

Brian EDWARDS

Brian takes a gloomy look at the prospects ahead but has some real-time solutions for the Politicians and the NHS.

God what a mess the NHS is in. Huge efficiency targets [and perhaps more to come] but no cuts allowed at the front line however that is to be defined. Department of Health facing savage cuts and likely to turn in on itself. SHA leadership disabled by their uncertain future. A ministerial team who don't much like Foundation Trusts and who believe in passing all the money to the GP's who show little enthusiasm for having it.

Towards the end of the great Fundholding experiment many, perhaps a majority, had substantial deficits but nobody talks about this. Somebody needs to remind the new ministerial team that they have no powers whatsoever to direct the actions of Foundation hospitals some of whom are sitting on comfortable reserves and others who are effectively bankrupt.

A health policy morass of conflicting and contradictory policies so complex that even the insiders cannot explain them to each other.

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Public sector pay freeze on the way and a pensions review. Unite can expect a massive increase in membership as can the BMA and the RCN. Industrial action seems inevitable but the present NHS has few if any managers with industrial relations experience.

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Private sector providers expect to be sacrificed to save NHS hospitals throwing a lot of skilled nurses into a tight labour market.

Waiting lists are being allowed to stretch to the outer limits of current targets and will soon break through. Other targets will simply be abandoned and in the turmoil nobody will notice until it is too late. Capital investment frozen.

Some PCT's will chart a way forward with their large providers but many will collapse under the pressure. They will hide the evidence for a while but it will eventually emerge.

It's a tough call for the new ministerial team because as they contemplate the mess it is getting worse by the hour.

The chances of hitting current efficiency targets in year on a recurrent basis....nil.

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A team of wise heads might find a way through. Make the cuts but preserve the essentials, motivate senior clinicians and managers with a clear agenda for action.

Tackle the clinically sensible but politically difficult issues like A&E services head on.

Require every PCT tell its local community and oversight committee what the real choices are, no matter how politically difficult or inflammatory this might be.

Honesty will build confidence. An independent national *Commissioning Authority* with the right leadership might help if it were created immediately in shadow form.

If the NHS loses the hearts and minds of clinical and managerial teams it will enter the history books as a great social experiment that ran its course and died in the early years of the 21st century.