

THE NHS WE WANT AND **NEED**



The outpouring of public support for health workers on strike shows awareness of the crisis facing the NHS. Health workers and their unions stress that restoring the pay eroded since 2008 is necessary to stop staff - now at breaking point - from quitting their jobs, and to recruit to achieve safe staffing.

We want that too, and much more. The government has deliberately run down the NHS while transferring work and money to the private sector. We want the NHS restored to its founding principles. This is not nostalgia for 1948. It is needed now for a service which actually works in the interests of patients. Privatised social care means huge profits for the owners. Companies more concerned about shareholders than users cannot provide a social care service to complement the NHS.

PRINCIPLES

The NHS was conceived as a universal, comprehensive health service, publicly provided, publicly accountable, publicly financed through general taxation, free at the point of use, with clinical decisions on treatment taken without regard to ability to pay. **All these principles are under assault.**

Universal: Healthcare for everyone in Britain. Not singling out certain people for charges and reporting them to the Home Office if they can't pay, creating fear of contact with the NHS, so their condition can deteriorate. Not turning health workers into border guards, contrary to their training and professional requirements to offer appropriate care to all patients, regardless of ethnicity, sex, gender, or sexuality. Remembering that in a pandemic, no-one is safe until everyone is safe. **Comprehensive:** All the healthcare required throughout life with everyday services near to where we live. Not forcing patients to choose between lengthy waits for NHS treatment and going private.

NO PRIVATE SOLUTION TO A PUBLIC CRISIS

Not people buying treatments dropped from the NHS. Not pretending a computer algorithm can substitute for a health worker.

Publicly provided: Healthcare without profits for shareholders. Not crony covid contracts for somebody's mates. Not private companies owned in the USA or an offshore tax haven. Not private firms relying on trained staff poached from the NHS, cherry-picking routine treatments like hip replacements or cataract removal and expecting the NHS to step in when something goes wrong. Not turning personal data into a source of profit without consent. Not a financial patchwork, where private companies negotiate the price of treatment. Not a system designed by accountants and management consultants.

Publicly accountable: When things go wrong, mechanisms to find out why and fix it. Transparency, not commercial confidentiality. Supporting whistleblowers who highlight problems. Not decisions behind closed doors by Integrated Care Board committees. Not schemes dreamt up in boardrooms, accountable to shareholders. Not politicians concealing if they use private healthcare.

Publicly financed through taxation: The NHS funded through a fair tax system, so rich people pay more tax on income or wealth. Not austerity, the government's political choice. Not expecting patients to take out health insurance. Not NHS Trusts financing themselves with private patients. Not Integrated Care Boards cutting Trust budgets, and paying private companies to tell Trusts how to comply. Not European social insurance models - more bureaucratic, expensive and making individuals pay.

Free at the point of use: So no-one is held back by fear, from seeking care when they need it. That's what happened in Britain before 1948, and today in countries without an NHS like the USA, where people without insurance can be denied treatment, and those with it can lose their life savings on medical treatment because of 'under insurance' and 'add-ons'.

Clinical decisions taken without regard to ability to pay: So doctors, nurses, or allied health professionals working in multi-disciplinary teams, consider the patient and draw on clinical knowledge and experience, to make the best decision they can without being distracted by money.

**All this could happen if NHS
staff, trade unions, patients,
and the public fight for it!**


**KEEP OUR
NHS PUBLIC**