

## VIEWS &amp; REVIEWS



## NO HOLDS BARRED

# Margaret McCartney: Pity the NHS—Jeremy Hunt has chosen the nuclear option

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Why are junior doctors low in morale? Asking this while imposing the junior doctors' contract is akin to wondering who started the fire as Jeremy Hunt holds a box of matches, an empty can of petrol, and a sign saying, "I did it." Sorry, not a fire: it's "the nuclear option." Why would junior doctors—post-MTAS, in debt, on rotten shifts, and with the Antipodes calling—possibly feel demoralised?

The moral contract between healthcare professionals and patients is the one that matters more. The reason why we have the stress of leaving late, starting early, and fixing problems that "technically" aren't ours is because we work for patients, not the secretary of state. And so, even though it's "not my job," I'll do it—because I know that if I don't, it will get done more slowly or not at all, causing avoidable delay or suffering.

Every professional does this, every day. We do it because we want to do good work, and because we love our work. This vocation is part of our human identity, and it means that when work goes wrong we're upset, and when it goes well we're joyful. For all of the strain and stress and petty bureaucracy, the NHS is a phenomenal achievement conjured up every day by the people who choose to go and make it.

This, however, may stop. Treat people as you would like to be treated: people at work need respect, kindness, and enough

resources. Imposing a new contract will lead to none of these. In many parts of the United Kingdom, junior doctors and consultants have adjusted their working patterns to suit local needs within the current contract: Wales and Scotland have no plans to change.

Junior doctors already work in a 24/7 system. When Hunt spoke in parliament of juniors taking on "bonus" shifts, he seems not to have realised that nights and weekends are not optional. Doctors will leave, many will not return, and we will have fewer staff in an even less safe NHS.

The NHS is being set up to fail. It's easy to see how the proliferating private GP companies will profit while the NHS, starved of essential resources, is told that it's not hitting targets and is punished as a result. It will haemorrhage even more staff who hate their lack of ability to provide good care with the resources (not) available.

The NHS will then have its bones plucked by whatever private companies are watching and biding their time. This is a disaster for everyone that cares about our NHS.

Cite this as: [BMJ 2016;352:i909](#)

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