

What's to be done?

Our NHS system has been the envy of the world for over 60 years. It's been a 'cradle to grave' service, free to all at the time of need. It worked because we all paid in through our taxes and were then able to rely on getting the health care we needed.

But if we take no action, the NHS as we know it will be all but destroyed. If you want to stop these changes, here are some ideas about what each of us can do. (Contact information at the end)

- If you want your healthcare to continue to be provided by genuine NHS services, rather than private contractors, ask your GP to mark your medical notes NPP (No Private Provider.) KONP (see below) can give you more info and a helpful card to give to your GP.
- Join the Patient Participation Group at your GP practice. Ask them to set up meetings with patients to explain how the Practice and CCG are working and how patient services will be affected.
- Join a local campaign group to find out what's happening to NHS services in your area (find local groups from KONP).
- Keep friends, family, neighbours informed about what you find out about changes to the NHS, and please show them this leaflet.
- If you or other people you know face cuts or long delays in your usual NHS services, please write to the papers and report the facts to the NHS Support Federation.
- If you are worried by what is happening to your NHS services write to your GP Practice Manager, your local CCG and your Member of Parliament (MP).

Useful contacts:

Keep our NHS Public (KONP)

19 Vincent Terrace, London N1 8HN

www.KeepOurNHSpublic.com

Health Emergency

BCM London Health Emergency, London WC1 N3XX

www.healthemergency.org.uk

NHS Support Federation

113 Queens Rd, Brighton BN1 3XG

www.nhscampaign.org

38 Degrees

(see, e.g. 'News' section)

<http://www.38degrees.org.uk/>

Local CCG

Ask your GP surgery for details

Your MP Write to your MP at The House of Commons, Westminster, London SW1A 0AA, or meet him/her at their constituency surgery (see local paper for surgery times). Find out who your MP is by visiting www.theyworkforyou.com

This leaflet refers to changes in England and is based on information available to us at the time of writing. But what is happening to the NHS, and what this means for us, is changing all the time. For updates and more detailed information, please see www.patients4NHS.org.uk

What is happening to our NHS?



The NHS is undergoing huge changes and what is being provided on the NHS is shrinking...
...So as an NHS patient you may start to find that:

- it will be more difficult to get referred to hospital or to specialists for non-urgent care;
- if the treatment you need is no longer available, you will have to choose to go privately, pay a top-up fee, take out expensive insurance – or go without;
- you won't get the choice of hospital or specialist that the Government had promised;
- increasingly, treatments will be provided by private companies for whom profit will be the priority;
- you have to wait longer for treatment or a hospital bed;
- you have to travel further for treatment;
- the quality of your care will be affected by staff cuts and poor staff morale;
- if you have a chronic condition and are being treated by a private company, your care will be disrupted if the company goes out of business or loses its contract.

This leaflet has been written by **patients4nhs**. We are members of the public who are alarmed at the speed and direction of changes to our NHS. We are not affiliated to any professional organisation, trades union or political party.

SOS

If you are worried about what's happening to our NHS, please take part in the mass demonstration for "A Future That Works", planned for Saturday 20th October 2012. This is being organised by the TUC to protest about the full range of health and welfare cuts. **We need to make sure the Save the NHS contingent is there in force.** Get more information from the TUC www.afuturethatworks.org or info@TUC.org.uk or 0207 636 4030

Why? What's going on?

The NHS is in turmoil because it's struggling with massive problems as a result of 3 major government policies:

1. **Government cuts.** As part of its austerity measures, the government has ordered the NHS to make savings of at least £20 billion over 4 years.
2. **The use of PFI to build new hospitals.** Over the past 20 years many NHS hospitals were encouraged to rebuild using private money (the Private Finance Initiative.) Many of these hospitals can't afford the very high loan repayments – so they face bankruptcy, closure or takeover.
3. **NHS "Reforms."** The Health and Social Care Act became law in March 2012. This calls for total top down re-organisation, changing the whole system of health care provision, reducing the Government's responsibility, and opening up the NHS to private health companies.

These policies do nothing to solve the main issues facing the NHS, including rising costs, new "epidemics" like diabetes, and increasing numbers of elderly people requiring care. Instead, they raise new problems. For example:

- Cutbacks in staffing levels and pay, whether made to save money or to increase profits in the private sector, and uncertainty about pensions and job security, are leading to under staffing, low morale and the risk of poorer quality care.
- The new structure is very complicated, needing more layers of management so overall costs of running the NHS are likely to go up; even making these changes will cost £billions.
- GPs have to join together in local Clinical Commissioning Groups (CCGs). Each of these will have a fixed budget to buy services for all patients in their area and private companies will compete with the NHS to provide these services.
- As most GPs don't have the time or skills to plan and buy healthcare services they will have to call in expensive support, often from private firms, to do this work.
- CCGs will be regulated by non-governmental bodies, some of whose members have links with private health firms.
- If the fixed budget of a CCG is not enough to cover all its patients' needs, an increasing number of 'non-urgent' services, such as hip replacement, will be rationed or no longer available on the NHS.
- Some CCGs are already offering money to GPs to refer fewer patients for tests and treatment.

- Because each CCG will be free to use their budget as they think appropriate, the care or treatment that patients can get on the NHS will vary from one area to another (the 'post code lottery').
- Finally, despite the Government having promised that GPs and other clinicians would be in direct charge of planning and buying services for their patients, new Referral Management Centres are being set up to examine GPs' decisions and control which of their patient referrals can go ahead.

What will it mean if some NHS services are run by private companies?

- Until now, there has been no profit motive driving the NHS: the care of patients has been the priority. But the first duty of a private healthcare company is to make profits for its shareholders – and this profit has to come out of the money allocated for patient care.
- Private health care companies will be protected by rules on 'commercial confidentiality'. This will make it difficult for those who are buying services to find out if they are getting the best deal.
- The Government has involved private healthcare insurance companies in planning the new healthcare system. This suggests they want the NHS to move towards a USA system where the fortunate take out expensive health insurance and the less fortunate (such as the chronically ill or unemployed) face a choice between getting into debt to pay for treatment, accepting poor treatment or going without.
- NHS hospitals – many facing financial meltdown because of PFI debts – will be allowed to earn up to 49% of their income by increasing the amount of private work they take on. This could lead to a two-tier system, with private patients taking priority while NHS patients wait longer for a hospital bed or treatment.
- Private companies, free to decide which NHS services they compete for, will choose to work in areas where they can make most profit. This will leave the NHS to cope with the most complicated and least profitable services such as A&E, care of the elderly and the chronically ill.

When is this happening?

Many changes are already underway and all must be in place by April 2013. Commercial companies (including some who do not have a history of health care provision such as Virgin and Sainsbury's) are already being awarded contracts across the country for buying or providing services.