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THE ENDGAME FOR THE NHS?

The Sustainability and Transformation Plan

Dear Doctor

At a time when we understand morale may be low in the general practice community, you may or may not know of NHS England's Sustainability and Transformation Plan (STP).

The STP involves yet another England-wide, top-down re-organisation of the NHS, more extreme than anything seen since the inception of the NHS.

These are the facts:

- England has been divided into 44 STP regions known as "footprints". Each region, with a newly appointed leader, is to take over full responsibility for provision of NHS and social care services within their borders. The local "footprint" is "S W London", tying together Epsom, Sutton, Merton, Richmond, Wandsworth, Croydon and Kingston hospital Trusts, the CCGs in the area and all the related local councils.
- Despite severe underfunding for many years, forcing them to accrue massive deficits, the footprint organisations had to work together to show how they could cut their combined deficits in this financial year.
- Detailed 1 year and 5 year plans and budgets to "achieve" this originally had to be submitted to NHS England by the end of June but when it proved impossible to do that the deadline was extended, twice. This was despite most "footprint" regions employing extra expensive private consultants to assist them in this task.

To achieve financial balance locally each STP must set out the mixture of

1. "demand moderation" (reducing the number of patients and/or treatments provided)
2. "allocative efficiency" (ie targeted cuts), "provider productivity" (ie staff cuts and downgrading)
3. "income generation". The latter is of particular concern given that NHS hospitals can now generate up to 49% of their income from private patients, and
4. The sale of NHS Estates (NHS land and property- the "family silver")

Areas that do not produce a satisfactory and timely plan, may be denied a share of £1.8 billion funding and may have their leader replaced by NHS England

The aim is to impose savage cuts on NHS services to save a massive £2.3billion by 2016/17 despite the U.K. spending far less than our European neighbours. The UK spends 7% of GDP, whereas France and Germany spend 11% GDP.

What will this mean for example for the SW London hospital Trusts' combined £600million plus deficit? In addition to this CCGs and Councils will have to eliminate their own deficits.

This further massive reorganisation is being implemented with undue and alarming haste. It involves the imposition of the clinically and organisationally untested and unproven models of care set out in Simon Stevens' privatising Five Year Forward View (5YFV).

What is wrong with the STP?

This massive shake-up is being introduced with no Parliamentary approval and no public or professional consultation or engagement.

It will greatly increase NHS privatisation, involving private companies in planning, commissioning and delivering "new models of care", often relying on family carers and "hospitals at home" to achieve savage cuts to budgets.

It will bring us ever closer to a US style healthcare system, slashing services and staffing, with inevitable consequences for quality of care, patient access and life expectancy with unlimited access for the private sector.

The "deficit" trap

NHS Trusts around the country are in excess of £2 billion in deficit. The Government is using STP to hive off financial responsibility and blame for the consequences of deficit elimination onto the local "footprint" boards.

Cuts

There will inevitably be cuts in services and NHS staffing as a result of reduced budgets. Taken together with the Government's determination to undermine NHS pay, contracts, and conditions of service, this plan will inevitably lead to much greater staff demoralisation. The cuts will inevitably increase risks to patient safety.

Composition of the footprint boards

Alongside local authorities, healthcare trusts and CCGs – it can be predicted that private healthcare providers and consultants will become centrally involved in decision-making to a rapidly increasing degree.

Local implications

1000's of patients in SW London are already experiencing cuts in local provision and the consequences of private sector involvement in local services. STP could only result in the expansion of such private sector involvement with predictably dangerous consequences.

Action is already being taken in SW London to challenge the introduction of this highly destructive Plan, to find out exactly what the STP means for our local services, to break down the wall of silence surrounding it and to make the public aware of the dangers.

I ask you as my doctor, to do all in your power to oppose these destructive and dangerous plans, in the interests of the health and wellbeing of all of your patients.

Yours Faithfully