

LETTERS

RESPONSE

Martin McKee replies to Andrew Lansley

Martin McKee *professor*

London School of Hygiene and Tropical Medicine, London WC1H 9SH, UK

I thank the Secretary of State for seeking to correct my misunderstanding of the proposed NHS reforms.¹ However, his response has raised additional questions in my mind, not least because in the 24 hours since his response was published he has published almost 140 amendments to the bill. I wonder if I am alone in struggling to keep up.

I am reassured to know that the NHS will “remain free at the point of use” but am still unclear whether this covers those services, such as sexual health, that are being transferred to local government and therefore will no longer be “NHS.” Will councils be able to means test them, as they did with the long term care services that they previously took over from the NHS?

I welcome the description of who is responsible for various things but note that my confusion was shared by the House of Lords Constitution Committee, which stated that “it is not clear whether the existing structures of political and legal accountability with regard to the NHS will continue to operate as they have done hitherto if the Bill is passed in its current form.”²

I agree that there are certain things that would benefit by being made explicit but remain uncertain about why these comparatively simple matters require a bill stretching to several hundred pages. The argument that the reforms will increase the scope for frontline professionals to make decisions seems strangely at odds with a commissioning structure that replaces three management tiers with five³ and contains a series of ministerial injunctions to “make every contact count” and, for nurses, to undertake ward rounds hourly. It is also surprising to read that patient experience in the NHS is poor, given evidence from the Commonwealth Fund that the UK is first or second among 11 countries on many measures of patient centredness.⁴

The Secretary of State offers reassurance about privatisation of commissioning and tells me that I am wrong in believing that the consortiums will be required to increase the numbers of patients treated in private facilities. I know that commissioning consortiums will be statutory bodies but read in the current draft guidance on commissioning support, which covers the operational work that they will do, that “the NHS sector, which

provides the majority of commissioning support now, needs to make the transition from statutory function to freestanding enterprise.”⁵ Furthermore, while I am aware that the bill does not explicitly favour any provider, I read in the most recent NHS Operating Framework that one of the measures on which the National Commissioning Board will be judged is the “trend in value/volume of patients being treated at non-NHS hospitals.”⁶ Surely, we must expect that commissioners will respond to this clear incentive?

Finally, I remain puzzled about how the legislation is needed to give confidence to the NHS given the results of the recent YouGov poll reporting that 80% of NHS staff expressing an opinion believe that the bill should be withdrawn.⁷

I am sure that, in time, I will manage to understand the reforms. Indeed, it may be that some of the answers are contained in the torrent of amendments being introduced to clarify the intentions of the bill, although this begs the question of why, if it was all so clear, they are now deemed necessary. Sadly, I fear that, for now, my confusion is only deepening.

Competing interests: MMCK wrote the article that the Secretary of State is responding to.

- 1 Lansley A. Why legislation is necessary for my health reforms. *BMJ* 2012;344:e789. (1 February.)
- 2 House of Lords Constitution Committee. Report on the Health and Social Care Bill. www.publications.parliament.uk/pa/ld201012/dselect/ldconst/197/19703.htm.
- 3 Watt N. Andrew Lansley accused of presiding over “utter shambles” on NHS reforms. [wintourandwattblog. Guardian](http://wintourandwattblog.guardian.com/2012/jan/27/andrewlansley-nhs) 2012 Jan 27. www.guardian.co.uk/politics/wintour-and-watt/2012/jan/27/andrewlansley-nhs.
- 4 Schoen C, Osborn R, Squires D, Doty M, Pierson R, Appelbaum S. New 2011 survey of patients with complex care needs in eleven countries finds that care is often poorly coordinated. *Health Affairs* 2011;30:2437-48.
- 5 NHS. Developing commissioning support. Towards service excellence. 2011. www.hsj.co.uk/Journals/2011/11/09/t/q/p/Towards-Service-Excellence_021111-FINAL.pdf.
- 6 Department of Health. The operating framework for the NHS in England 2012/2013. www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131428.pdf.
- 7 YouGov. YouGov 38 degrees survey results. January 2012. http://cdn.yougov.com/cumulus_uploads/document/7z5fk1xe8g/YG-Archives-38Degrees-NHSWorkers-260112.pdf.

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