made available to those who can pay as they use.

Right now, we are all witnessing the preferred method of dealing - or I should say - avoiding reform throughout the NHS, NGO's and the tiers of Government, which presents itself in the form of privatisation. Privatisation of any Government funded service has arguably become nothing more than avoidance of the need for reform at its worst because services are never the same when profit is the master. Furthermore, recreating public-run services once they are lost will be a whole lot harder than the reform which most Politicians already seem to see as impossible.

The only way we will keep and maintain the NHS as we have known and appreciated it in terms of what it offers the public will be the result of transformation and change which must begin with Government and work its way right the way through.

The NHS is strangled by the culture of workers' rights, tiers of managers who barely understand what practical patient care is, Europe and the rise of the blame culture, where practitioners are increasingly forced to consider the bureaucratic pathways to treatment first, before addressing the urgencies and acuteness of clinical need. *Ironically, such delays may of course be little hindrance to treatment for the people who will be looking for an opportunity to sue them either.*

Government must act now to change and support the whole working culture of the NHS and put patient care back at the forefront of everything they do, rather than putting everyone else and the profit hungry ambulance chasers first.

It's not an easy job by any means and most of us do appreciate that. But Governments get elected to take responsibility for big problems just like these; not so they can talk up the delivery of results when what they seem to be doing is looking for the easiest way out of problems they just aren't responsible enough to face.

The patients of today and tomorrow don't care about statistics or the money that providing treatment costs.

What they do care about is trusting that they can rely on getting medical help when they need it; where they need it and without worrying whether or not they qualify for it. Every day, the number of people who simply don't have that trust are growing rapidly, and each new day is a sorrier one than the day before.

If Government keeps treating the problems in the NHS as if they all revolve around money, the cost of running the service will probably lead to its end.

It's time for change throughout the NHS. But real change is about much more than simply saving money.

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