

UK government uses demand for weekend work to attack National Health Service

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Claiming he wants “a proper seven day service” in the National Health Service (NHS) and an end to its “Monday to Friday” culture, Health Secretary Jeremy Hunt is threatening to impose weekend-working contracts and to change working patterns. He wants new terms for consultants in place by April 2016 and a new contract for junior consultants in the August 2016 intake.

Last week, Hunt told the doctors’ professional and trade union body, the British Medical Association (BMA), to make a decision by mid-September to work with the Conservative government to introduce new contracts. If they don’t, he will impose them anyway.

Hunt professed his concern for the 6,000 or so people who “lose their lives every year because we do not have a proper seven day service in hospitals.” He wants to prevent the “catastrophic consequences” for patients of the present system, who have a “15 percent higher chance of dying if they are admitted to a hospital on a Sunday than on a Wednesday.”

In all of his pronouncements, he seeks to blame doctors for these unnecessary deaths and exonerate the current government and the previous Conservative/Liberal Democrat coalition, in which he served, for the impact of their cuts and privatisations—and those of the Labour government before them.

No one should have any illusions that the seven day NHS plans are coming out of genuine concerns for the fate of patients. The attack on relatively better paid consultants is just the beginning of a further assault on the jobs, terms and conditions of the entire NHS workforce.

At the end of last year, the Department of Health (DoH) first recommended to the NHS Pay Review Body (NHSPRB) that contractual arrangements needed

to be reformed in order to achieve seven day services. Among its key endorsements were an across-the-board reduction in the payments for working unsocial hours and changes to the incremental pay progression scheme.

The DoH declared, “National employment contracts to support the delivery of seven day services for emergency, urgent and elective care must be affordable and this means employers must make better use of their pay bill—around £44 billion in total across the employed NHS workforce.”

“Unsocial hours pay costs at least £1.8bn for employed nonmedical staff a year, and the current system of incremental pay progression within AfC [the Agenda for Change pay system] has a cost pressure of over £550m per year,” the DoH concluded.

Last Friday, NHS Employers chief executive Daniel Mortimer said, “We welcome the observations of the NHSPRB in today’s report. Patients and employers want to see improved and better seven-day services, and employers have consistently told us that the national pay and conditions of service for all NHS staff need to continue to adapt in order to make them affordable and sustainable.”

He added, “We will continue to speak with our trade union colleagues, to ensure we continue to work in partnership to progress pay and contract reforms.”

Alongside the health secretary’s ultimatum to consultants, similar proposals have come from the Doctors’ and Dentists’ Review Body (DDRB).

Hunt and the government are shedding crocodile tears over “excessive” weekend deaths.

Yet they have been in power for more than five years and presided over “£20 billion” in so-called efficiency savings, which have plunged hospital after hospital into deficit. The increase in real spending on the NHS

during the coalition's term of office was the lowest since it was created after World War Two.

The government does not say how it is going to fund the extra weekend services. There are no plans to recruit more nurses, doctors, radiographers, physiotherapists, paramedics and other staff to operate a properly staffed service. Neither are there plans to increase the necessary diagnostic facilities and other resources. Somehow, NHS managers are supposed to introduce the services at the same time as the government is demanding a further £22 billion in cuts to the NHS budget on top of those already imposed.

Over the last five years, the funding cuts coupled with increasing fragmentation and privatisation have had an unprecedented effect on the NHS. Two thirds of hospitals are struggling to stay within budget and many have been forced to slash services and staff, including front line workers, in an attempt to reduce deficits—placing patient safety and care in jeopardy. The Royal College of Nursing reported last month that there were 2,295 fewer expert nurse posts in England than there were in 2010. Reduction in the cover provided on weekends by senior staff and the availability of other diagnostic facilities has been one of the ways hospitals have tried to cut costs.

Dozens of Accident and Emergency (A&E) departments, maternity units, children heart units, walk-in centres, ambulance stations and GP surgeries have been shut down, downgraded or earmarked for closure, putting pressure on services during weekdays in particular.

Few would disagree that it is essential for NHS weekday services to be properly funded and continued on weekends in order to avoid unnecessary deaths and the detrimental impact on patient care. High quality community services and other forms of social care should also be expanded.

In response to Hunt's demands, the head of the BMA, Dr Mark Porter, said that doctors supported "an improved, seven-day NHS service." However, he insisted that "this is a much broader issue than just doctors' contracts." It was "nothing more than a wholesale attack on doctors to mask the fact that for two years the government has failed to outline any concrete proposals for introducing more seven-day hospital services" he added.

Two years ago, the Academy of Medical Royal

Colleges, which represents the majority of the UK's 220,000 doctors, wrote a letter to the media in support of seven-day working, declaring that the treatment of patients in inadequately staffed hospitals on weekends was "ethically unjustifiable" and "must end urgently."

The huge response of doctors and other NHS workers on the *ImInWorkJeremy* Facebook and Twitter sites to Hunt's demands shows there is widespread opposition to the attack on the NHS. Millions of people have joined protests against the closure of hospitals, children's heart units, and maternity units, and the closure or downgrading of A&E units. However, the trade unions have played the lead role in dissipating these actions, as they have done with so many others.

They have not only avoided any generalised mobilisation of working people against the dismantling of the NHS, but wherever struggles erupt they have kept them fragmented, or appealed to ministers to change course. Despite the party's record of attacking public health care when last in office, the unions, until May's general election, maintained that only the election of another Labour government could reverse the attacks on the NHS. Their strategy is now in tatters.

The newly re-elected Conservative government is intent on imposing a yet-more devastating offensive against jobs, wages and essential welfare and social services on which millions of people depend. The only genuine means of combating austerity is the independent political mobilisation of the working class in opposition to the collusion with cuts and privatisation by the trade unions. The only government that can reverse austerity is a workers' government, pledged to implement socialist policies based upon planned production for need and not profit.



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