

Oakridge Voice

“The trouble with...”

The NHS is one of the largest organisations in the world, employing over 1.4 million people with a turnover in excess of 100 billion per year. In any one week over 3 million people access NHS services in the UK -- in everything from the largest and most expert Teaching Hospitals in the world to the provision of nursing health care day in and day out to lonely and unwell people in their own homes. From bunions to brain surgery, new life to terminal illness, preventative to palliative health care we all call upon this “NHS” at times of greatest need and distress. It is a giant, almost of unimaginable size and complexity yet it has to deliver to us a service of such quality, such exactitude, such immediacy and intimacy. It is also an organisation on which we all have a view and a wish to express our opinion. From wry comment to lengthy anecdote, political catch-phrase to lengthy Commission reports, we demonstrate a remarkable capacity to comment on every aspect of the NHS on every possible occasion.

Frequently those comments begin with that well-worn phrase “The trouble with the NHS....” But lets start from a different perspective. Lets start indeed with the phrase...”The trouble with *us* is...” For we are the root cause of the problem, and we may also the major part of any solution. If we are to look at reforming the NHS then we are looking at the wrong end of the telescope because truly we need to begin with looking at our own attitudes and our behaviours. The trouble really begins with the insatiable and burgeoning demand and the unreasonable expectations we make on the NHS.

First our insatiable demand.

Our population is growing with the increase in birth-rate and the slowing down in death-rate. In addition we expect health care from cradle to grave and we seem to absolutely need it to be available twenty four hours a day, seven days per week. Our demand for services has grown exponentially yet the original planning of the NHS, all those years ago with the dim and distant figure of Beveridge disappearing into our folk-mythology, envisaged that as people used the services of the NHS their health would improve and they would have less need of doctors and nurses.

It is one of the greatest example of the laws of unintended consequences that precisely the opposite has happened and we are now driving the NHS to the point of near collapse.

Second, our unreasonable expectations.

We expect to be well, we expect to be healed, cured, made to feel better, live free of pain, and when we do need a hospital or a health centre or a doctor then we are outraged if they are not immediately available and within a few miles of our homes. People had no such expectations only fifty years ago. Suffering, illness, pain was seen as inevitable, a part of life and something which we had to bear with more or less fortitude. We did not expect to be healthy as an inalienable right, nor to be cured of our ills. Often people had no access to medical assistance self-medicating with everything from “Granny’s home-made potion” to the local Blacksmith’s quick extraction of teeth in the corner of the Smithy.

We also expect our health care to be free. “Free at the point of delivery” has become part of our entitlement culture regardless of our means ever since the founding days of the NHS. Fair enough in itself but somewhere the costs have to be met. Unreasonably we resent the payment of National Insurance contributions or Income Tax to pay for the very services on which we make incessant demands. We are expressively grateful to our doctors, nurses, occupational therapists, chiropodists, dentists, community health workers, midwives when they have assisted us or one of our loved ones. “Thank you” cards, flowers, chocolates and smiles of appreciation are in abundant supply. But at the same time we become resentful when more demands are made for us either to pay up for better services or put up with what we can afford. Happy as we are to pay £25 for a casual meal out, we balk at paying £7 for a prescription. Ask us to pay for parking at a Cricket Festival we cheerfully pay up: seek a fee for parking in hospital grounds and we accuse the NHS of profiteering on the backs of the sick.

True we shall examine a little more whether resources are used efficiently, and inevitably there will be some waste and some excesses, but at the heart of the matter, and a very weak heart it can be at times, is the simple but unpalatable medicine we need to administer to ourselves --- start paying for what is needed not with chocolates or flowers but with hard cash and revisit our expectations that the NHS is there to give us eternal and pain-free life.

Not, of course, that we advocate a return to these grim, painful, and life-threatening times when life for so many was “nasty, brutish, short”. But it is a sobering thought just how rapidly we have as an entire nation places inordinate demands on others. Oakridge Voice starts, therefore, not from wanting to “fix” the NHS but rather to examine what we need to do either to curb our demands or open our public purse far wider.

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