

Time to stop pretending the NHS is any good

More cash is not enough. Instead we should adopt parts of the Singaporean, Swiss and German systems

JAMES BARTHOLOMEW



It is just conceivable that there are a few people – perhaps adamantly possessing no mobile phone, no television and no radio, living in a self-sufficient way with a pig, some chickens and a cow in a remote Welsh valley – who are unaware that the National Health Service is in crisis. Just in case there are any such people still holding out against the news-flow, the Care Quality Commission has issued another report ramming home the point.

The commission put a new slant on it: the NHS, it said, was created at a time when the main afflictions that were treated were polio and tuberculosis, whereas in the modern world, they are obesity, diabetes,

heart disease, cancer and dementia.

Many people believe that the growth of these diseases has vastly increased demands on the NHS. That may well be true, but it is hard to be sure. People used to spend weeks in bed with polio. Consequently there were far more hospital beds – which are hugely expensive – at the outset of the NHS. Yes, its cost has risen, but that could largely be because of huge waste such as the mushrooming of bureaucrats and support staff.

Whatever the truth of that may be, the NHS certainly is not coping with current needs. According to the new report, 1.2 million older people are not getting the care they need; there has been a fall in the number of nursing home beds and more than half of Accident and Emergency departments “require improvement”.

A growing number of A&E departments are not able to see patients within the four-hour target. In fact the ambulances can’t even get the new patients into the hospital in some cases. It seems that 680,000 hours a year are spent by ambulances waiting to hand over patients to A&E.

This is more than just a mistake. This represents failure and human suffering. It is the breakdown of an institutionally bad system. Deep down,

the British people know this. It is just that in the public sphere, particularly among politicians and on the BBC, everyone continues with the pretence that it is a good system which just needs tweaking or more cash.

Last week, I asserted this at a fringe event at the Conservative Party conference. What was striking was that not a single person in the audience argued that the NHS is a great system. Not one of them came out with obviously untrue cliché that it is “the envy of the world”. They were more interested to hear about a better system.

When researching my latest book, I travelled to 11 different countries looking for, among other things, the best healthcare system in the world. At first I thought it might be Switzerland. Then the Netherlands. Then the Organisation for Economic Co-operation and Development told me that the most cost-effective system was in Australia. After all that and more, it became clear that there is no perfect system. But virtually all of them are better at treating patients than the NHS.

People at the event asked me “So what system do you think we should move to?” I would ideally want an analysis to be made of alternative



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systems which is far more detailed than I could manage. But if you wanted a recommendation right now, without further investigation, I would take elements of the Singaporean and the Swiss or German system.

In Singapore, it is compulsory for everyone to contribute a significant percentage of their earnings into their own, individual health savings account. The big advantage of health savings accounts is that people do not waste money on unnecessary treatments. It is their own money they are spending. This helps make the Singaporean system probably the cheapest in the advanced world – far cheaper than the NHS.

The other big element would be insurance, as in Switzerland. This would cover people in case the money in their health savings accounts runs out or to pay for extreme and unusual conditions. If we adopted a system such as this, we could save a lot of money that is currently wasted. We could therefore treat more people and in a more timely way. We could move from having probably the worst healthcare system in the advanced world to having the best.

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D T d. 11.10.17