

More public service for more money

The government since 2019 has not been shy with the cash. Record increases and record sums have gone into the NHS. The output of operations, treatments, medical consultations has not gone up as hoped for with all the extra money.

Of course more money was needed. There needed to be pay rises as inflation picked up. There needed to be extra capacity as the population expanded considerably given a generous policy towards inwards migration and difficulties in stopping illegal arrivals. There also needs to be good management choices about how to spend the extra money. There needs to be good employee relations. Management needs to design achievable workloads and create a favourable environment for productive endeavour.

The 36,000 managers need all to contribute to a better mood and mutual support of staff. All need to be focused on delivering more healthcare. More of the extra money has to buy extra capacity – more beds with staff to look after patients, more GP and nurse consultations, faster tests for diagnosis.

Above all the extensive management and personnel functions need to grade, evaluate and create worthwhile and feasible jobs that people are proud to hold. Too many staff leave, work on short term contract and feel unhappy about their job spec and remuneration. These are the very issues within their large budgets managers need to sort out, given the staff unhappiness on display. Did they put in the right evidence to independent pay review? Can issues be remedied in next years settlement? Did the Pay Review body think enough about the impact of higher inflation on their settlement?