## **Stafford Hospital report points to decimation of Britain's National Health Service**

## Julie Hyland 13 February 2013

The report into mistreatment and negligence at Stafford Hospital, England is more than an indictment of a single hospital or National Health Service Trust. It is a chilling example of the impact of the running down and privatisation of NHS provision by successive governments, and a warning as to the tragic consequences of these policies for working people.

Up to 1,200 patients are estimated to have died as a result of the poor care they received at the general hospital, part of the Mid Staffordshire NHS hospital trust, between January 2005 and March 2009.

The hospital has been the subject of five official reports in as many years. Finally, on February 6, the report on a 31-month public inquiry into the trust was released, chaired by Robert Francis QC.

The inquiry is the result of a public campaign fought for years, led by relatives of those who died or were mistreated at the hospital. In 2007, Julie Bailey formed "Cure the NHS" to demand an inquiry and to hold those responsible to account. Bailey's 86-year-old mother Bella died in the hospital as a result of neglect. She was joined by many other relations and victims of poor care, including Frank Robinson, whose son, John, 20, bled to death in 2006 after his ruptured spleen was misdiagnosed as bruised ribs. The Hospital Standard Mortality Ratio (HSMR) was 27 to 45 percent higher than the national average.

Robert Francis published a report into the hospital in February 2010. This was not a public inquiry, however, as the then Labour government, on whose watch the scandal occurred, rejected such an investigation.

Based on testimony from more than 900 patients and families, the 2010 report underscored the extent of the failings and the terrible suffering inflicted on vulnerable people and their relatives. Describing almost third world conditions, it reported that "basic elements of care were neglected", with patients left without pain relief, food and drinks, going unwashed for weeks at a time and left in soiled conditions for hours.

Patients were left to rely on family and friends for help.

"The standards of hygiene were at times awful, with families forced to remove used bandages and dressings from public areas and clean toilets themselves for fear of catching infections."

Conditions stemmed from the drive by the Labour government to cuts costs and creeping privatisation. In 2006 Mid Staffordshire Trust was told it must gain Foundation Trust status. This Labour-initiative was aimed at making hospitals semi-independent of the Department of Health, "freeing" them to find private sources for their budgets.

The price of gaining foundation trust status was the trust's decision to reduce costs by £10 million. "The board decided this saving could only be achieved through cutting staffing levels, which were already insufficient," Francis reported, with 150 jobs being lost. "A chronic shortage of staff, particularly nursing staff, was largely responsible for the substandard care," that report stated.

One result was that receptionists without medical training were made responsible for evaluating the requirements of patients admitted to Accident and Emergency.

Although staff had spoken out, they were ignored or intimidated while others were discouraged from complaining on the grounds that this would further harm hospital care.

Despite Francis's report, no one was held to account. Again, under pressure from relatives, the Conservative-Liberal Democrat government agreed in 2010 that Francis would chair a public inquiry to examine individual and organisational "failings". Damningly, Francis found that the victims and their relatives "were failed by a system which ignored the warning signs and put corporate self-interest and cost control ahead of patients and their safety."

Virtually every organisation responsible for health provision—from a local to a national level, right up to the Department of Health—played a role in facilitating mistreatment and neglect at Stafford, Francis said. But, he claimed that the issue was fundamentally a problem of "culture", arguing, "What has been found to be wrong here cannot be cured by finding scapegoats, and/or recommending major re-organisations yet again." Francis's latest report makes nearly 300 recommendations for improvement. Tellingly it recommends regulating the 800,000 health care assistants who are responsible for basic care and a ban on hospitals forcing "gagging clauses" on their staff. There are also proposals that NHS staff should be held to a legal "duty of candour" to report mistakes—giving a further insight into the intimidatory atmosphere that has been created.

NHS managers should also be registered and subject to discipline and hospital units closed where patient safety is deemed at risk.

Many of the recommendations are likely to be rejected as they conflict with the interests of the private sector and its representatives, whose takeover of the NHS is assured by the government's Health and Social Care Act.

All public hospitals will become NHS Foundation Trusts, ostensibly not-for-profit companies, free from direct oversight by the Department of Health. The Act overturns the government's legal "duty to provide" a comprehensive health service and replaces it with a "duty to arrange" health care. From April, the NHS will simply become the purchaser of care from private contractors, who will be able to take over the most lucrative services.

This is to be combined with cuts of £20 billion in the NHS budget by 2015—one-fifth of the overall total. Dozens of Accident and Emergency departments are being closed, along with specialist units and other facilities. Staff levels are to be cut by up to 20 percent, with remaining staff forced to work on new contracts on lower wages with larger workloads.

Francis's injunction against "scapegoats" is connected to this assault. Just as in the case of the 2008 banking crisis and the manipulation of the Libor interbank interest rates, no one is to be held to account for conditions at Stafford hospital, which caused the deaths of hundreds of people—at least no one in a position of authority.

Prime Minister David Cameron has rejected the demands of Stafford relatives that Sir David Nicholson should be made to resign. Nicholson ran the regional NHS strategic health authority in Stafford until 2006. He is now NHS chief executive and head of the NHS Commissioning Board overseeing the £20 billion cut in the NHS budget and responsible for bringing in more private providers.

Instead, the government has turned its fire against NHS staff, who are made the scapegoat for the scandal. Cameron has said that nurses' salaries should be tied to "performance" and that a new inspection regime for hospital should be introduced, based on Ofsted—the body charged with inspections for schools.

Ofsted is the prime means through which the government is forcing schools to convert to Academy status—responsible

for their own budgets, and setting the wages and conditions of their staff, and tied to private corporations or charities.

"Nurses should be hired and promoted on the basis of having compassion as a vocation and not just academic qualifications," Cameron said.

Investigations have been launched into five other hospital trusts with poor mortality rates in Colchester, Tameside, Blackpool, East Lancashire and Basildon and Thurrock. Far from improving the service, the aim will be to justify the government's privatisation agenda.

The terrible provision and the bullying and intimidation of staff at Stafford underscores the role of the trade unions in facilitating such conditions. Writing in the *Guardian*, Peter Carter, general secretary of the Royal College of Nursing, also claimed that the problem was one of a "toxic culture", focussed on "targets not patients", without once mentioning the government's new Act nor the massive cuts being imposed.

Above all, the Stafford report demonstrates that decent health care is incompatible with the drive for profitability and the carving up of the NHS by private corporations. It points to the need for an independent political movement, outside of the control of the trade unions and any of the bourgeois parties, in the fight for a workers' government and the nationalisation of health provision—including the vast pharmaceutical companies—under the democratic control of working people.

Ten families are suing University Hospitals Bristol Foundation Trust. Seven had children who died at Bristol Royal Hospital for Children between 2008 and 2012, and the children of three others suffered complications at the hospital that deal with children with heart problems. Alarms monitoring their children were turned down or switched off, and nursing numbers were so low the families often had to administer care and medicine.



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