

 **Minutes of the Executive Committee Meeting**

 **Video conference held on Tuesday 10th May 2022 3pm -5pm**

**Participants:** Colin Hutchinson (Chair), Peter Trewby, Malila Noone, Alan Taman, Andrea Franks, Eric Watts, David Zigmond, Morris Bernadt, Helen Fernandez and Pam Zinkin

**1. Apologies:** Maureen O’Leary, Arun Baksi, Alison Hallett and Chris Birt.

**2. Minutes of the EC meeting 21st January 2022:** These were accepted as correct

**3. Matters arising from the minutes**

 ***i) Request for assistance from a member*:** Malila was in contact with Dr Idrees. He agreed to join DAUK and is waiting for a response.

 **4. Treasurer’s Report**

The balance in our feeder account has reduced to £3164 from £8491 in January. This reflects the £1000 donations to KONP, CHPI and the Good Law Project as agreed at the January meeting. In addition, £2600 has been paid to Royal Society of Medicine which is the full payment for the AGM. The payment excludes lunch but includes coffee and tea in the afternoon. Their very expensive AV system is also not included. Alan will organise our own AV system.

Membership is down to 595. We have gained 10 new members (6 trainees) but lost 48 members (8 deaths, 6 had no continued interest in the NHS).

 ***The Peter Fisher Memorial Essay Prize***: This is supported by the editor of the RSM journal as before. It has been widely advertised including the RCP president’s newsletter, postgraduate centres, and London HEE Twitter feed. DAUK and Everydoctor will be approached to publicize it on social media.

The closing date is end July. Volunteers for assessing submissions are invited.

 ***Attracting new members*** : This has been difficult. It is no longer possible to get an address if only a name is provided. Prospective members should be contacted personally.

What else? DAUK time indicates that although many sympathise, commitment to join a group focusing on privatisation and funding was relatively rare, even amongst DAUK members, who in the main were more concerned about T&C’s. How do we reach that minority who would feel motivated enough to consider joining? How do we locate them? How do we then contact them? Direct peer - no longer sufficient. Broad-based Advertising – cost prohibitive and unlikely to yield sufficient return (tried). Crowd funding for a defined project (below) might bring in a few. Tried this for KONP. Social media – our profiles though growing slowly are not that large to reach this sub-group very quickly. But I will turn to that more. Yields are notoriously low. Our core messages often don’t easily lend themselves to trending posts: continuity problem. Trial soc med plus crowd fund for 3 months. Also, research links – how can I develop these with likes of CHPI? Look into expertise of members more.

**5. Communications**

 ***i) Collaboration with DAUK:*** Alan’s collaborative role with DAUK is now well established. It is a younger organisation in terms of demographics and development as a group. They welcome the professional input provided by DFNHS. Still true but reduced in terms of time and DAUK role. Abiding impression is that the group is primarily concerned with T&C’s. Still contacted and friendly. Think this may be true more generally as well. Eg Everydoctor expanded their remit to non-medics openly.

 **ii) *Strategy for the future:***Current issues such as lack of capacity and long waiting lists etc. were problems which existed before the COVID outbreak. A recent article in FT said out of pocket healthcare spending has increased to amounts equivalent to payments in the US.

*Colin’s commented on the H&C Bill:* It is an enabling Bill so whatever the various IC Boards do is legal and cannot be challenged by judicial review. The actual detail of what happens will depend on secondary legislation which does not need to be voted through parliament i.e.no debate, just voted down.

Each system will have its own constitution so the impact will vary across England. The constitution of each should be scrutinised locally as has been agreed in West Yorkshire. How can we facilitate this? Develop member lists? Changes have been made to the standard NHSE constitution but these may however be reversed by Secretary of state.

Conflicts of interests dealt with in a Governance Handbook which has not yet been published.

Functions of PCN care networks and Health & Wellbeing boards are not yet clear.

Contracts will allow staff to be moved across the network. This may affect patient safety and impact on staff retention. The NHS will move further away from a true National service.

The focus of action will have to move to each of each of the individual 42 sites and should include comparisons between sites and sharing of information and strategy.

Richard Douglas former Director General for Finance, Strategy and the NHS at D/H is adviser to Incisive Health which is paid to represent Virgin Care and NHS Partners Network.

The Act does not come into effect until 1st July 2022 but HSJ comments that Javid has already stated that wants to make changes.

KONP have started a petition to improve NHS funding to be circulated. DAUK have circulated a petition about adequate bursary funding for medical students.

 ***ii) The Newsletter:***the next issue is being collated. ‘NHS under Siege’ by Jacky Davis and John Lister is to be published in May and reviewed later. Next issue: Sept. AGM call

**6. The AGM: 1st October 2022**

  ***i) Venue:*** Royal Society of Medicine CALLING NOTICE asap

 ***ii) Suggestions for speakers:***

 -Wes Streeting Shadow Health Secretary **Action: Colin**

-Jackie Davis

-Roy Lilley

-Martin McKee

-Amanda Pritchard CEO NHSE

-Rachael Clarke

-Georgina Halford-Hall Can ask her direct. Proceed? WBUK and the Bill

-Ian Kirkpatrick: ‘The impact of Management Consultants on Public Service Efficiency’

***ii) Themes****:* Workforce plan, staff retention, life expectancy.

Books recommended include ‘Bean Counters: The Triumph of the Accountants and How They Broke Capitalism’. 2018 Richard Brooks and

 ‘Plundering the private sector: How New Labour are Letting Consultants run off with £70 billion of our Money’ 2006: David Craig with Richard Brooks

 **iii) AGM 2023:** A provisional booking will be made in York. **Action Peter Trewby**

**7. Current issues and campaigns**

 ***i) The devolved nations.*** This is an important issue but our approach to this subject has not yet been decided.

 ***ii) NHS disciplinary procedures****.* The document has been finalised. Arun has approached several MPs. He also wrote to Hunt with a view to it being taken up by the Health and Social Care Committee. Malila wrote to her MP Peter Gibson who appears to have misunderstood our proposals and felt the recent GMC review dealt with the problem. This misconception needs to be addressed. Helen and Jenny (DAUK) have agreed on a list of contacts.

***iii) Centralisation of services:*** Eric has written about the problems relating to the current hub and spoke system in pathology. These problems also affect General Practice and mental health services. The private sector dominates inpatient psychiatry because bed numbers have been cut drastically. Between 2010 -2021 numbers dropped from 23,000 to 17,000 (Beds per 1000 population: 42 NHS, 127 Germany, 86 France). Nine out of 10 beds in the private sector are occupied by NHS patients who are affected by the discontinuity of care. The level of service and quality are appalling and patients are needlessly retained to ensure full bed occupancy. In general, where services have been outsourced, detailed costing is not available as this information is deemed to be ‘commercial in confidence’.

***iv) Good Law Project.*** The judicial review of Abingdon Health Covid rapid antibody test £85 million contract was heard on May 3rd. The judgment is awaited.

 **v) *KONP Steering Group meetings*:** These give a good overview of what is happening around the country. Colin could not attend the next meeting as he had an important council meeting. He hoped a volunteer would attend in his place.

 ***vi) Meetings with politicians:*** none reported.

 ***vii) Health and Care Act 2022:*** discussed at 5 ii)

 ***viii) ‘Reform’ of social care:*** The Queens speech had little on this subject. A draft mental health bill and a social security bill to stream line the processes for people claiming benefits are mentioned. All schools are to be taken out of local authority control to become Academies.

 ***ix) Primary care:* *Centene in North Central London*:** the judicial review was dismissed in March paving the way for further takeover. It is a concern that the public does not recognize the threat posed by privatisation. The whole of the anti-privatisation movement appears to have failed to reach the public. This is partly because although passionate about the concept, the public do not think about the NHS unless they are ill and do not believe the will have to pay. It is also difficult to counteract the views of the popular press.

 ***x) Workforce planning, retention of staff, overseas recruitment:*** DAUK is very concerned about the shameful way overseas doctors are treated by the NHS as well as the private sector. Doctors may not be aware of the problems they face before they arrive. CHPI reported on this in 2021. More on this – what can we offer?

***xi) Efficiency, value and affordability of the NHS*.** Affordability is frequently questioned with the suggestion that the NHS is no longer affordable. Demands for a pay increase may reinforce this view. A recent FT article by John Murdoch suggests that reducing access to care in the NHS will push patients to the private sector. The government view is that the private sector does it better. Beyond a certain threshold, pay itself is not a motivating factor compared with increased autonomy, good working conditions etc.

The NHS was previously top rated in the US based Commonwealth Fund’s analysis of healthcare system performance in 11 countries. Our overall position has fallen to fourth place with reduced access to care and equity of care compared with 2017. Health outcomes were also shown to be poor.

***8. Any Other Business:*** *BMA Council elections:* Four DFNHS members were elected: Jacky Davis, Wendy Savage, David Wrigley and Jackie Applebee.