

# Britain's National Health Service faces wholesale privatisation

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Free and comprehensive health care is set to end with the passage of the Conservative/Liberal Democrat government's Health and Social Care Bill 2011.

The National Health Service (NHS), established in 1948 as the centrepiece of Britain's post-war welfare state, is the world's oldest and largest taxpayer-funded system. It faces rapid privatisation on the basis of introducing a US-style user-pays model.

The bill was first put forward in the House of Commons in January last year and a vote to approve its general principles passed by a majority of 321-235 that month. The measures have no democratic mandate, having been neither part of the Conservative's or Liberal Democrats' 2010 general election manifestos nor their post-election "Coalition Agreement".

The bill is the product of a white paper, "Equity and Excellence: Liberating the NHS", put forward two months after the agreement was signed. The *Daily Telegraph* called it the "Biggest revolution in the NHS for 60 years". The Confederation of British Industry gave its full support to its "Allowing the best provider to deliver health care services, whether they are a private company or a charity."

The Health and Social Care Bill 2011 will abolish England's existing 150 NHS primary care trusts (PCTs), as well as the Strategic Health Authorities (SHAs). It proposes that £60 to £80 billion of "commissioning" is transferred from the current system of PCTs to several hundred "clinical commissioning groups" (CCGs). The CCGs will be run in the main by general practitioners (GPs). Around 21,000 staff will lose their jobs.

The bill repeals the key section of the 1946 legislation founding the NHS. Clause 12 states that the government, via the secretary of state for health, will no longer have a legal "duty to provide" a comprehensive

health service. Instead, the bill proposes that the newly created CCGs will have a "duty to arrange" health care and will be empowered to determine what care is necessary. Despite constant assaults, no previous government has ever overturned the enshrined legal duty of the British government to provide universal health care.

The bill allows for all services that are currently provided by the NHS to be taken over by the private sector. Last month, an amendment to the bill proposed that "foundation hospitals" will be able to use almost half their hospital beds and theatre time (49 percent) to generate income from private patients. At present, the majority of foundation hospitals are limited to a private income of about 2 percent. Foundation hospitals were established by the Labour government in 2004 as a move to decentralise control of NHS hospitals. All NHS hospitals are set to become foundation hospitals by 2014.

Allyson Pollock, a professor of public health research and policy, and several other authors, including a public interest lawyer and a non-practising barrister, published an article in *The Lancet*, the world's leading general medical journal.

Titled "How the Health and Social Care Bill 2011 would end entitlement to comprehensive health care in England", it states that the bill "introduces competitive markets and structures consistent with greater inequality of provision, mixed funding, and widespread provision by private health corporations".

The health service will be transformed from "a mandatory system into a discretionary one with structures that permit the introduction of charging for services that are currently free under the NHS, as well as a system in which much delivery would be privatised."

The newly created CCGs will be bodies that are “independent of the Secretary of State for Health” and that the bill leaves each CCG free to choose the patients for whom they have responsibility. The primary care trusts, as with all previous NHS management systems, had been responsible for the provision of health services for residents within contiguous geographical areas. Under the CCGs, this will no longer be the case. They “will not have to cover everyone in a geographical area but only ‘persons for whom it [the CCG] has responsibility’.... Nor will they be required to arrange for the provision of all the services that are currently part of the comprehensive health system.”

Giving an example of the dangers posed, the authors explain, “For example, accident and emergency services are not an explicit CCG responsibility under these proposals. Only a new category ‘of services or facilities for emergency care’ will have to be provided for people in a CCG’s area, which need not consist of adjoining or indeed whole electoral districts, as is the case with PCTs.”

The move to destroy universal public health care is proceeding apace even before the bill is passed. Despite the claim by the government that the NHS would be ring-fenced from its £80 billion-plus spending cuts programme, the health service has been instructed to find some £20 billion in efficiency savings.

The slashing of public health services is proceeding in parallel to private sector takeover of NHS hospitals. In November, Circle Health won a £1 billion contract to run Hinchingsbrooke hospital in Cambridgeshire for a decade from 2012. Many private firms already operate within the NHS, but Circle Health is the first to take over an entire hospital. The firm is funded by hedge funds and is owned by two individuals who are substantial financial contributors to the Conservative Party. If the hospital reports an annual surplus, following cost-cutting measures, Circle Health will make a profit under the terms of the deal.

This is the tip of the iceberg, with the market to run state-owned acute services estimated to be worth £8 billion.

Successive governments have been able to undermine the NHS, to the extent that free public health care is on the brink of full privatisation, due entirely to the trade unions. They have not lifted a finger to oppose any of these attacks.

The Royal College of Nursing (RCN), the largest union in the NHS, representing 410,000 nurses, midwives and other workers, originally gave its backing to the bill. Only now, as anger mounts among its members and the wider public, is the RCN making a token show of opposition. Peter Carter, general secretary of the RCN, said earlier this month that his union “has been on record as saying that withdrawing the bill would create confusion and turmoil, however, on the ground, we believe that the turmoil of proceeding with these reforms is now greater than the turmoil of stopping them.”

An RCN briefing this month stated that it “welcomes the general premise of the Bill,” but that its proposals “are essentially too much, too soon.” The briefing assures the government that the union remains fully signed up to the massive financial cuts currently being imposed, stating, “The RCN also believes that implementing these changes now, at a time of financial constraint within the NHS and during a £20bn efficiency drive, will add to the burden of an already overworked workforce and service.”



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