Britain's National Health Service under sustained attack

Jordan Shilton 5 September 2012

Moves to end the universal provision of public health care in Britain have reached an advanced stage, with sweeping privatisations and deep cuts to services and jobs being implemented.

The National Health Service (NHS), established as a key plank of the welfare state in 1948, is being dismantled in order that the provision of health care can be handed over to the private sector.

The Conservative-Liberal Democrat coalition has imposed cuts on the NHS of £20 billion—almost one fifth of its total annual budget—as part of its austerity drive to pay for the multi-billion-pound bailout of the banks. At the same time, the implementation of the Health and Social Care Act is being used to expand the presence of private companies in the running of hospitals, undermine the universal provision of services across the country, and attack the jobs and working conditions of health workers. This comes after more than a decade of funding cuts and creeping privatisation under the previous Labour government.

The latest development towards an environment where big business can extract super-profits from health care is the establishment by the coalition of the body Healthcare UK. The state-funded agency will assist managers in the health sector to sell the "NHS brand" to customers outside the UK, allowing fully privatised for-profit services to be run. As the *Financial Times* commented approvingly, "This is a logical extension of the principle that well-run hospitals should have freedom to operate as a business. Healthcare is rapidly becoming a global market and emerging economies are keen to draw on western expertise as they invest huge sums in public and private provision."

This agenda is being led by private hedge funds and corporations like Circle Holdings PLC, which owns the Circle Healthcare group. Circle took control earlier this

year of Hinchingbrooke Cambridge, the first hospital in Britain to be run fully by a private company. The government is seeking to use this as a model to expand the involvement of the banks and private capital in the managing of health care, with at least 20 potential hospitals having been identified as candidates to be handed over to similar outfits.

Indicating the long-term drive by both the current government and the previous Labour-led administration to slash NHS budgets, the FT editorial went on to note tellingly, "China is also interested in the UK model for primary care, as being relatively effective at cost control."

Achieving such recognition has come at the expense of providing treatment and care to those who require it by starving the NHS of funding. Hardly a week goes by without the announcement of the closure of a critical service or specialist institution that provides often life-saving treatment and operations, or the needless death of someone as a consequence of such cuts.

In July, the closure of three regional centres providing paediatric heart surgery was announced, prompting widespread protests.

On August 22, the death of pensioner Thomas Morrall was reported in Staffordshire. Morrall had lain for over an hour in the rain after falling and breaking his hip because no ambulances were available to take him to Stafford Hospital. The coroner criticised cuts to emergency services, noting that the Staffordshire Ambulance Service was eliminated five years ago.

Also in August the *Daily Telegraph* reported on the refusal of the NHS to pay for drugs to treat neuroblastoma, one of the most common childhood cancers. The treatment, which has been shown to reduce death rates by up to 25 percent, can only be obtained by those with the resources to travel abroad.

Earlier in August, a report from the European Commission, based on studies of 46 NHS hospitals, uncovered that one nurse was being expected to care for 15 patients. Such figures are more than twice the level of the uppermost safe limit and were branded as a "disgrace" by the Patients Association.

The study also showed that nurses are being replaced by lower paid and untrained assistants, who have to take on responsibilities for which they are not qualified. The number of nurses and midwives working in the NHS has dropped by 5,000 over the past two years, with increasing numbers being employed by private companies or charities.

Job cuts and the slashing of hospital budgets are taking place throughout Britain. In Scotland, 1,000 NHS jobs will be eliminated this year, with almost half of that number coming in Glasgow. As in all other areas of economic policy, the regional Scottish National Party administration at Holyrood has backed the slashing of budgets for health.

Figures show that several hospitals will see their budgets reduced by over 10 percent between 2011 and 2015. Basildon and Thurrock University hospitals in Essex will suffer a 13 percent funding cut of £36 million, while in Nottinghamshire, Sherwood Forest Hospitals' budget will be reduced by £34 million—also 13 percent. Hospitals in Derbyshire and Staffordshire will see their budgets fall by 11 percent and 12 percent respectively, according to data collected by the FT.

This disastrous state of affairs is being presided over by the trade unions, which play a crucial role in implementing the cuts against their own members. None of them, whether the Royal College of Nursing (RCN), Unite, Unison, or any other, has made any attempt to lead a struggle by workers against the attacks of the government. The bureaucracy has worked consistently to isolate and keep each section of workers in the dark about what is taking place, while blocking the emergence of any struggle by workers that challenges the privatisation of public health care.

This is the role they are currently playing in the South West of England, where a consortium consisting of 19 hospital trusts has united to slash the wages and attack the working conditions of health care workers across the region. Despite the significance of the undermining of national wage agreements, the unions have refused to advance any perspective to defend their members.

They have told workers to place their faith in union representatives bargaining with management and Liberal politicians, the very people who have imposed austerity upon the NHS and promoted privatisation.

In opposition to this, the Socialist Equality Party has launched a campaign insisting that to be successful in their struggle, workers must form action committees independent of and in opposition to the trade unions. These committees must be made the means through which strikes and other protest actions are organised, to undermine the control exerted by the union bureaucracy and challenge the plans of the consortium.

But such action cannot remain confined to the South West alone. Behind the consortium stand the government and the entire political establishment. The events in the South West region are being used as a test case for wider cuts in the NHS across Britain as well as in other public services. Similar strategies are being implemented internationally, with governments across Europe and in North America fully committed to the preservation of the wealth of the financial elite at the expense of working people.

The struggle confronting NHS workers requires an international perspective. The building of action committees to lead a struggle in defence of public health care must be guided by a socialist political programme. In opposition to the dictates of management and the corporate elite, workers must take up the fight to realise the social rights of the working class, including the right to a secure and decent paying job, and the right to well-funded and accessible public services, of which health care is a critical part.



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