



# Lewisham Hospital Worker

Issue 19 (25 May 2013)

**A Workers' Liberty healthworkers' bulletin**

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## Resist Hunt's divide-and-rule

**On Thursday 24 May, Jeremy Hunt made a policy statement to change GPs' contracts so they will be responsible for out-of-hours care. This proposal comes after a week of GP-bashing, with Tory newspapers screaming headlines "GPs NEED TO WORK HARDER!"**

BMA spokesperson Dr Lawrence Buckmann accused Hunt of making "childish comments" and "talking a lot of rubbish". Even Mike Farrar, head of the NHS Confederation, admitted that A&E waiting times have decreased since 2004 and only increased under Tory rule.

Clare Gerada (Royal College of GPs) said that GPs were regularly seeing over 60 patients a day. And on top of this, the government are putting GPs in charge of the entire NHS budget.

The backdrop to this announcement is the alarming increase in A&E admissions and desperate attempts by the government to find a scapegoat. While there are good clinical reasons for why continuity of care may be improved by GPs taking on some out-of-hours care, Hunt's latest statement is clearly attack on health professionals.

### CUTS AND CLOSURES

**The Department of Health has identified that the main problem is that £20 billion cuts since 2010 has resulted in ward closures, bed shortages, staff shortages.**

On top of this, attempts to privatise the NHS have led to increased fragmentation and a untrained staff making inappropriate referrals (e.g. NHS 111). But it's much easier for Hunt to blame GPs.

This is a risky strategy. In 2004, the GP contract was changed. GPs were given the choice of losing £6,000 from their salaries in exchange for their out-of-hours responsibilities. 90% of GPs took this deal and then set up co-ops that provided the out-of-hours clinics. A lot of them did very well out of this deal.

But why attack GPs now? The Tory-Liberal coalition have made a big noise about the new GP-led NHS which has wrenched control of healthcare away from the old bureaucracy. The GPs were not particularly happy about being given this new role as they don't have the time or expertise to run the NHS. But they reluctantly have set up their Clinical Commissioning Groups (CCGs) and are trying their best.

The attack now, following the attack on nurses last month, is a desperate political move to divert public atten-

tion away from the causes of NHS crisis — cuts and privatisation. We should not fall for Hunt's divide-and-rule tactics. The system as a whole is overstretched and we are all doing what we can to keep things working.

**We need to build links with the GPs — some of whom are active in the Save Lewisham Hospital campaign — and fight for real clinician-led NHS, well-resourced and accountable to the people we serve.**

### The Woolwich murder: a nurses' view

**The killing of a soldier in Woolwich is obviously a big talking point for us; it's just around the corner from here, near the QEH that we may yet merge with.**

We're not sure where the killers have been hospitalised, but many are wondering how the nurses who are treating them feel.

The horrific killing gave an pretext for the English Defence League to gather in Woolwich, capitulating on, and fuelling, the upsurge in racist sentiments arising after the killing. That racist backlash must be resisted.

The killing transcends national and cultural boundaries. There is no culture in the world where such a brutal act is acceptable or normal. The EDL's attempts to focus the blame on "Muslims" (or, even more wildly, "immigrants", despite the killers being English) can only serve to divide working-class communities.

Perhaps for us who are so intimately engaged in trying to heal human bodies, the idea of hacking a living human with meat cleavers is particularly shocking. Some of my colleagues have expressed the wish that the police had just killed the murderers, and others have joked about how the nurses treating them should deliberately underdose them with analgesics.

**But the nurses who are treating won't really be doing that, they'll focus on the physical health of these patients, as with any other. To do otherwise would dehumanise us.**

• More: [workersliberty.org/woolwich](http://workersliberty.org/woolwich)

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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## Fire cuts, hospital cuts: link the fights!



**While Jeremy Hunt is determined to shut us down, Boris Johnson is determined to decimate the fire service in London. They're proposing to close two fire stations in Lewisham — New Cross and Downham.**

This week there was a consultation meeting on the Downham closure in... Sydenham. Despite the location the meeting was full, lots of campaigners for Lewisham Hospital attended, because our campaigns are so closely linked.

If Lewisham Hospital goes, people in Downham will be furthest away from any A&E. Without a fire station, casualties in RTAs and fires will not be helped by the fire service as quickly, will have to travel further (in ambulances which are drawn from out of the borough because of the lack of a hospital, so will have a longer journey to Downham) to A&Es at the PRU or QE. The chances of surviving all of this must be seriously reduced.

The point was made over and over that these are deprived areas with lots of high rise apartments which take longer to

reach. The Whitefoot ward in particular has high levels of residents who are elderly or disabled, more at risk of succumbing to injury and smoke inhalation, and less able to escape a fire because of mobility issues. It was even said that because of high fuel costs, the elderly are using fireplaces to burn fuel to keep warm in the winter. The risks of house fires will be going up in this era of austerity.

The commissioner had to admit that the cost of the brochures produced for the consultation alone cost £10,000. The cost of the whole consultation, he said, cost significantly more. The whole thing had a very familiar feel for those of us involved in the TSA consultation.

Our lives, and the lives of our patients, are apparently not important to this government. These attacks are part of the same agenda — to make us pay for the financial crisis. Some of us may pay with our lives! Please respond to the consultation on this. If you don't have the glossy brochure, you can respond online at [bit.ly/firepetition](http://bit.ly/firepetition) until 17 June.

**The meeting refused to allow Boris' spokesperson the last say. A slow hand clap and chants of "No ifs, no buts, no fire station cuts" left Boris's pal Mr Cleverly lost for words.**



### Nurse Karl

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

**Dear Nurse Karl,**

I do not think what is happening to the NHS is right, and I enjoy reading the newsletter *Lewisham Hospital Worker*.

But I notice that this newsletter is produced by socialist agitators. Coming from Poland, I am a bit surprised to find that socialists still exist.

The problem with socialism is that you start off with a good idea of equality but you just end up replacing one elite with another. At least with free market capitalism, individuals have the freedom to be innovative and rise to the top. You know the saying: "Power corrupts and absolute power corrupts absolutely". I

hope we are successful in defending the NHS, which is a marvellous institution. But I also hope that you socialists remain small and insignificant.

You may mean well but your ideology leads to secret police and the gulag.

Regards, Bartek

**Dear Bartek,**

Workers' Liberty activists have fought hard against Stalinism both here and in the Eastern Bloc. In the 1980s, when Polish workers organised against the Stalinist regime, we organised solidarity trips to Poland and sent money to help the trade union movement. So we are no friends of the "socialists" you talk about.

The USSR was an oppressive dictatorship — this much we agree. But for us, the key question is why?

The simple answer is that there was not enough material wealth to make socialism viable. Socialism requires abundance. If food is free but there is not enough to go round, then people have to form a queue. Queues require people to police the queues. Before long the police get fatter and richer than the rest of us.

After the workers made a revolution in poverty-stricken, war-torn Russia, scarcity produced the Stalinist police state. Out of the ranks of the police and officials grew an elite that operated as a new exploiting class.

But that was last century. We now live in a world of abundance. There are 6 billion mobile phones in the world — one for every human being!

If this abundance was shared equally then, so long as we were politically vigilant, there'd be no queue, no exploitation and no oppressive dictatorship.

Solidarity, Nurse Karl