

# UK: Addenbrooke's Hospital placed in “special measures” over quality concerns

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On September 23, the world-renowned Addenbrooke's hospital in Cambridge, England, was put into “special measures” by the Care Quality Commission (CQC). Special measures are imposed by the Chief Inspector of Hospitals when there are concerns about the quality of care hospitals are delivering.

It followed the resignation of Addenbrooke's chief executive Dr. Keith McNeil a week earlier.

The situation at Addenbrooke's is symptomatic of the way that unending austerity and savage cuts have been brought to bear on workers' right to health care, threatening the survival of the National Health Service (NHS).

Addenbrooke's, originally founded in 1766, is a teaching hospital with many links to the University of Cambridge. It is an internationally renowned transplant centre, with the first liver transplant outside the United States taking place there in 1968. In 1986, with Papworth Hospital, it carried out the world's first combined heart, lung and liver transplant. Addenbrooke's is one of the UK's six liver transplant centres and performs multivisceral transplants. It has the largest neurological intensive care unit of its kind in Europe.

Addenbrooke's has gone from being a flagship care provider to one now criticised for major failings in target areas of care, including running up deficits of £1 million a week. The hospital, run by Cambridge University Hospitals NHS Foundation Trust, finds itself in special measures alongside 12 other hospitals.

There are many reasons given for the failures of Addenbrooke's NHS Trust in recent years, with patient demands being one. During 2014-2015 some 574, 998 people visited its outpatients department, 115,176 day cases were dealt with, 73,069 inpatients admitted and

102,709 attended its Accident and Emergency (A&E) department.

As a result, the trust increased spending on agency staff, which meant costs spiralled and care suffered—with nurses working on wards without the skills needed.

Bottlenecks developed as the hospital struggled to discharge patients, partly because of the lack of services in the community. Bed occupancy levels rose, while pressure on surgical services meant waiting times grew.

An NHS careers adviser, who did not want to be named, said that running the NHS for profit and setting targets didn't fit with the profession. She compared it to the government's treatment of education.

The BBC reported, “these problems are mirrored elsewhere. When Barts Health NHS Trust—the biggest hospital trust in the country—was placed in special measures earlier this year, the regulator also cited staff shortages and waiting times.”

The BBC went on to say, “These issues are not unique to failing hospitals, however. Key waiting time targets are being missed or have been missed in cancer, A&E and for routine operations in recent months.”

The former Department of Health minister Norman Lamb, a Liberal Democrat, said recently, “The National Health Service will crash within two years with catastrophic consequences unless the government orders immediate multibillion pound cash injection.”

He warned that the NHS and care services are at breaking point, due to pressures mounting on the health system. The pressures referred to by Lamb are not new. They have been manifest for decades, with growing numbers of NHS staff leaving the profession than can be trained, due to the targets set by successive governments.

National Health Action Party co-leader, Dr. Clive Peedell, said, “The Tories are a danger to the security of our NHS and the public’s health. The problems at Addenbrooke’s are symptomatic of a financial crisis right across the NHS with two-thirds of trusts predicting a deficit this year. This is a result of chronic underfunding of the NHS following a £20 billion efficiency savings programme over the last five years.

“A perfect storm has hit Addenbrooke’s as financial pressures and rising clinical demand have resulted in staff cuts, shortages, increased agency costs and reductions in service delivery.”

Peedell noted that patients are unable to be discharged because of the lack of social care in the community. This is why “even elite hospitals like Addenbrooke’s are now labelled as ‘failing’—although the actual quality of care and staff is not.”

This view is short sighted. The attack on the standards of the NHS is not just down to Conservative Party policies. All Westminster parties over the past decade, including Labour and the Liberals, have presided over a wholesale privatisation of the health service. As a result, the service that provides care for millions is crumbling under the pressure of “efficiency savings” and unending cuts.

These deficits are apparent nationally. The *Financial Times* reported, “Two-thirds of hospitals are forecasting deficits by the end of the financial year as they attempt to meet rising demand from an ageing population, and the cost of medical advances. By some estimates, that number may rise to as many as nine out of 10 hospitals.”

Nigel Edwards, chief executive of the Nuffield Trust, said that the resignation of the Addenbrooke’s chief executive, and the departure of several other high-profile managers of big teaching hospitals in recent weeks, suggested that the NHS was struggling to find people able or willing to provide the leadership required.

“We are losing skilled and experienced chief executives,” he said. “If these people can’t deliver, you have to start asking the question: is the job do-able or do you need to be a lucky genius [to handle it]?”

Rather than a management problem, he argued, “There are not enough nurses, the system is under huge financial strain without a terribly credible plan to deal with that. We don’t have people who want to lead,

large numbers [of doctors] want to emigrate and we have an inspection regime that is about punishing rather than improving.”

With nearly half of health service trusts (all types) finishing last year in deficit, with an overall deficit standing at £818 million and forecasts from finance directors gathered by the King’s Fund showing two-thirds are predicting a deficit this year, the picture is dire.

The worst problems are in hospital trusts, where one in 10 reports that they are likely to slip into the red. Targets are being missed in Accident and Emergency care, non-emergency operations, cancer treatment and the target wait for diagnostic services has not been met for 18 months.

The Department of Health (DoH) has responded to all such criticisms by declaring, “We are investing the additional £8 billion that the NHS itself has said it needs to implement its own plan for the future. The NHS must deliver its side of the plan by implementing cost-control initiatives the government has brought forward, like clamping down on staffing agencies and expensive management consultants.”

With this, the DoH cites the problems created by the privatisation measures of successive governments in order to justify the imposition of brutal austerity and misery on the NHS.



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