The destruction of the National Health Service and the role of NHS FightBack

Jean Shaoul 8 May 2017

The NHS FightBack campaign, initiated by the Socialist Equality Party, received a request from a student journalist to answer a series of questions regarding the growing crisis in the National Health Service, and its campaign in Bournemouth against the planned redundancies of 13 workers employed in the Bournemouth Intermediate Care Service (BICS).

Below are the questions and the reply from World Socialist Web Site writer Jean Shaoul.

1. With the Conservatives looking likely to win the upcoming general election, do you feel that Phillip Hammond's statement, that the Conservatives are "the party of the NHS", is something to take seriously? Or do you disagree with his statement entirely?

The snap general election is being held in the context of a profound crisis: increasingly bellicose threats by the US against Russia, China, North Korea and Syria, supported to the hilt by the UK government; economic nationalism and trade wars; and austerity.

The issues of war and austerity are profoundly connected to the crisis in the National Health Service (NHS), with the tens of billions of pounds in cuts in funding and the unprecedented closures of vital services across the country in the next few years. But the NHS and other vital public services face further cuts to meet the cost of the crisis.

It must be stated up front that irrespective of which party wins the elections, the working class will have to pay the price for the crisis created by the ruling elites. In the context of healthcare, this means the dismantling of the NHS and the end of a comprehensive, universal service (almost) free at the point of use. The most significant reform of the post-war Labour government is to be swept away.

None of the parties—Conservative, Liberal Democrat or Labour—are for a publicly funded and publicly run NHS.

The Conservatives are preparing for the wholesale breakup and marketisation of the NHS, set in motion by the 2012 Health and Social Care Act. Brought in by the Conservative/Liberal Democrats coalition, this removed the Secretary of State for Health's core duty to provide or secure comprehensive and universal healthcare. It meant the loss of Ministerial control and responsibility for a national health service and with it accountability to parliament for the provision of comprehensive health care. Instead, there would be a duty on over 200 new clinical commissioning groups to make contracts for service provision in their area and the establishment of the NHS Commissioning Board (NHS England) to oversee this.

This was central to providing a market in healthcare and opening up the £120 billion a year NHS budget to the private sector. All NHS Trusts were required to become Foundation Trusts that would be allowed to enter into joint ventures with, and distribute surpluses to,

for-profit companies, raise commercial loans without restriction, and would be free to raise up to 49 percent of their revenue from commercial sources, paving the way for the backdoor privatisation of assets built up by generations of taxpayers.

This move had long been prepared. In 1990, the Conservatives reorganised the NHS on commercial lines and established the purchaser-provider split. In 1997, the incoming Labour government of Tony Blair got the Private Finance Initiative (PFI), announced by the Conservatives in 1993, up and running in the NHS, at a cost that threatens to bankrupt the hospitals. In 2002, the Labour government began the process of transforming the hospitals and other healthcare organisations into semi-autonomous Foundation Trusts. The Labour government of Gordon Brown imposed major austerity cuts following the £1 trillion bailout of the banks in the aftermath of the global financial crisis in 2008. In 2010, the then Liberal Democrat leader Nick Clegg demanded the NHS be broken up and replaced with an insurance system. He said, "Breaking up the NHS is exactly what you do need to do." The Conservative/Liberal Democrats coalition, David Cameron's Conservative government and now Theresa May's Conservative administration continued the cuts.

With much of the NHS in deficit, thanks to PFI, marketisation and financial cuts, the Conservative Party is using the crisis to demand further cuts, restructuring and privatisation. A further £26 billion in "efficiency savings" is to be imposed by 2021 and rolled out as part of Sustainability and Transformation Plans, making a total of nearly £41 billion over the decade. The British Red Cross has described the NHS as facing a "humanitarian crisis."

But even this figure fails to capture the scale of the crisis. With at least £30 billion of the NHS under the control of the private sector, at least 10 percent of this must be leaking out as profits, while the cost of administering the market-based reforms has added approximately £5 billion a year to the NHS' costs.

None of the mainstream political parties are committed to a properly funded public health service. Efforts to get the key provisions of 2012 Health and Social Care Act overturned in parliament last March had the support of just a handful of Labour MPs, with the result that the bill did not even get a hearing. In other words, Labour too has renounced its flagship reform. It is Tory in all but name.

2. What are your views on the opening of the new private ward at Royal Bournemouth Hospital? Do you feel that it effectively creates a two-tier health system in the same building?

Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust (RBCH) has spent £800,000 of public money to turn a normal ward into a luxurious facility with a ward, two consultation rooms and a treatment room in order to attract wealthy patients and patients who have private insurance. Thus, the same hospital will provide a two-tier health system. Those with money will be able to jump queues to access treatment, while those without will languish on long waiting lists, thanks to years of funding cuts.

With the opening of the new ward, Bournemouth Private Clinic (BPC) hopes to treat around 800 private in-patients a year and to run a "stand alone clinic service" six days a week. It plans to make profits from increasing the scope of the services, which includes cancer care, chest medicine, diagnostic imaging services, diagnostic vascular imaging and interventional radiology, eye surgery, gastroenterology, general surgery, urology, dermatology and orthopaedics.

There is much more involved. It is part of a wider reliance throughout the NHS on revenue from private treatments and commercial ventures in the wake of the squeeze on hospital budgets. The Royal Bournemouth Hospital is to allow the private sector to use its "spare capacity" during evenings and weekends—and the use of NHS staff—opening up public facilities and resources for private profit: yet another subsidy to the rich. It specifically calls on consultants to carry out their private practice in the hospital. It is justified on bogus claims of "greater patient choice" that will enable any profits to go back into the Trust.

Far from increasing patient choice, tens of thousands of people are systematically being denied timely treatment and health care nationwide, with numerous reports that Clinical Commissioning Groups are rationing vital treatment and operations to patients. Varicose veins, IVF, and the removal of cysts are just some of the treatments no longer available on the NHS. Other treatments are denied surreptitiously, with patients being asked to lose weight, give up smoking or make other "lifestyle" changes before being referred for treatment.

It is part of the drive, begun under Labour, to remodel the NHS as a low-cost, no-frills, insurance-based system along the lines of the already decimated NHS dental service, which provides a limited range of treatments with co-payments. The co-payments form such a high proportion of the cost that many dentists withdrew from the NHS in order to avoid the administrative burden of claiming reimbursement. In many areas, NHS dentists are now non-existent.

3. And with over £40 billion worth of cuts to the National Health Service over the course of a decade, do you think that the NHS has a future where it will remain public, and not fully privatised?

As I have tried to show, all the major parties have turned their back on a fully funded NHS. In one form or another, they all support privatisation that is not only proceeding at full speed but resulting in the balkanisation of the entire system, making the breakup and privatisation of British Rail seem monolithic by comparison.

To cite but a few examples of how the private sector has taken control of the NHS. Virgin has more than 200 NHS contracts, and an active litigation department that successfully prevented commissioners in Hull from allowing local GPs to run primary care services. Monitor, the regulator, has issued 114 private provider licences. Local commissioners and Trusts spent £10 billion in 2014 on non-NHS providers, up from £6.6 billion in 2009, while the community services market believed to be worth £10 billion-to £20 billion annually.

Nowhere, anywhere in the world, has it been possible to have an affordable universal and comprehensive health care system provided on a commercial basis. That is why, whether it is publicly funded and run by the private sector—like schools and other services—or an insurance-based system that uses a reduced public sector alongside the private sector, it means the end of health care available to all. The US

spends twice as much as any other country on healthcare, yet even after the passage of the Affordable Care Act (Obamacare), up to 28 million people were uninsured in 2015, down from 41 million in 2013.

This is the stark future posed by abandoning a fully-funded NHS.

4. Do you think it would be at all possible for members of the public to prevent the total privatisation of the NHS in the near future? What could be done to help with this?

Yes, this is an urgent necessity. The right to health care can only be secured by the working class mobilising in a *political* offensive against the policies of austerity and war. It is not a question of putting pressure on the Labour Party to fight for the NHS. Quite the opposite. Such a fight can only be successfully waged by opposing not just the Tories and the Liberal Democrats, but the majority of Labour MPs, the Labour Party apparatus and its councillors, and the trade unions, who have not lifted a finger to defend NHS workers, their jobs and working conditions.

To cite but one example, last year 50,000 junior hospital doctors struck repeatedly in unprecedented action against the government insistence that they accept a rotten contract imposing seven-day working with no additional funding. The trade union bureaucracy, as usual, refused to widen the struggle, thereby ensuring that the junior doctors suffered a defeat, and in so doing once again cleared the path for the attacks that have since followed.

Labour leader Jeremy Corbyn and his Shadow Chancellor John McDonnell appeared on the picket lines of junior doctors "in a personal capacity," but did nothing to mobilise Labour members and supporters in defence of the doctors. Instead, they urged Tory Health Secretary Jeremy Hunt to reach a negotiated settlement with the doctors union, the British Medical Association.

The defence of a publicly funded NHS means forming action committees to oppose the closure of hospitals and other health facilities. But they have to be independent action committees. Working people have to break from the Labour Party and the unions. For decades, they have betrayed one struggle after another. How much longer does this have to go on for? Without mobilising independently of the unions and Labour Party, there will be nothing left of the NHS, public services, or the welfare state.

The right to free, high quality and universal health care means the fight for socialism. The interests of patients and the vital jobs of doctors, nurses and other health workers must be placed before the insatiable profit drive of the financial and corporate elite. It means that the working class has to take up a fight for socialism and build a new socialist party.

The Socialist Equality Party initiated the NHS FightBack campaign to take forward such a struggle among health workers and throughout the working class. Contact NHS FightBack at http://www.nhsfightback.org.



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