

Economic realities: failing health services

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This is [from the Guardian today](#):

GP surgeries should be set up at hospitals to ease the growing pressure on accident and emergency units, which are struggling to cope with an "unsustainable" increase in patients, a report from the UK's emergency doctors warns.

Family doctors, as well as nurses and specialists in looking after frail elderly people, need to assess and treat as many as 30% of the patients arriving at hospital and keep them away from the casualty departments, according to the College of Emergency Medicine (CEM), which represents the NHS's 4,000 A&E doctors.

There are three themes implicit in this. First, our demography is guaranteeing an increase in NHS demand.

Second, changes in lifestyle mean people cannot or will not present to GP surgeries. The will not is as important as the cannot: waiting is no longer an option some people will choose when in the past they did.

Third, funding is undermining the credibility of a service on which we all rely, even if we'd rather (of course) never call on it by choice.

The reality is that reorganisation can only deal with so much of this increasing demand. Society has to decide if it will fund this service or not. It does not have to. But people will suffer and die if it does not. That's an economic reality.