

Hunt: Conference speech

Jeremy

Hunt, Secretary of State for Health, speaking today at Conservative Party Conference in Manchester said:

(Check against delivery)

“We have a great team at the Department of Health so let me start by thanking them: the wise Philip Dunne, the savvy Steve Brine, the smart James O’Shaughnessy, the street-smart Jackie Doyle-Price and our perfect PPS’s Jo Churchill and James Cartlidge.

Sometimes something happens that reminds you how lucky we are to have an NHS.

That happened right here in Manchester in May.

When that bomb went off at the Arena, we saw paramedics running into danger, doctors racing to work in the middle of the night, nurses putting their arms round families who couldn’t even recognise the disfigured bodies of their loved ones.

One doctor was actually on the scene picking up his own daughter when the bomb went off. Thankfully he found her – but instead of taking her home he quietly dropped her off with friends and went straight to work at his hospital – without telling colleagues a word about where he’d been.

It was the same heroism after the London attacks too. So let’s start by thanking all those superb NHS staff for being there when our country needed them.

Of course they’re there for us not just in national emergencies but in personal ones too.

When you’re losing a loved one, when you’re sick unexpectedly, when you’re knocked sideways by a mental health crisis – the NHS is there. A National Health Service and a national symbol of British professionalism and British compassion.

But it only exists because of its people. So today I want to recognise that supporting NHS staff is one of our most important priorities.

We need more doctors. So last year I said we'd increase the number of doctors we train by a quarter, one of the biggest ever increases.

We also need more nurses. So today I can tell you we'll increase the number of nurses we train by 25% – that's a permanent increase of more than 5,000 nurse training places every single year. And we'll do that not just by increasing traditional university places, but also by tripling the number of Nursing Associates so people already in the NHS can become a registered nurse after a four year apprenticeship without having to do a traditional full time university course. Derby, Wolverhampton and Coventry Universities have already offered to run apprenticeship nursing courses on hospital and community sites and others will follow, always making sure we maintain the high standards required by the nursing regulator. We'll also launch a new initiative to encourage nurses who have left the profession to come back.

Our NHS is nothing without its nurses: we need your skills, we need your compassion and with today's announcement we are backing the biggest expansion of nurse training in the history of the NHS.

For nurses, as for all of us, pay and conditions matter. I've already said we'll decide next year's pay awards after listening to the independent pay review bodies. But there are other things we can do today.

Nurses look after us – but they also have their own families to look after: kids at school, a mum or dad with dementia, a partner coping with cancer.

If we're to get the best out of them we need to be much better at supporting them with their own caring responsibilities.

They need to be able to work flexibly, do extra hours at short notice, get paid more quickly when they do and make their own choices on pension contributions. So today I'm also announcing that new flexible working arrangements will be offered to all NHS employees during this parliament. And we'll start next year with 12 trusts piloting a new app-based flexible working offer to their staff.

And like many people,
NHS staff can also struggle to find homes near work they can actually afford.
So from now on when NHS land is sold, first refusal on any affordable housing
built will be given to NHS employees benefitting up to 3,000 families.

And there's one more
group who are understandably a bit worried at the moment and that's the
150,000
EU workers in the health and care system. Let me say to them this: you do a
fantastic job, we want you to stay and we're confident you will be able to
stay
with the same rights you have now – so you can continue being a highly valued
part of our NHS and social care family.

I became Health
Secretary five years ago. It's a long time ago – but I'll never forget my
very
first week.

Someone gave me the
original Francis report into Mid Staffs to take home to read. I was
gobsmacked.
How could these terrible things really happen in our NHS?

The Chief Executive of
the NHS told me I'd better get used to the fact in hospitals all over the
world
10% of patients are harmed. Another senior doctor told me there were pockets
of
Mid Staffs-like problems everywhere. And academics told me that 3.6% of all
hospital deaths were probably avoidable – that's 150 deaths every single week
–
causing immense heartache to families as we heard so powerfully from Deb just
now.

People like Deb – and
what a privilege to listen to her this morning – made a choice.

Instead of drawing a
line under their personal tragedies and moving on they chose to dedicate
their
lives to campaigning, reliving their sadness over and over again, just to
make
sure other families wouldn't have to go through what they did.

They also made my mind
up for me: my single ambition as Health Secretary would be to transform our
NHS
into the safest healthcare system in the world where this kind of thing never
happened.

But where on earth do

you start?

The first thing is to be honest about where the problems are. My kids are 3, 5 and 7 and as a Dad I know exactly how good all the local schools are – thanks to Ofsted. We had nothing like that in health – so against a lot of opposition in 2013 we became the first country in the world to introduce the Ofsted system to healthcare, giving independent ratings to every hospital, care home and GP surgery.

The results were, to say the least, a big surprise. Look at this.

14 hospitals got an ‘outstanding.’ We assumed it would be the famous teaching hospitals, but in fact it was often trusts no one had really heard of outside their area. Like Western Sussex, under the inspiring leadership of Marianne Griffiths, which has the best learning culture I have seen anywhere in the NHS. Or in mental health Northumbria Tyne and Wear which I visited on Friday and is blazing a trail on the safety of mental health patients.

Then we asked ourselves a difficult question. Is quality care just something you have to buy? Of course money matters – you need enough nurses on the wards and that costs money. But it turned out to be a more complex relationship.

All Trusts are paid the same NHS tariff. But on average the ‘good’ or ‘outstanding’ trusts were in surplus and the ‘requires improvement’ and ‘inadequate’ ones were in deficit. Why’s that? Because poor care is about the most expensive care you can give. If someone has a fall and stays in hospital an extra week, it’s not just terrible for them it costs us more too.

But our biggest worry was what would happen to the trusts we put into special measures. Would they get trapped in a vicious circle of decline? 35 trusts went into special measures – nearly one in five of all NHS trusts – and so far 20 have come out. What happened?

Take Wexham Park Hospital in Slough. When they went into special measures, the CQC said their care was unsafe, 6 of their 8 clinical areas needed improving and if you asked staff the majority said they would not recommend their own care to a friend or member of their family. Think about that: the staff themselves said their own

hospital's care was not to be trusted.

Two years later under the extraordinary leadership of Sir Andrew Morris and his Frimley team things were transformed: all 8 clinical areas were good or outstanding, more than two thirds of staff started recommending their own care and the Trust became one of only 8 in the country to go straight from special measures to being rated 'Good.'

And we learned perhaps the most important thing I have learned as Health Secretary. The staff in every Trust going into special measures were exactly the same as the staff coming out. In other words it wasn't about the staff, it was all about the leadership.

We also learned that you can't impose quality or safety from above – it has to be part of a culture that comes from the bottom up. And that starts with openness and transparency.

Let me show you that works.

After Mid Staffs we were worried about staffing levels on wards. But rather than a top-down edict telling Trusts to recruit more staff, we did something simpler. We just asked every trust to publish every month the number of nurses employed in each of their wards. What was the impact?

This is the total number of adult nurses employed in the NHS. And you can see in the first two years from 2010 they went down by just under 5,000. Then we introduced ward by ward transparency and what happened? The blue line is the number of nurses Trusts planned to recruit. The green line is what they actually recruited. In other words once we started being transparent about nurse numbers the NHS ended up with 18,000 more nurses than it planned. And the public noticed – inpatient satisfaction over this period rose to record highs.

We also introduced transparency in areas like mental health, our major priority under Theresa May's leadership. We are leading probably the biggest expansion of mental health in Europe right now. But progress across the country has been patchy – so we are using transparency to make sure that wherever you live mental health conditions are always treated as seriously as physical health conditions.

So by shining a light on problems, transparency saves lives. But it also saves money.

Every time someone gets an infection during a hip operation it can cost £100,000 to put right. So under the leadership of Professor Tim Briggs we started collecting data on infection rates across the country. What did Tim find? He found that our best hospitals infect one in 500 patients. But our least good ones it is as many as one in 25 patients.

Putting that right is now saving hundreds of millions of pounds as well as reducing untold human misery. So never let it be said you can't afford safe care – it's unsafe care that breaks the bank.

Now what's been the overall impact of this focus on safety and quality? We all know the pressure the NHS is under. But despite that the proportion of patients being harmed has fallen by 8% and 200 fewer patients harmed every single day.

Staff are happier than ever with the quality of their care and the proportion of the public who agree their NHS care is good is up 13%.

This July an independent American think tank, the Commonwealth Fund, said the NHS was the best – and safest – healthcare system in the world. That's better than America, better than France, better than Germany and most importantly ahead of the Ashes better than Australia.

But – and there is a 'but' – we still have those 150 avoidable deaths every week.

Twice a week somewhere in the NHS we leave a foreign object in someone's body.

Three times a week we operate on the wrong part of someone's body.

Four times a week a claim is made for a baby born brain damaged.

We may be the safest in the world – but what that really means is that healthcare everywhere needs to change.

In America Johns Hopkins University says medical error causes 250,000 deaths a year – the third biggest killer after cancer and heart disease. Conference I want the NHS to blaze a

trail across the world in sorting that out.

So we have big campaigns right now to tackle e-Coli infections, reduce maternity harm, make sure we learn from every avoidable death and most of all keep our patients safe over winter.

But we need to do something else too: and that's get much better at supporting doctors and nurses when they make mistakes. Everyone makes mistakes – but only doctors and nurses have been brave enough to choose a career where the price of those mistakes can sometimes be a tragedy.

And when that happens no one is more devastated, no one keener to learn and improve than those same frontline staff.

But we often make that impossible. They worry about litigation, the GMC, the NMC, the CQC, even being fired by their trust. Unless we support staff to learn from mistakes we just condemn ourselves to repeat them – and that means dismantling the NHS blame culture and replacing it with a learning culture. The world's largest healthcare organisation must become the world's largest learning organisation – and it's my job and my mission to make that happen.

Now next year the NHS has an important birthday. Like Prince Charles and Lulu it will turn 70.

Here are the words of the Health Minister who announced its formation back in 1944. [VIDEO]

Nye Bevan deserves credit for founding the NHS in 1948. But that wasn't him or indeed any Labour minister.

That was the Conservative Health Minister in 1944, Sir Henry Willink, whose white paper announced the setting up of the NHS.

He did it with cross-party support. And for me that's what the NHS should always be: not a political football, not a weapon to win votes but there for all of us with support from all of us.

So conference when Labour question our commitment to the NHS, as they did in Brighton, just tell them that no party has a monopoly on compassion.

It's not a Labour Health Service or a Conservative Health Service but a National Health Service that we built and are building together – as I've said many times.

And the next time they question our record, tell them we've given our NHS more doctors, more nurses and more funding than ever before in its history.

Tell them when they left office the NHS wasn't even rated the best in Europe, let alone best in the world as it has been twice on our watch.

And most of all tell them that if they're really worried about the NHS being destroyed, then there's one thing *they* can do: ditch Corbyn and McDonnell's disastrous economic policies which would bankrupt our economy and bring our NHS to its knees.

Because the economic facts of life are not suspended for the NHS: world-class public services need a world-class economy and to ignore that is not to support our doctors and nurses, it's to betray them.

However unlike Labour we don't make the mistake of saying the challenges facing the NHS are only about money.

If they were, we wouldn't have had Mid Staffs, Morecambe Bay and all those other tragedies that happened during bumper increases in funding.

As Conservatives we know that quality of care matters as much as quantity of money.

So when we battle to improve the safety and quality of care we are making the NHS stronger not weaker.

And we're reinforcing those founding values of the NHS we just heard, namely that every single older person, every single family, every single child in our country matters – and we want all of them to be treated with the same standards of care and compassion that we'd want for our own mum or dad or son or daughter.

That, conference, is why we're backing our NHS to become the safest, highest quality healthcare system in the world and we will deliver the safest, highest quality healthcare system

in the world. Thank you.

ENDS