

[Reform of the NHS fails again](#) [1]

Written by [Tim Ambler](#) [2] | Wednesday 15 June 2011



?Another reorganisation involving unhappy managers can only worsen the service.? So said a British Medical Journal editorial in 2001. Thanks to the Lib Dems reneging on their own manifesto, the opportunity to streamline the NHS is being thrown away.

Before Andrew Lansley allowed himself to be compromised into a huge and complex Health Bill, the issue was quite simple. The £20bn available from removing unproductive strategic authorities and primary care trusts (PCTs) would be handed to GPs to be spent on patient care. If the GPs thought they needed more managerial support, it would have to come out of their own budgets. The social care part of the PCTs? activities was less well thought out but the same logic could have been followed with local authorities.

The role of government would just be to divvy up the available budget between GP practices, and local authorities. The GPs pay the hospitals and other health suppliers. The main reason, probably, why GPs object is that they, rather than faceless bureaucrats, will have to conduct the rationing process. We know that NHS demand will grow and so will the cost of treatment. Rationing is inevitable and will increase. GPs do not wish to take the blame.

Once the government accepted the arguments for GP practices combining and setting up commissioning bodies, *i.e.* mini-PCTs, involving other interested, but unaccountable, interests and ?Patients? Panels? all the savings were lost. Doctors will again be locked in endless committee meetings when they should be seeing patients.

The PCT managers in my county (Norfolk) are rubbing their hands with glee. The day they receive their redundancy cheques is the day they all start work with the new mini-PCTs. And more managerial jobs will be available, pushing up salaries, than there are today.

Norfolk used to have four PCTs which was considered inefficient and reduced to one. It is hard to see how having tens of mini-PCTs will be any better. And this is where we came in: every £1 spent on bureaucracy is £1 less on patient care.

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