

Britain's Labour government massages the figures on hospital waiting time

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Labour's efforts to cut hospital waiting lists by cooking the books are endangering people's lives, official statistics reveal.

Figures released by the Department of Health on Thursday, covering April to July 1999, showed that the number of people waiting more than 13 weeks for an outpatient appointment in England has risen by 29,000. The total number of people waiting over 13 weeks for an outpatient appointment was 485,000 compared with 456,000 in the quarter up to the end of March. Although the numbers waiting over 26 weeks dipped slightly, from 153,000 in March to 146,000, it is still significantly up on the 85,000 waiting in 1995, two years before Labour took office.

Reducing the time that people spend on hospital waiting lists was a central pledge of Labour's 1997 general election manifesto. Last year it promised to cut the National Health Service waiting list by 100,000. The only means by which this could be actually achieved would be to recruit and train more consultants and surgeons, and expand hospital facilities. But Labour is committed to reducing public spending. It has continued the Conservative government's Private Finance Initiative (PFI)—a backdoor means of privatising healthcare—that reduces the number of hospital beds, staff and facilities.

In April, the government announced "tough targets" for hospitals to reduce their waiting figures. Described by Health Secretary Frank Dobson as a "carrot and stick" approach, those hospitals which reached their targets would receive aid from a £32 million "performance fund". Those who failed would have up to 10 percent of their funding diverted to a regional "Waiting-list Task Force".

Without the necessary resources, the end result has been an extension in the time that patients wait to see a

consultant. This effectively keeps them off the surgery waiting list, so massaging the figures. It also prevents them from receiving the treatment they require as quickly as possible. Thousands of patients—including those awaiting treatment for major illnesses such as heart problems and cancer—become pawns to be used in the government's cheap electoral manoeuvres.



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