Funding the Future

This is how the NHS will fall over

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The Guardian has reported:

Thousands of older patients are being forced to stay in hospital long after they are fit enough to leave, doctors are warning — and the problem is being exacerbated by the coalition's cuts to council budgets.

In a survey of 502 doctors working in UK hospitals, 251 (50%) said the problem known as "bed blocking" — which costs the NHS *tens of millions of pounds a year and forces needier patients to wait on trolleys — was worse now than a year ago, while 200 (40%) said it had not improved.*

This is how the NHS will fall over in the face of government cuts. These cuts are being planned chaotically and not systematically. In other words, no one is joint up any of the thinking. That failure to plan does however have implicit in it the assumption that any open decision has no externalities or unforeseen consequences elsewhere.

That, however, is not true. A lack of council care will mean bed blocking rises, enormously. Doctors will not release patients if they cannot be cared for after leaving hospital. And cuts in social services and access to welfare facilities will all have a consequence at the other ned of the NHS - as they will massively increase demand for GP services if they are the only point of contact with the welfare state that is left for some people.

The assumption that demand on the NHS will only increase as a result of an ageing population and new technology will in this circumstance prove to be hopelessly inaccurate. The increase in demand will be the consequence of other cuts, and a service already near breaking point will tip over into chaos all too easily as a result.

And remember, GPs are meant to manage this demand at the same time as they are expected to also cancel many surgeries to cover the new demand to commission.

The equation does not and will not work. And the impact will be seen very quickly. The ConDems have got this one very, very wrong.

Disclosure: my wife is a GP