

Adding value – in the state sector

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I discussed some [of the comments](#) on added value ion the public sector with my wife last night. She has an opinion on this. She's a GP. Technically she's in the private sector, being self employed and being a partner in a practice run for profit. It so happens however that (like rather a lot of public sector enterprises) she is dependent upon the state for her revenues.

So, is she adding value by recording profit? Or is she, as [one commentator](#) (who got his facts wrong, but we'll ignore that) put it part of the:

Public sector [that] pisses 50% of the wealth up the wall, having taken it from the public by force [?]

Now, I don't deny GPs are well paid — but after 11.5 hours at work, with 20 minutes break during which she discussed patients with colleagues, and another 90 minutes then dedicated during the evening to researching a patients condition (of which they no doubt will always be wholly unaware), coupled with the low grade worry of having missed a diagnosis that is a perpetual part of a GP's life — which is why it is one of the highest stress occupations in the country — so it should be. Having been a partner in a firm of accountants I'll tell you who works harder with more stress — a GP, any day.

And she did that to add no value? To be a burden on society that needs to be cut? I'm sorry — those who write this stuff live in a land of fantasy.

And please don't say that the market could provide this service instead. Rather unusually my wife has also been a private GP. And she has not a good word to say about it — it is hand holding for the worried well that will never be accessible by the majority of the sick. That is because in this country sickness is strongly correlated with poverty.

This is the reality she faces daily. It is the limitation on all she does. the sick poor are the source of greatest demand on her time. It is why she supports what I do. Only redistribution of wealth, decent housing, properly paid jobs, and the respect that flows

from them can cure a lot of the real sickness she sees.

And the market has not supplied that, cannot supply that and has no intention or mechanism to supply that.

Yes we want and sometimes need what the market can supply — which is over half of our national wealth. And I'm fully supportive of that. But to argue that those who work in the public sector — whatever it may be given the porous boundaries it has — are a simple burden is about as far removed from reality as it is possible to get.

As even those with health insurance will notice the next time they are really sick.