

# NHS 10-year plan: Recipe for further attacks on services and privatisation in UK

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7 February 2019

Theresa May's Conservative government recently set out a 10-year plan for the National Health Service (NHS).

As if everyone was oblivious to the last nine years of austerity, including huge cuts to the NHS budget and privatization of health services, May claimed the Tories would be the saviours of the NHS over the next decade with the launch of the Long Term Plan (LTP).

The 10-year Plan promises to save "almost half a million more lives with practical action on major killer conditions"; "investment in world class, cutting edge treatments including genomic tests for every child with cancer"; "early detection and a renewed focus on prevention in stopping an estimated 85,000 premature deaths each year"; "help prevent 150,000 heart attacks, strokes and dementia cases"; "investment in primary, community and mental health care"; to "provide digital GP consultations for all those who want them" over the next decade.

May wrote in the *Mail on Sunday*: "The launch of the NHS Long Term Plan marks an historic step to secure its future and offers a vision for the service for the next ten years, with a focus on ensuring that every pound is spent in a way that will most benefit patients. This will help relieve pressure on the NHS while providing the basis to transform care with world-class treatments."

These warm words cannot conceal the fact that the LTP is nothing but a preface to the further erosion of health services and lays the ground work for wholesale privatization.

Since 2010, the NHS has suffered the lowest ever funding increase in its entire history, propelling NHS trusts into dealing with huge deficits. Half of NHS trusts ended last year with financial deficits, with a combined deficit of £991 million. Clinical Commissioning Groups, established as part of the Health and Social Care Act in 2012 to replace Primary Care Trusts, reported an overspend of £213 million. Last September, NHS Improvement noted that NHS providers are carrying an underlying deficit of £4.3 billion.

Even if the Tory pledge of an extra £20 billion a year by 2023 for the NHS materializes, the vast proportion of the funding, if not all of it, would be required to repair the

devastation caused to public health care provision by years of systematic underfunding.

Many experts agree that the NHS is at a breaking point as a result of cuts in funding. They have not only created massive staff shortages but brought enormous suffering and thousands of excess deaths for patients.

Staff shortages are such that in England alone there are more than 100,000 vacancies. The UK leaving the EU, scheduled in less than two months, will inevitably exacerbate the shortages as the future of more than 62,000 EU workers who work for the NHS is uncertain.

Patient waiting times for elective surgery, cancer diagnosis and treatment and GP appointments continue to increase. Hitting NHS performance targets steadily declined since 2012-13. According to an article by the King's Fund think tank, in July 2018, average performance in major accident & emergency department (A&E) was 83.5 percent, against a target of 95 percent of patients to be seen within four hours. Currently, 4.1million patients are waiting for non-urgent treatment compared to 2.5 million in 2012-13. The National Audit Office (NAO) estimates that "it would cost £700 million to reduce the waiting list to the level last seen in March 2018, based on current trends."

While praising the plan, a *Financial Times* editorial pointed out that the May government's promise to increase funds by £20 billion by 2023 was inadequate to keep up with the demand. It wrote, "The financial package agreed by Mrs May for the next five years envisages annual real increases in NHS spending of a little under 3.5 per cent a year. That marks a sharp improvement on the just above 1 per cent during the past eight years but fails to match the average 4 per cent increase since the creation of the NHS. An ageing population, rising public expectations of the health service and expensive new drugs and technologies place an inexorable upward pressure on costs. And Britain spends less on health than, say, Germany or France."

The NAO annual report on the financial sustainability of the NHS is a devastating refutation of the government claims on the LTP. It warns that the NHS remains "unsustainable"

regardless of the plan. It points out that the promised funding increase “applies only to the budget for NHS England and not to the Department’s entire budget.” Therefore “it does not cover some key areas of health spending such as education, public health and capital investment that could affect the NHS’s ability to deliver the priorities of the long-term plan.”

One of the reasons that the NHS is chronically overstretched and struggling to manage is the year-on-year slashing of funds to local authorities by the central government, creating an enormous crisis in social care provision. The Local Government Association, the umbrella body for all councils, stated that by 2020 councils will have faced a reduction of core funding since 2010 of nearly £16 billion—a loss of 60 percent. The NAO points out that “without a long-term funding settlement for social care, local NHS bodies are concerned that it will be very difficult to make the NHS sustainable.”

Rather than resolve the NHS’s crisis, the LTP will exacerbate it in key areas. GP surgeries will be forced to close and merge in order to create new “network contracts,” covering populations of between 30,000 and 50,000. Services will be delivered through centralised “hubs” rather than family doctors closer to homes. This will see the disappearance of thousands of GP practices from towns and cities. Some reports suggest that 7,500 GP practices will be slashed down to 1,500.

But nothing is more destructive in the LTP than its commitment to continue privatization with vigour. The current network of 44 Sustainability and Transformation Partnerships (STPs) are to be turned into more centralized “Integrated Care Systems (ICSs) by April 2019. Every ICS will work towards an “Integrated Provider Contract” and these contracts will no doubt be awarded to or sub-contracted to the private sector.

Simon Stevens has already written to the government suggesting legislative repeal of significant key sections of the Health and Social Care Act 2012 that he deems as barriers to wholesale privatization and NHS provider mergers. The LTP wants to “remove the counterproductive effect that general competition rules and powers can have on the integration of NHS care” and “cut delays and costs of the NHS automatically having to go through procurement processes” and to give powers for the ICS commissioners to decide what is “best value” and to award contracts.

The cat was already out of the bag in a preceding document prepared by NHS England and NHS Improvement last December, which explicitly called for more commercialisation of the NHS. The NHS Operational Planning and Contracting Guidance states “in addition to efficiency savings, providers have opportunities to grow

their external (non-NHS) income.” It further talks about the NHS working “towards securing the benchmarked potential for commercial income growth.”

The Tory government’s intentions are clear in the LTP.

Under the banner of providing more choices for patients, the government is ready to send more and more patients to private hospitals for outpatient appointments or planned operations with the NHS footing the bill.

The Labour Party and trade unions deliberately downplay the threat posed to NHS by the LTP. They support the plan with a few token criticisms over funds and staffing. Jonathan Ashworth, Labour’s Shadow Health and Social Care Secretary, said, “While the aspirations for improving patient care NHS England has outlined today are welcome, the reality is the NHS will continue to be held back by cuts and chronic staff shortages.”

The last nine years of attacks on the NHS could only have happened with the connivance of the trade union bureaucracy who have sabotaged every struggle by health workers. In response to the LTP, Dame Donna Kinnair, acting Chief Executive and General Secretary of the Royal College of Nursing, said, “We welcome the ambitions outlined in the plan, and it deserves to succeed.”

UNISON, the UK’s largest union, has around half a million members in health care. Its head of health Sara Gorton said, “Finding the NHS more staff, and holding on to those it already has, is key to the success of the government’s plan.”

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