

Waiting times at five-year high in British National Health Service

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19 October 2013

Thousands of patients across the UK are facing long delays, exceeding the national target of treatment within 18 weeks of a problem being identified.

Waiting times for National Health Service (NHS) treatment now stand at a five-year high. NHS England, the public body charged with overseeing delivery and implementation of the Health and Social Care Act 2012, has revealed that 240,000 patients in England within the last 12 months have been added to the ever growing waiting list—2.9 million people across the UK.

In 2012, 52,000 patients were denied common procedures such as cataract operations and varicose veins treatment as a result of cuts to the NHS. In Wales, NHS health boards are reported to have cancelled more than 13,000 operations over the last three years largely due to bed shortages and lack of staff.

The ever-growing waiting lists for medical treatments, surgical operations and other diagnostic investigations is a product of the systematic attacks on NHS carried out by successive governments. The previous Labour government first advocated an unprecedented £20 billion “efficiency savings” in the NHS by 2015, which the current Conservative and Liberal Democrat coalition government set about implementing with a 20 percent cut to the NHS budget. *The Lancet*, one of the most respected international medical journals, argues that the NHS “is on a path to becoming a ‘market commodity’.” It accused ministers of treating the health service like a “failing bank” by trying to bail out crisis-hit units with extra money instead of taking responsibility for care. Britain’s top doctor, NHS England Medical Director, Sir Bruce Keogh, called for the NHS to be run like high-street retailers PC World and Dixons.

Anticipating the massive impact the funding cuts would have on services, The Kings Fund think-tank last

year outlined five scenarios of what they would look like in practice—a 30 percent real pay cut for all staff; no medication; abolition of the NHS in London; sacking all consultants and general practitioners or abolishing the NHS in Scotland and Wales.

The reality has been worse than The Kings Fund’s predictions. The funding cuts have created enormous pressures on all services and jeopardised the care and safety of patients.

Last year, the Royal College of Physicians pointed out that there are a third fewer general and acute beds now than there were 25 years ago despite a 37 percent increase in emergency admissions over the past decade.

Some hospitals are being forced to cancel non-urgent operations or other treatment to deal with increased Accident and Emergency (A&E) and other non-elective pressures. Discharging some patients has become increasingly difficult as funding cuts to local government budgets have created pressures on arranging necessary support for those leaving hospital. The government cut grants to local councils by 15 percent, forcing them to slash services, including home care and day centres, and close remaining council-run care homes across the country.

Five thousand nursing posts have been eliminated along with thousands of other hospital posts over the last three years.

Many hospital trusts are heavily burdened with debts. According to the NHS Trust Development Authority’s summer report, 26 NHS Trusts will have a gross planned deficit of £325 million in 2013/14.

In June it was widely publicised that South London Health Care (NHS) was being placed into administration with a debt burden of £150 million. A further six NHS trusts now face bankruptcy.

Up to 22 NHS trusts are facing serious financial

difficulties, as a result of expensive Private Finance Initiative (PFI) schemes also initiated by the previous Labour government.

The government is utilising the deliberately-created situation of long waiting lists to promote private treatment within the NHS hospitals and hiving off treatment to privately-run hospitals. More and more hospitals are resorting to offering private operations to earn money and to cover deficits. At the Ealing Hospital Trust in London where the A&E department is currently being downgraded, the funds received from private patients increased by 250 percent last year.

The overall income generated from NHS hospitals performing private treatment increased by 12 percent in 2012 and is projected to increase by a further 10 percent in 2013. Legislation first introduced by the previous Labour government and built on by the present coalition now permits NHS hospitals to earn up to 50 percent of their income from private health care delivery.

The privatisation of the health service is set to escalate. The NHS regulatory body, Monitor, has revealed that an increase of the budget cuts from £20 billion to £30 billion by 2021 is being talked about in government circles—almost a third of the NHS budget.

Monitor chief executive David Bennett told the BBC that because “wage restraint, productivity improvements and reconfiguration of hospitals services was only likely to save around two-thirds” of the £30 billion, it would have to “either be achieved by getting new providers from abroad into the NHS to compete or by getting NHS trusts to adopt their ideas”—opening the NHS to even further privatisation and reliance on charities.



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