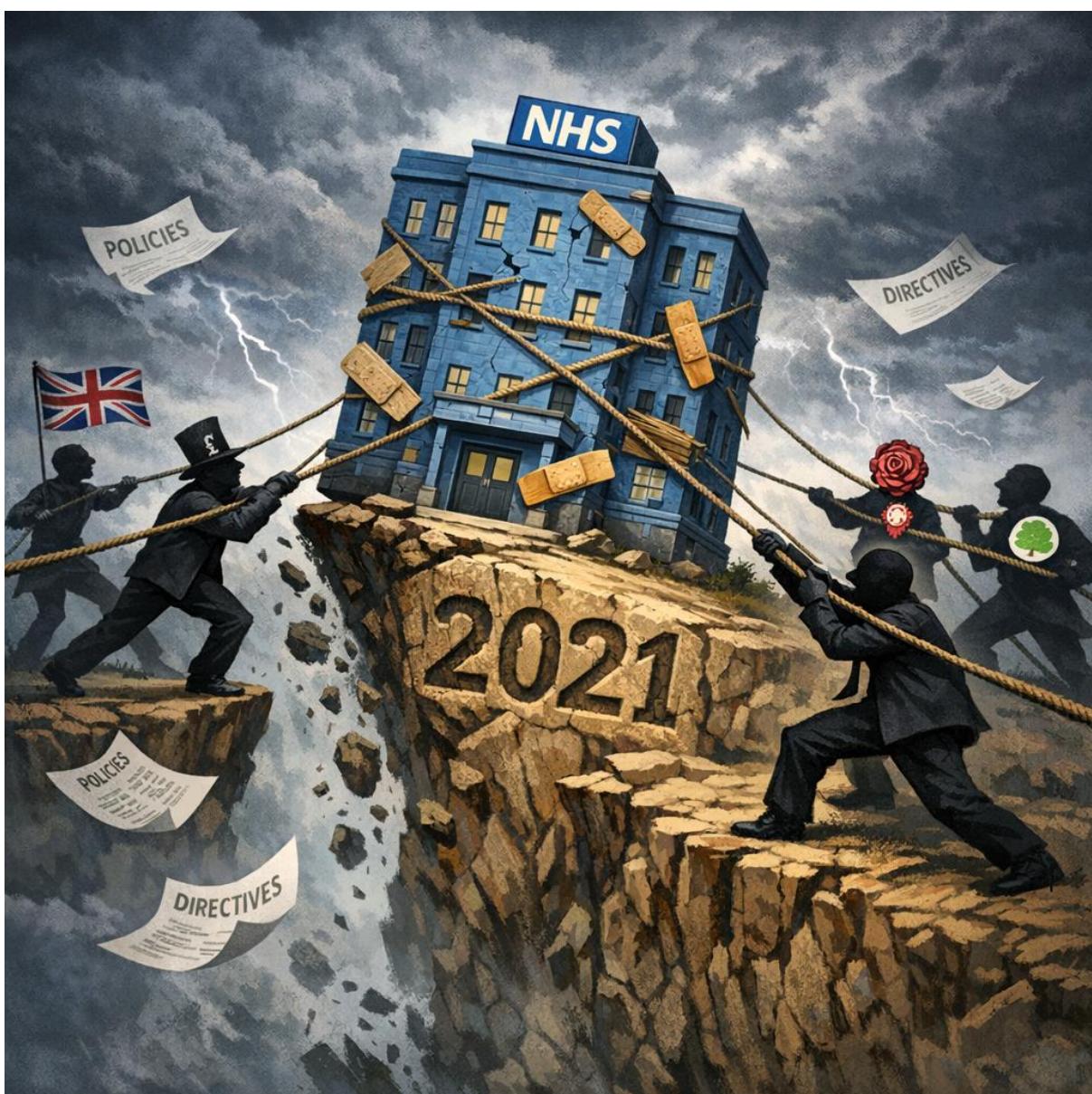


The NHS is broken because every Government (and the EU) have added their own fix. If we don't have leaders big enough to tackle all that needs to be done very soon, it will no longer exist

Adam Tugwell | 2 August 2021



Perhaps the greatest travesty of modern politics is the overwhelming desire that our political class have to keep interfering with the management of services which are paid for out of the public purse.

It is easy to fall into the trap of thinking that's exactly what we elect politicians to do. But we don't elect them to do that. *It's just what they want us to think.*

Overall strategy of public services and how they are paid for is the domain of politicians. Operational management and day-to-day decision making are the preserve of those best suited to address the need or the problem. Operational management is not and should never have become a political choice.

The NHS is in serious trouble today. Not just because of the Covid Pandemic – which has had a big role to play. But because the whole organisation and framework has been a political football for much of the time that it has existed – simply because cynical, self-serving politicians have identified that it is easy for them to use the NHS to big themselves up and 'win' votes that way.

On the left, the Labour Party keeps shouting about privatisation. Yet the kind of privatisation that exists has come as a systemic response to the burden of employment rights and unaffordable working conditions that they and their love of EU rules so idealistically but impractically imposed.

On the right, a penchant for throwing money at all problems because there is neither the motivation or principle at work to tackle uncomfortable challenges head on (in case they result in a loss of votes) has meant that the Tories have just poured petrol onto a fire of increasing problems, making the greed and profiteering that drive staffing agencies and contractors legitimate. The most obvious result being that NHS staff don't get paid as they should, whilst their contemporary temporaries cost more than the organisation or the public purse can *normally* afford.

It doesn't stop there. The NHS, like all public sector organisations has become highly protectionist in nature, leaving staff to devalue the use of common sense and stick to the most basic requirements of their job descriptions in a way that would resemble the most effective type of superglue.

Passing the buck to someone whose specific job it is to do anything outside this Public Sector framework is commonplace. And when that doesn't work, a new job is created, taking even more money away from the frontline and meaning that jobs that were once done by frontline staff or by their immediate managers may have now evolved into multiples of backroom staff or contractors in addition to that one original post.

To be fair to the left, there is no argument that can easily be made to justify the presence of private interests in the provision of public services that are paid for by the public purse. However, the stranglehold that the rights lobby, public sector pensions (and the damage that

Gordon Brown did in 1997) and devices such as the EU Working Time Directive have made, make it feel much easier for those obsessed with avoiding difficult management decisions to avoid employing staff directly in a convoluted process that ends up looking like privatisation by choice.

The rich irony is that the NHS is on a precipice, but could be saved from going over, if we had leadership from government and politicians not obsessed with easy options and avoiding all risk to themselves and their position.

We need a Government that is ready to take on the many different agendas that are not patient centric right across the NHS, and replace self-centred thinking with prioritising what's best for the patient and in the best interests of the public at large.

Otherwise, we could very quickly find ourselves in a place where healthcare provision either becomes tiered in its availability or becomes only accessible at a variety of levels based on ability to pay.

Once this happens, the NHS will be a service that will neither be universal nor public, because it is not something that we can all afford.

Further Information

To explore more of Adam Tugwell's writing, including the online edition of this post, please visit:

www.adamtugwell.blog

Copyright Notice

Copyright © 2021-2026 Adam Tugwell

All rights reserved.

This publication reflects the personal experience, views, and opinions of the Author.

No part of this work may be reproduced, stored in a retrieval system, transmitted, adapted, translated, or otherwise used in any form or by any means - electronic, mechanical, photocopying, recording, or otherwise - without prior written permission from the Author.

The Author asserts the moral right to be identified as the creator of this work and to object to any distortion or misrepresentation of it.

This work may be downloaded and stored for personal, non-commercial use only.

Any unauthorised reproduction, plagiarism, or misattribution constitutes a violation of copyright.

The Author accepts no responsibility for, and makes no endorsement of, content accessed through external links, PDFs, digital platforms, organisations, or individuals referenced herein.

Readers remain solely responsible for evaluating the accuracy and suitability of all external material.

This copyright notice shall be governed by and construed in accordance with the laws of England and Wales.