

UK Nightingale field hospitals to be “mothballed” as coronavirus death toll reaches 28,446

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A series of emergency field hospitals established in the UK to combat the coronavirus pandemic have remained largely empty and are now being scaled back, despite more than 4,000 new deaths from the virus in the past week alone.

Ten Nightingale field hospitals—named after Crimean war nurse Florence Nightingale—were announced by the Johnson Conservative government between March 24 and April 10. Seven were scheduled to be built in England, one in Wales, one in Scotland and another in Northern Ireland.

The hospitals in London and Birmingham were opened with considerable fanfare by members of the Royal Family. But more than three weeks later, most have received only a handful of patients, and in some cases none at all.

The London Nightingale, in east London’s ExCel exhibition centre, treated just 51 coronavirus patients during its first three weeks, despite having a 4,000-bed capacity. According to unconfirmed reports by the BBC, thirteen of these patients died from coronavirus. Only 19 patients remained at the hospital on Friday, according to a report in Saturday’s *Independent*.

Nightingale hospitals in Birmingham, Manchester and Harrogate have seen similar patient numbers, while Sunderland’s hospital, a 460-bed facility, “may never open”, the newspaper reported.

In Saturday’s exclusive story, the *Independent* reported that London’s Nightingale is “effectively being wound down” with staff told to expect a decision on its future “within days”. But doctors and other healthcare professionals have told the *World Socialist Web Site* the closures will make no real difference as the field hospitals have been an “utter failure”.

“Even if current NHS [National Health Service]

hospitals were completely overwhelmed, they would have been no help,” a general physician from a hospital in Wales told the WSWS, saying the field hospitals lacked basic equipment, infrastructure and staff.

“They knew these hospitals could not function properly. COVID-19 patients could never be managed properly there. They did not build air ventilation and air-conditioning systems that are needed in ITU [intensive therapy unit] to safely ventilate patients. They were largely unsafe for other patients—they would spread the infection very quickly.”

He described the field hospitals as cynical face-saving by the government, “They were only built because of public opposition to the government’s herd immunity policies and anger over the loss of so many lives... but they were built as a temporary measure without any plan. The most important part of any hospital is the staffing—but even existing hospitals are lacking staff. We’ve seen more than 100,000 staff vacancies and due to government austerity, the number of hospital beds has been reduced by more than 30,000 since 2008.”

London’s Nightingale has turned away dozens of patients due to staffing shortages or lack of suitable medical equipment. Around 50 patients were rejected by the London Nightingale after it opened, the *Guardian* reported on April 21. Of these, around 30 patients could not be accepted due to lack of available staff.

A further 20 or so patients were rejected on medical grounds. This included the patients being “too unwell to transfer,” having had a tube inserted into their throat to help them breathe or because they did not meet the hospital’s admission criteria, according to NHS documents seen by the *Guardian*.

Patients who require specialist care have been excluded from London Nightingale as the facility has no specialist

staff or equipment. One critical care doctor speaking to the *Financial Times* explained that many COVID-19 patients need renal or surgical support, which the Nightingale is not equipped to provide.

According to medical staff, the London facility would need 16,000 staff to operate at full capacity, with one medical worker telling the *Guardian*, “There are plenty of people working here, including plenty of doctors. But there aren’t enough critical care nurses... That leads to patients having to be rejected.”

Having gutted the NHS and slashed the number of nurses, the Johnson government has turned to the army to staff the new facilities. This includes 135 “combat medical technicians”—who normally provide battlefield first aid—to the Harrogate and Bristol Nightingales. Another 160 military personnel were deployed to assist with portage, maintaining equipment, stores management and distribution. As of mid-April, there were 2,842 military personnel deployed to assist UK civil authorities with their response to coronavirus.

According to the Unison trade union, by the end of last year there were 106,000 staff vacancies across NHS England, including over 44,000 nursing vacancies—a product of decades of underfunding and privatisation.

Health Secretary Matt Hancock has hailed the empty Nightingale hospitals as a success story, supposedly showing that existing hospitals had “more than enough” ventilators and other equipment to cope. A spokesman from the Department of Health and Social Care claimed, “thanks to the great work of selfless NHS staff, there is spare capacity in existing London hospitals to treat all coronavirus patients there instead.”

In fact, with no real overflow facility, London hospitals have struggled to cope. Northwick Park hospital in north-west London was unable to transfer more than 30 coronavirus patients to the Nightingale hospital and was forced to declare a “critical incident” and shut its doors.

Documents viewed by the *Guardian* showed that the Royal Free Hospital in Camden, north London, also abandoned plans to transfer around 15 patients to the Nightingale due to lack of staff. London hospitals including St Mary’s, the Royal London and North Middlesex, also had transfer requests rejected.

Two London hospital trusts—Imperial College Healthcare Trust and University College London Hospitals Foundation Trust—were at near full capacity in critical care wards over the Easter bank holiday weekend, at 95 percent and 91 percent occupancy, respectively. Both trusts’ occupancy rates remain well above the 85

percent maximum recommended limit set by the NHS to ensure safe and efficient patient care.

If hospitals were not overrun, it was only because thousands of sick and dying people were refused admission and instructed to “self-isolate” and stay at home.

At the same time, elderly people recovering from COVID-19 were discharged from hospitals back into care homes. Two government policy documents, published March 19 and April 2, instructed NHS trusts to transfer COVID-19 patients back into care homes to recuperate. Care England estimates at least 7,500 elderly people have died of coronavirus in these facilities.

A *Financial Times* analysis of Office for National Statistics data reported last week that that a “conservative estimate” of “UK excess deaths” was at least 47,000.

The growing demands of the government and big business for a return to work must inevitably lead to a second wave of infections. The government is fully aware that outright closure of the field hospitals, under conditions of further mass deaths, would provoke a huge public backlash.

According to the *Independent*, the London Nightingale “may be either repurposed for use as a step-down facility for recovering patients or mothballed but retained for any potential second waves of infection after the UK’s lockdown is lifted.”

The newspaper cited fears among senior health officials over hospital capacity, with one saying: “We are still well above intensive care capacity in London overall. We don’t have a fully functioning NHS in London that is coping with strokes, cancer, heart disease and coronavirus. If we mothball the Nightingale and need it again, standing it back up becomes that bit harder.”



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