

# Lewisham Issue 18 (17 May 2013) Hospital Worker

A Workers' Liberty healthworkers' bulletin

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## **A&E** crisis hits national news

The crisis in A&E has hit the national news. One in 10 patients admitted to A&E now have to wait more than four hours to be treated or discharged — double the figure this time last year.

The Foundation Trust Network (representing NHS Employers) says that unless drastic measures are put in place the system will collapse within 6 months. RCN spokesperson Patricia Webb described the situation in the East of England: "Patients are woken up at three in the morning and moved around the hospital — cupboards and catheter laboratories are being used to house patients."

QEH recently had a whole week of having record high numbers attending A&E - 50-70 more than their previous record high every day for a week. The sudden jump is partially due to lack of confidence in the "111" phoneline, which is being rolled out to replace NHS Direct.

The crisis is a symptom of a much bigger problem in the health service. Successive governments have been trying to achieve two contradictory goals: privatising the NHS and creating a viable for-profit health sector at the same time as cutting spending.

All healthcare experts agree that the key to reducing costs in the NHS is to reduce the number of emergency admissions. Early intervention, public health campaigns, and beefed-up GP surgeries could help. However, instead of increasing community services and then making savings, the government tried to achieve the goal with artificial market-mechanisms.

### **PFI SCHEMES**

First New Labour ordered £11.6 billion of hospitals to be built using PFI schemes. In return we will pay £79.1 billion, mostly to tax-dodging millionaires.

Then they decided to freeze spending at 2010 levels for five years, creating a funding gap of £20 billion. NHS managers had to come up with clever ideas to save money. But when these savings are added to the mounting PFI debt, the only clever ideas left were to shut down the hospitals. There are now 24 A&E departments under threat.

Then they legislated to punish any hospitals that have too many A&E admissions. Under the internal market Primary Care Trusts pay a set rate for A&E admissions. However, if more people turn up to A&E than in 2008/9 then the hospital only gets 30% of the going rate. The more admissions the hospital gets, the more money it loses.

Then the Tories shut down the PCTs and gave the money to new Clincal Commissioning Groups run by GPs who could use their control of NHS budgets to invest in community services. But why would they? At the moment they are getting 70% discount on A&E admissions!

Currently, A&E departments are subsidised from money gained from other parts of a hospital's work.

An NHS hospital is paid for every treatment it performs. Lowrisk treatments are generally "profit-making" and high-risk procedures "loss-making". As long as all of these procedures are performed by the same organisation the costs balance out. But, with the Health and Social Care Act, many of the low-risk, profit making services will be lost to the private sector. The more money hospitals lose, the more services they will have to close, putting further pressure on A&Es.

NHS England is now talking about using money that they are taking from already cash-strapped A&E departments to organise a smash and grab for private providers to take over out-of-hours GP services.

All these innovations combine to create a downward spiral where every failure is punished. Access to free NHS services will be increasingly restricted. A&Es will be increasingly overstretched. Departments will close.

"Profitable" treatments will be cherry picked by private providers. "Expensive" emergency services will be left to a rump NHS. Longer waiting times will cause a middle-class exodus to private health insurers.

NHS providers will start offering multi-tiered services, where those who can pay top-ups will be able to skip the queue.

The scale of this crisis has so far not impressed itself on the minds of the Labour Party leadership. Labour is the only political party capable of reversing some of this destruction, but Labour politicians have been mealy mouthed about what they are prepared to do.

In contrast, the view of the Labour rank-and-file and the broader labour movement is clear. Last year at Labour Party conference, delegates voted to scrap PFI debt and reinstate the duty on the Secretary of State to provide comprehensive healthcare.

We can build a mass campaign. Our campaign in Lewisham should link up with the other campaigns and reinvigorate the workers movement.

The community campaigns and union rank-and-file will have to drag the union and Labour leaders into effective action.

### **Unite the union**

The Unison branch at the hospital has played a very conservative role so far, so we feel it is only fair to point out that there is a union — Unite — that has been regularly giving support (financial and otherwise) and expertise to the campaign ever since the TSA first published its draft report last October.

Unite has members throughout the NHS, and you can very easily join at unitetheunion.org  $\,$ 

Unite staff will be helping to leaflet outside the hospital this week, and have been involved in the working groups of the campaign.

LHW provides a forum for staff at the hospital to tell their stories and air their views. If you have a story to tell or an opinion to share then get in touch. The bulletin is edited by healthcare professionals and we will ensure confidentiality is upheld.



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# Taking the government to court

The Save Lewisham Hospital campaign is launching a fundraising drive to rise £20,000 to cover the potential legal costs for its Judicial Review.

The campaign taking the government to court to attempt to overturn Jeremy Hunt's decision to shut our A&E and acute services; please support the fundraising drive and the campaign!

The first day in court is 2 July. The campaign is planning a day-long presence at court. If you can request that day off, then book it now. There's three days' court time booked, but we don't know yet how quickly a decision will be reached. The campaign's legal team feel we have a good chance at overturning the decision.

The campaign and the council are both challenging the legality of the decision that the TSA made, the campaign's specifically challenging the fact that the TSA extended his remit beyond the SLHT to a completely seperate Trust — ours!

The law allows challenges only on specific areas, and we can't predict the outcome, but it's important to use every opportunity to get this decision reversed.

### **People's Commission of Enquiry**

Sick of millionaire politicians and their flunkies running the world? Then get involved in the People's Commission.

The Trust's Special Administrators report was rejected by 98% of respondents. The only people who support it are the millionaires who will profit from a privatised health sector. So the Save Lewisham Campaign is organising its own evidence-gathering forum which will allow us to put forward all the evidence to show why the TSA's decision is wrong. This is a completely seperate event a few days before the judicial review but its a chance to get a bit of working-class common sense into the debate.

Although this is not in any way legally binding we are fortunate in having a number of lawyers willing to look at all our evidence for us, and together with a panel of experts they will come to conclusions about our case against the TSA, and publish them in a report.

The chair of the panel will be Michael Mansfield QC, who has worked on many high profile cases including the Hillsborough enquiry, and the panel of experts will include Baroness Warnock. The process of collecting evidence is starting in advance of the day of the commission, if you are interested in having your evidence included, get in touch with the campaign. The commission will be held from 9.30 am on 29 June in Catford Theatre.

No matter what the outcome of the judicial review, the process of the commission will allow the campaign to have a comprehensive case to use in all future campaigning to defend our services.



## **Nurse Karl**

Our bearded band 5 with his finger on the pulse of industrial unrest

#### Dear Nurse Karl,

The deaths of Bangladeshi garment workers have exposed the ugly face of world capitalism. Should this be a wake up call for us to boycott cheap shops like Primark?

Regards, Kristina

#### Dear Kristina,

The problem is that we can't shop our way to a better world.

It isn't our desire for cheap clothes that drives down wages and health and safety standards in Bangladesh. It's the relentless pursuit of profits by multinationals and the bosses they do business with.

We buy cheap clothes because they are available and most of us can't afford a more "ethical" alternative.

A boycott of brands like Primark would not help our fellow workers. Consumer boycotts are rarely effective. But even if it were successful, then the result would be that alot of factories would shut down and a lot of workers be made unemployed.

We have limited power as consumers but we have immense power as workers. Primark and others are attracted to countries like Bangladesh because they have authoritarian regimes which repress trade union organisation.

They know that when workers organise they will take a chunk of their profits. The TUC say that doubling the wages of a Bangladeshi textile worker would add just 2p onto the cost of a T-shirt.

By organising international workers' solidarity and demanding the right to free association for all, we can help our brothers and sisters in Bangladesh organise free trade unions. This would inspire super-exploited workers across the global south and lead to a fundamental shift in power. Following the needless deaths of 1,127 workers these calls are now getting a hearing.

South London Workers Liberty are organising regular demonstrations of Lewisham Primark. If you want to get involved contact Mark on 07855156290.

Soldarity, Karl

No more blood for profit: solidarity with Bangladeshi workers Workers' Liberty London Forum — Wednesday 29 May, 7pm, ULU, WC1E 1HY