

## **Christina McAnea (UNISON, Head of Health)**

Privatisation is growing exponentially at the moment in the UK. £6.6 billion of contracts went to the private sector in 2013-14. Estimates since then suggest a 500% increase in the number of contracts awarded to the private sector. This is despite that fact that there have also been some spectacular failures in privatisation.

So we have had things like Circle's failure at Hinchingsbrooke; Serco failing with their community health services in Suffolk; and Arriva with North-West Ambulance just to name a few. We are now at a situation where those commissioning bodies in England who are planning and delivering and commissioning services are now relying on private companies to get their advice, who then award themselves contracts or whose clients award themselves contracts.

Some of these companies are offshoots of multinationals, who have no concern whatsoever about delivering a decent healthcare system in this country. Look at what happened last year with the Four Seasons care home company. When they were going into financial meltdown at the end of last year they sold off £20 million of their company to an aggressive hedge fund in America called Alternative Medical Capital, who proudly boast on their website that they specialise in swooping on distressed and bankrupt companies. Does anyone think they are going to care about how they deliver services to elderly and vulnerable people in this country?

One of the things I keep hearing is that compassion is at the heart of everything you do in the NHS and that is absolutely true. Why isn't compassion at the heart of the decision making about who to award contract to? Because I'm quite sure Alternative Medical Capital don't give a toss about the people who Four Seasons are looking after.

Even when the NHS is competing and is putting in bids, services are still being awarded to private companies, even when they are more expensive than the NHS consortium. The whole system is being weighted against the NHS and the public sector being able to run services.

You must be as sick to death as I am hearing Tory ministers say 'we have protected the NHS'. When all they mean is 'we haven't slashed it quite as much as we have all the other services'. The NHS is traditionally needs funding increases of 4-5% a year, just to keep pace with inflation and increases in mandatory service. We now have a percentage of GDP slipping down year on year, so it's going down to something like 6.2% this year from a high a few years back of 8%. We are now slipping back in terms of comparison with other European countries; yet at the same time we are delivering first-class services when you look at any international comparisons.

We are told there is still room for "efficiency savings" with the NHS. I can assure you there is no room for efficiency savings. Everything that can be cut, has been cut. Everything that can be done better has been done better. The way we have saved money in the past few years has been about pay freezes, particularly for staff. We can't have a system where the way you save money is to slash the salaries of the staff who work in that service.

We've been running big campaigns around some of the privatisation stuff. We've been doing this with community groups and we're having some success. We've had success with the George Eliot hospital in Nuneaton, and the Weston Hospital where they wanted to franchise out the management: that's the kind of work we've been wanting to put the resources into.

One of the things we're very involved with at the moment is the Student Bursary Campaign. Unison's fully behind this, working very closely with our student members. Half of those students have childcare responsibilities. We're continually told this is about allowing more people to become nurses, midwives, OTs – as though the demographics for that group were the same as every other student, when clearly they are not. Student nurses have to do 4,600 hours of placement. Instead of taking away the bursary, the government ought to be paying them a salary for the job.

We are very much watching what is happening with the 7-day campaign and unsocial hours. We are waiting to see what is going to come out of that and what they are going to say. Last year they said Agenda for Change isn't a barrier for unsocial hours. Self-evidently it's not a barrier to 7-day services because we already have 7-day services, and we've got unsocial hours payments.

So what this government wants is 7-day services for either the same money or less money. Senior negotiators from the Department of Health say that is entirely possible. I say to them, 'How can you possibly get more people to deliver to more services over 7 days for the same money without cutting?'

I can't see how this can possibly work. The day of week you go in or the time of evening you go in should have no impact on your survival rates – everyone accepts that. What we don't accept is that they should be saying to hard-pressed staff who work in the NHS 'It's just like working at John Lewis's'. But it's not like working at John Lewis's: people need access 7 days a week, 24 hours a day. Because we are running a service for people who are usually at their most vulnerable, and that's why staff who work in the NHS are committed to what they do.

We have to keep up this campaign. We're certainly working with the BMA and watching with great interest to see what comes out of their campaign.