Sajexit: what Sajid Javid’s tenure as Health Secretary achieved

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Although the change of Secretary of State for Health and Social Care usually feels fairly dramatic to avid watchers of NHS politics, Sajid Javid’s second resignation from Boris Johnson’s government (his first was in February 2020 when he was Chancellor of the Exchequer) over the prime minister’s character and conduct is unquestionably seismic.

This intervention has the potential to contribute heavily to the downfall of Johnson’s administration.

Both Javid and the Chancellor of the Exchequer, Rishi Sunak, published their resignation letters to the PM within 10 minutes of each other, strongly suggesting collusion.

They cited almost identical reasons: Sunak wrote that “the public rightly expect government to be conducted properly, competently and seriously. I recognise this may be my last ministerial job, but I believe these standards are worth fighting for and that is why I am resigning.”

Javid’s phrasing was “I can no longer in good conscience continue serving in this Government. I am instinctively a team player, but the British people also rightly expect integrity from their Government.”

Javid made a personal statement to the Commons today, which enlarged upon his points: “the public expects all of us to maintain honesty and integrity in what we do ... I’m instinctively a team player, and I have been completely focused on governing effectively over the last year. But treading the tightrope between loyalty and integrity has become impossible in recent months. And I will never risk losing my integrity.

“I also believe a team is only as good as its team captain, and that a captain is as good as his or her team. Loyalty must go both ways. The events of recent months have made it increasingly difficult to be in that team.”

At the time of writing, the number of ministerial resignations is increasing regularly.

So is there a Javid legacy in the NHS—and indeed social care?

He seeks to claim one, in both his letter of resignation and Commons statement, claiming “There is so much I had planned for the long-term reform of our health and care systems. It is a wrench to leave that important work behind.”

These might be moving words, were it not for the fact that Javid firmly opposed the one thing that would have made a meaningful difference to medium and long term NHS performance—the mandatory publication of health and care workforce requirements and training trajectories, as proposed by former health secretary Jeremy Hunt in amendments to the Health And Care Act, passed earlier this year. The NHS still has 105 000 vacancies, and early retirements are rising sharply: unresolved issues around the pensions taper tax and annual allowance still financially discourage senior staff from taking on extra lists to clear backlogs.

Javid was also vocal about his plans to “name and shame” NHS organisations which continued to insist on mask-wearing to prevent covid-19 transmission: the current huge upswing in infections stands as quite the reproach to that strategy.

And what we might call “the Sajid strategy” of briefing national media and issuing a press release on one chosen theme of an upcoming report—only for the publication to reveal that the theme in question was not there in any meaningful way—was seen both with the Messenger Review of NHS leadership and the Department of Health and Social Care’s recent digital strategy.

A Department of Health and Social Care 10-year cancer strategy and women’s health strategy have both been delayed by wrangling with the Treasury. Social care has remained the poor relation under Javid, with the recent extra National Insurance tax rise hypothecated for NHS backlog-busting.

This backlog is another huge unresolved issue: though there has been good progress towards eliminating two year waits, other lists (including cancer referral waits) are rising. The ambition/goal/wish to increase elective activity to 110% of pre-pandemic activity is not being met, and Health Service Journal reports that NHS England will now try to renegotiate the national waiting ambitions with the government.

Javid has overall been curiously unengaged with this job. The Health and Care Act 2022 increased his potential to intervene in NHS operational matters, but despite huge scandals in maternity, A&E, and ambulance performance exposed during his tenure, he has not done so. Likewise, the apparent collapse of primary care has continued unchecked.

Perhaps Javid’s only memorable legacy will be a phrase that he parroted, but could not explain: that the NHS is “a Blockbuster service in an age of Netflix.” This is as glib as it is vacant: is it Netflix’s huge drop of subscribers and 35% fall in share price that Javid felt should show the way?

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1 Health Service Journal. NHSE looks to give up on key elective requirement. https://www.hsj.co.uk/finance-and-efficiency/nhse-looks-to-give-up-on-key-elective-requirement/1032745.article