

LETTERS



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Private companies behave differently from NHS providers

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Appleby states that “if rates of [average?] growth . . . continue over the next 20 years . . . non-NHS providers could account for one in five of all outpatient attendances.”¹ This is a surprising interpretation of the data. If the trend as shown continues, non-NHS providers would account for 20% of the total within five, not 20, years.

Would this matter? It would be interesting to know the health and transactional costs to patients and to the NHS from a recent “unmitigated disaster”: the Nottingham privatisation experiment. After the hospital’s renowned dermatology unit was privatised, emergency, outpatient, and inpatient services were fragmented, and the whole service—together with education, training, and research at the hospital—has collapsed, with considerable disruption and displacement of patients. “Destructive innovation” or just destruction?

Elsewhere, Serco, Circle, Vanguard, Concordia, Carillion, Clinicenta, Harmoni, and BUPA have all undergone early termination of contracts. Five of these cases included seriously substandard levels of care or staffing; death, harm, or threats to patient safety; extremely high rates of surgical complications; or fraudulent behaviour—all since 2012.

Public debate over privatisation has been evaded and obfuscated. The implications and consequences of deregulation and contracting out need to be accounted for: costs, instability, and manipulation of the non-free health (external) market; perverse incentives of private healthcare; commercial secrecy; the major differences between a private contractor providing audiology services or taking over a hospital; influences on medical knowledge, education, training, and research.

Private companies manifestly do not behave the same as NHS providers and the argument that GPs provide “non-NHS” services is spurious. Aside from contractual differences—such as paying their own indemnity insurance and not having a final salary pension scheme—GPs are every bit NHS and always have been.

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Full response at: www.bmj.com/content/350/bmj.h3109/rr-2.

¹ Appleby J. Paid for by the NHS, treated privately. *BMJ* 2015;350:h3109. (10 June.)

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