

Virgin now runs over 279 NHS services nationwide (including Deer Park Medical Centre in Witney and health services in Bullingdon Prison).

For a successful entrepreneur, involvement in the NHS can mean extreme wealth.

Now the rules of the game are changing. We can compete for all of the NHS budget on equal terms. What was traditionally locked up in the NHS is going to become available to the private sector.

- Christian Mazzi, head of health at Mitt Romney's US corporation, Bain Capital, which just bought the NHS's blood plasma supplier



The NHS needed reform. Doing nothing was not an option

The British Social Attitude Survey in 2011 showed satisfaction with the NHS that year was at its highest level since the survey began in 1983. New hospitals were being built, staff was increasing and promising new medical procedures were becoming available.

A survey in 2012 by the US-based Commonwealth Fund of healthcare in 14 high-income countries

showed that 92 per cent of respondents in the UK were confident that they would receive the most effective treatment if they became seriously ill. This was the highest percentage of any country studied.

The goal of the Health and Social Care Act of 2012 is to enable profit-seeking private corporations like Virgin and Bain Capital to become involved and bid for a growing share of health budgets, thus fragmenting and privatising the NHS.



In the privately run US health system, avoidable mortality rates are 40 per cent higher than the European average.

A review by the NHS medical director,
Professor Sir Bruce Keogh, reported that
mortality rates in all NHS hospitals
have been falling for the past
10 years, with overall
mortality down by an
estimated 30
per cent.

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A privately run service is more efficient

All research shows that an integrated publicly run health service is more cost-effective. According to a recent study by the Royal Society of Medicine, the NHS is one of the most cost-effective health systems in the developed world. The research looked at 17 countries over 25 years. In the US private healthcare system, spending in the period 2008-12 was 17.9 per cent of GDP, the highest in the world. In the UK it was 9.3 per cent.

Where does all that money go? In 2009, the top 5 US health insurance companies reported \$12.2 billion in profit. The Health and Social Care Act will open up the NHS to market competition on the US model. The beneficiaries will be the insurance companies and private corporations.



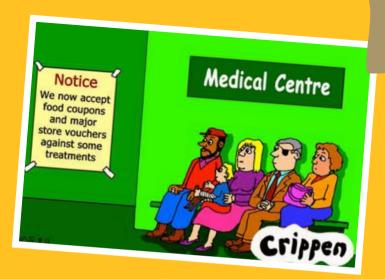
Andy Burnham (health minister in the last Labour government) regrets:

It's like a genie out of the bottle thing, isn't it? You can let it out so far, but once the market takes a hold on the system it will destroy what's precious about it. We had been building a policy that said it doesn't matter who provides healthcare as long as it's free at the point of delivery. But I'm saying it does matter.'

As long as it remains free, it doesn't matter who runs it

If healthcare is run by private corporations for profit, then it does matter. Private companies competing for health contracts can increase their profit by making fewer workers do the same amount of work or by paying lower wages. But a good quality health service depends on having adequate highly skilled staff who are paid a proper wage. To offer high-quality care and still make profits, such companies would have to begin charging patients.

This has already been suggested by Malcolm Grant, chair of NHS England. As NHS hospitals compete for funds, the government offers them two options: increase the number of private paying patients or charge 'top-up fees'. The legislation allows NHS hospitals to offer up to 49 per cent of beds to private patients.



Most of the cost increases of recent years have been the managerial costs that resulted from the internal market introduced by the John Major government in 1990. Managerial costs then rose from 5 to 14 per cent of the NHS budget.

Things have to change because, with increasing demand, we can no longer afford it

The government claims that the cost of the NHS will have doubled in 20 years and will be unaffordable unless 'something is done'. This is just another of its attempts to justify its privatisation programme.

The Scottish government has released figures on the estimated cost of the NHS in Scotland in coming years. It projects an average increase in the NHS budget for all ages between 2016 and 2031 of 1.2 per cent a year and for the older people's social work budget 2.7 per cent.

But during that same period, the economy is expected to grow 2.5 per cent per year. The real figures are not so frightening after all.

One of the major concerns about unbridled competition in the health service ... is that it will lead to cherry picking of profitable services leaving less money for other areas.

- editorial in The Psychiatrist, no. 35, 2011



Patients already had a say in the choice of hospital before this legislation was introduced. This kind

of choice is fully compatible with publicly run national healthcare. But only a very small percentage of patients chose to make use of this choice. This is because what patients want is a good local hospital. The present government constantly links choice with competition. The same argument was used with the privatisation of water, gas, electricity and the railway.

Competition between supermarkets and retail shops might offer more choice and lower prices for customers but NHS patients don't shop for healthcare. The argument for more competition is simply a smokescreen for opening up the NHS to private companies.



But it's too late to do anything now. I'm just one person, there's nothing I can do

It's not too late. Your local authority and local Clinical Commissioning Group make decisions about NHS services every week. Here are some of the things you can do.

Get involved in a local campaign. You are not alone. Join Keep Our NHS Public, the NHS Support Federation or 38 Degrees. The public campaign in Lewisham showed what united public opposition can achieve.

The Health and Wellbeing Board of the County Council is responsible for health strategy. It meets in public. Make your views known.

Healthwatch is meant to be the local voice of patients. Consider getting involved to 'rock the boat' from inside.

Your local Clinical Commissioning Group has regular meetings in public. You can attend meetings, ask questions, make your views known to them.

Get involved in the Patient Participation Group at your GP's surgery. If there isn't one, ask if you can set one up.

Make your views known to your local MP.

Find out if the person you intend to vote for in 2015 will support the repeal of the 2012 Health and Social Care Act and restoration of a publicly funded and provided NHS for which the Secretary of State is responsible.

Find out which services in your area are being outsourced to the private sector; protest to your local CCG and in the local media.

THESE ARE THINGS YOU CAN DO



Keep Our NHS Public (KONP) is a national campaign against further privatisation of NHS services. The NHS Support Federation, Health Emergency and the NHS Consultants Association are affiliated, and the campaign enjoys support from many doctors, NHS staff, and trade unions. Oxfordshire KONP meets at 7.30 on the second Tuesday of each month in Oxford Town Hall. keepournhspublicoxfordshire.org.uk 01865 558145

The NHS Support Federation aims 'to protect and promote the founding values of the NHS'. nhscampaign.org

38 degrees 'brings you together with other people to take action on the issues that matter to you and bring about real change'.

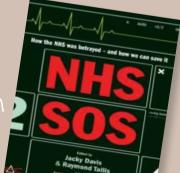
38degrees.org.uk

Our NHS, hosted by OpenDemocracy, is dedicated to reinstating a genuine National Health Service in England. It is an important resource of information for campaigners. opendemocracy.net/ournhs

The Socialist Health Association campaigns for an integrated healthcare system that reduces inequalities in health and is accountable. sochealth.co.uk

Unison unison.org.uk Unite unitetheunion.org British Medical Association bma.org.uk Royal College of Nurses rcn.org.uk

Recommended: 'NHS SOS: How
We Can Save it' Edited by
Jacky Davis and Raymond
Talis, foreword by Ken Loach



But because there will never be an announcement in parliament that the NHS is privatised, and because the private oviders will be allowed to use the NHS ogo for anything that they are HS funding for, it is very likely eneral public will not be aware that the ivate sector has in fact come en over whatever bits of the NHS it finds profitable until probably service

- Lucy Reynolds, London School of Hygiene and Tropical Medicine



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