

# Lansley: Could do better, should do better



Debbie Hicks

We are into February and the discussions I hear all around, whether it is in a general meeting or a diabetes specific meeting, the subject remains the same – the NHS is doomed! But how many of us will actually get off our backsides and do anything about it or just choose to sit on the sidelines?

If the media is anything to go by, and often it provides a benchmark of opinion, then a recent poll that was published during mid January by 38 Degrees puts Health Secretary Andrew Lansley at the bottom of the popularity stakes (Figure 1).

The organisation 38 Degrees is formed of a community of UK citizens who act together to create an avalanche for change. They work

together to defend fairness, protect rights, promote peace, preserve the planet and deepen democracy. The organisation is independent of all political parties and is funded by members' donations; it does not accept money from political parties, government or big business.

The YouGov poll of over 1600 NHS staff is the first independent poll on the NHS plans to be conducted across all the medical professions at a range of management levels, including both clinicians and non-clinicians.

The poll results reveal the true extent of professional fears over Lansley's NHS plans. As you can see in Figure 1, the key findings from the poll are staggering and sad. What has happened to our great NHS?

According to the poll, over three-quarters

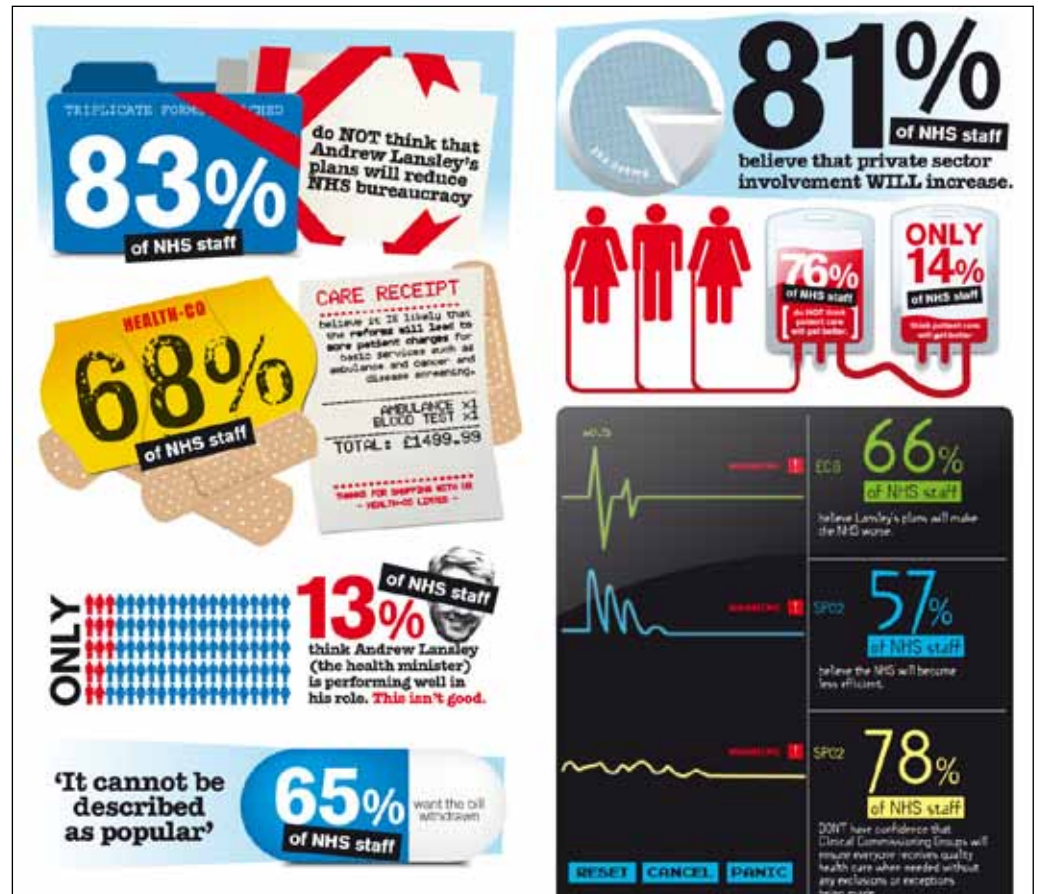


Figure 1. Key results from the 38 Degrees poll of 1600 NHS staff, both clinical and non-clinical.

Debbie Hicks is Nurse Consultant – Diabetes, Enfield Community Services, Barnet, Enfield & Haringey Mental Health Trust, Enfield.

(78%) of NHS professionals think the plans will exclude more people from healthcare, and over half of us (68%) think the plans will lead to people paying for basic services such as ambulances, cancer screening and maternity care.

Sadly, over 70% of healthcare professionals disagree with Lansley's claims that his plans will lead to cost-efficiency and better patient care – which was the whole point of changing the current structure of the NHS.

Why is it that even with all the public dissent that the Health and Social Care Bill continues to stagger towards implementation? The gesture of David Cameron's "listening exercise" last year (Prime Minister's Office, 2011) served only to increase NHS staff frustration.

David Babbs, executive director of 38 Degrees, said: "38 Degrees members have been telling Andrew Lansley to stop ploughing on regardless and to start listening to the concerns of the public and healthcare professionals. Time and again Lansley's tried to claim that the silent majority of NHS staff support him.

This poll shows that's not true."

Dr Helena McKeown a senior GP from Wiltshire said: "This poll shows what anyone who works in the NHS has known for months – Lansley's plans are a disaster for patients; 84% have no confidence that the right balance between competition and collaboration will be struck as Lansley claims, so it's no surprise that only 13% of NHS staff surveyed think he's doing a good job – he's not."

Do you agree? Now is the time for all NHS staff to stand up and speak out. We are advocates for everyone with diabetes, and if we do not raise our voices now, we may well live to regret it if the fundamental principles of our great public health system and universal access to free care are lost to future generations. ■

38 Degrees (2012) YouGov poll: NHS workers. 38 Degrees, London. Available at: <http://bit.ly/w99zH5> (accessed 31.01.12).

Prime Minister's Office (2011) Government launches NHS "listening exercise". Prime Minister's Office, London. Available at: <http://bit.ly/yyfGC9> (accessed 06.02.12)



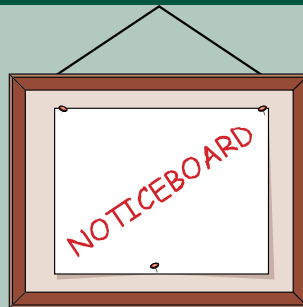
*Maureen Wallymahmed,  
Nurse Consultant,  
Liverpool*

**D**o you ever wonder if other people are doing the same as you and that you might just be re-inventing the wheel?

Now is your chance to find out by using the Noticeboard section in the *Journal of Diabetes Nursing*. As a member of the journal's editorial board, I know that this feature

creates a welcome opportunity for nurses involved in diabetes care to pose a quick question or share a fleeting thought with other healthcare professionals without having to write a whole article or phone round an array of colleagues. Noticeboard is a place for people to share requests, thoughts and ideas. Please send any questions or answers you may have to:

Maureen Wallymahmed, Noticeboard,



SB Communications Group,  
1.03 Enterprise House,  
1-2 Hatfields, London SE1 9PG  
Tel: 020 7627 1510; Fax: 020 7627 1570

Email: [jdn@sbcommunicationsgroup.com](mailto:jdn@sbcommunicationsgroup.com)

### **Band 2 practitioners prompting individuals to administer own insulin**

**Q** We are currently exploring the complexities around Band 3 non-registered practitioners administering insulin. In the meantime, to assist with clinical demands, we are considering Band 2 non-registered practitioners "prompting" individuals to administer their own insulin. Do any DSNs have any experience with working with community staff to facilitate this and any documentation that has assisted them with the process?

*Jill Little, DSN, Western General Hospital, Edinburgh*