

UK: Privatisation and cuts agenda exacerbates NHS staffing crisis

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The starving of funds from the National Health Service (NHS) by successive governments has created an enormous crisis of hospital bed provision, with falling staff levels and a lack of resources severely jeopardising patient care and safety in the UK hospitals.

The new year dawned with harrowing accounts of patients dying in hospital corridors—after awaiting treatment for hours—stretched waiting lists, cancellations of elective and non-elective operations, missed accident and emergency (A&E) targets, and staff struggling to cope in hospitals. The Red Cross described the situation prevailing in hospitals as a “humanitarian crisis.”

By analysing the official data for the period 2014/15-2016/17, the *Health Service Journal* (HSJ) exposed the scope of the nursing staffing crisis in the NHS.

In England, 96 percent or 214 out of 224 acute hospitals operated without an adequate level of nursing staff during day shifts last October, while 85 percent of them did not have the right staff levels on night shifts. These are the worst figures since the hospital trusts started to publish staffing levels in 2014, in the aftermath of the investigation into the failures at Mid-Staffordshire Hospital in 2013.

Among the trusts with the lowest percentage of nursing shifts filled were Dewsbury and District Hospital (75 percent), Pontefract General Infirmary (77 percent), Princess Alexandra Hospital, Harlow (77 percent), University Hospital of North Tees (77 percent) and Royal Albert Edward infirmary, Wigan (79 percent).

The consequences of these shortages are disastrous. They include patients having to wait for medication, not having their personal care needs met and not having observations checks on time. Nurses raised concerns with the HSJ that having inadequate staff levels meant hospitals were providing substandard care, causing a severe risk to patient safety.

Janet Davies, chief executive of the Royal College of Nursing (RCN), said, “This is yet more evidence that there are too few nurses caring for patients, putting people at serious risk. Safe staffing levels aren’t an optional extra. Having the right number of nurses is essential to ensure that patients can recover properly.

“There are already at least 24,000 nursing vacancies in the UK and it’s getting worse every single day.”

An important issue arising from the figures analysed by HSJ is the increased and routine use of less qualified Health Care Assistants (HCAs) to cover nursing staff shifts. Professor Peter Griffiths of Southampton University, who is a member of the NHS Improvement’s safe staffing committee for acute wards, points out that relying on HCAs to substitute for nurses in the long term risks compromising patient safety and gives a false reassurance.

The NHS staffing crisis, brought about by the policies of successive governments, goes far beyond a lack of nursing staff.

The Royal College of Midwives (RCM) says there is a 3,500 shortfall in full-time midwives in England. Thousands of women in labour face “Red Flag” incidents, including delays of up to an hour or more in washing or suturing, medication being missed, delays in getting pain relief. Staff are not able to provide continuous one-to-one care and support to a woman during established labour as result of staff shortages.

The RCN, RCM and other professional bodies representing Allied Health Professionals point out that the Tory government’s plan to scrap bursaries from this year will aggravate the already dire shortage of frontline workers. The government falsely claims that replacing bursaries with student loans will attract more students for these professions—creating an extra 10,000 nurses training places during this parliament.

The latest figures from UCAS, the university admission

service, disprove these claims. There is already a sharp 23 percent drop in nursing applicants this year compared to 2016. There were 43,800 applicants in England in January 2016 compared to 33,810 in January 2017.

The real aim of getting rid of bursaries is to slash the funding available to Health Education England (HEE).

A senior clinician in Bournemouth Hospital said that cutting the funds of HEE would also result in scrapping secondments, which helped less qualified staff to gain qualifications.

Junior doctors repeatedly stressed the implications of understaffing in hospitals during their industrial action last year. The strike, eventually sold out by the British Medical Association, was in opposition to government plans to impose inferior contracts, further endangering patient safety and care.

Staff shortages and the lack of beds in Intensive Care have created an enormous crisis in lifesaving surgeries. Leading doctors who staff Intensive Care Units (ICUs) told the *Guardian*, “ICUs are becoming so full that patient safety is increasingly at risk because life-saving operations—including heart, abdominal and neurosurgery—are having to be delayed.

Dr. Carl Waldmann, the dean of the Faculty of Intensive Care Medicine (FICM), said, “Intensive care is at its limits in terms of capacity and struggles to maintain adequate staffing levels.” According to the new survey, based on data collected by FICM, one in three of the 220 ICUs across the UK have a vacancy for at least one consultant.

The ITV broadcaster recently reported on the crisis facing ambulance services in Kent and Sussex. They are operating with a serious shortage of paramedics, putting patients’ lives at risk. There is a shortage of 140 paramedics (almost one in six of positions unfilled). Similar conditions are widespread in ambulance services across the country.

General Practices also face severe pressures due to underfunding and understaffing. Patients are struggling to obtain appointments to see a family doctor when necessary. The government claims that GP numbers will increase by 5,000 by 2021. However, the British Medical Association (BMA) disputes this. GP Committee Deputy Chairman Dr. Richard Vautrey said, “There has been woefully inadequate progress towards recruiting more GPs to cope with rising patient demand.”

He continued, “The government is simply not on course to recruit the extra 5,000 GPs it promised at the last election.”

Staff levels of all categories in the NHS are set to worsen as a result of the uncertainty created around Brexit. Currently, 5 percent of the 1.3 million NHS workforce consists of workers from European Union countries.

At the Conservative Party conference last October, Health Secretary Jeremy Hunt cynically said, “My job is to prepare the NHS for the future, and that means doing something today that we have never done properly before, and that’s training enough doctors.”

This was yet another bogus attempt by the government—stuffed with MPs who hate the very notion of free and universal public health care—to appear as champions of the NHS, committed to increasing the number of nurses, doctors, midwives and other clinical and non-clinical staff.

However, Hunt ordered the National Institute of Health and Clinical Excellence (NICE) to stop determining safe staff levels in hospital wards and units in 2015, with the intention of cutting funding on staffing.

NICE started drawing up guidelines on NHS-wide safe staffing levels in the aftermath of Sir Robert Francis’s inquiry into the failures in Mid Staffordshire Hospital in 2013. One of the key findings of the probe into the substandard care provided by the hospital, which resulted in excessive deaths, was chronic understaffing.

Since 2006, Mid Staffordshire hospital, like many other hospitals trusts, was on a mission to save millions of pounds by further cutting down already insufficient staff numbers in order to gain Foundation Trust status. This was carried out under the direction of the then-Labour government.

The 2010 Conservative and Liberal Democrat coalition government sought to blame hospital workers, while ignoring the key findings and recommendations outlined by Francis, which centred on more resources and money being made available.

Since 2010, Tory-led governments have intensified the attack on the NHS, building on that carried out by Labour. Hospitals trusts are saddled with more than £2.5 billion in deficits as a result of systematic funding cuts. Many more hospital trusts are being forced to follow the fate of Mid Staffordshire Hospital.



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