## **HEALTH EMERGENCY No. 43, February 1997**

## Pay will be even more of a lottery for healthworkers Flagship 'taken over' by PFI consor-tia, who will have long-term monopoly contracts for sup-port services Trust sinks private cash project

THE DECISION to scrap a £92 million development plan for St Thomas's Hospital has delivered a potentially fatal blow to the government's floundering "Private Finance Initiative" (PFI).

Introduced in 1993, supposedly to draw private capital into NHS building projects, PFI has had the effect of paralysing almost every major development scheme up and down the country.

So far not a single brick has been laid under any major PFI scheme, and

only one substantial hospital building contract has been agreed under PFI, the ludicrously expensive £193m Norfolk and Norwich Hospital project, which has yet to find a source of funding.

No detailed costings of the Norfolk & Norwich deal have been published, but the contract unveiled in November spans 60 years, and means that throughout that period the consortium of John Laing Construction and General Healthcare Group will own and run the hospital for profit, employing all non-clinical staff, and enjoying a monopoly position as a provider of support serv-

ices. However the collapse of the St Thomas's project has underlined the enormous overhead costs that

will inevitably be passed on to the Trusts involved in PFI schemes.

The building of a new women's and children's hospital at St Thomas's and extensive backlog maintenance by the consortium of Tarmac and United Medical Enterprises, would also have been tied in with a £20m a year contract for support services.

The total costs of such a deal were so enormous that even the flagship Guy's-St Thomas's Trust, with a total income of £256m a year, was forced to conclude it was too expensive to proceed, and that a publicly-funded option would represent much better value for money. But even going through the process of inviting and assessing PFI bids cost the Trust over £500,000.

This fiasco could soon



at East London's Royal Hospitals Trust, where a crazy PFI scheme for a £310m 'white elephant' hospital on the Whitechapel site was announced to a fanfare of publicity in October.

The Royal Hospitals plan would produce some of the most expensive hospital beds ever built in Britain, with a capital cost of £250,000 per bed, while reducing the number of acute beds available for local patients. So expensive would the scheme be that it is most unlikely that the local health authority would be able to send patients there for routine treatment, making it the NHS equivalent of Canary Wharf. This raises the possibility that the full business case could be rejected by the Trust itself or by the Treasury, which is supposed to check that PFI schemes represent 'value for money' Doubts over the future

## **PFI: the chaos** continues

Princess Margaret Hospital to Tarmac

Servicemaster, who

are supposed to run

Local bus chiefs

have also warned they

nomic to run services

**Roberts has admitted** 

that the PFI scheme

will carry "a higher

TWO bidders for a

contemplating desperate

the government should try

to kick-start the PFI proc-

ess by giving cash hand-

outs to some of the Trusts

who are getting cold feet

sidering offering written

assurances to bankers in-

volved in PFI projects that

The DoH is even con-

The latest idea is that

long term revenue

£200m hospital

And Trust boss Dave

the new hospital.

will not find it eco-

to the new hospital

site.

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action.

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MR DORRELI DON'T TURN NATIONAL HEALTH PAY

THE NONSENSE of PFI is well illustrated by the deci-sion of West Kent **Health Authority** to back a £100m **PFI** scheme to build a new hospital for Dartford and Gravesham, despite an £8m overspend this year and a potential shortfall of £17m over the next five years. An £80m scheme was thrown out by the **Department of** Health three years ago.

IN SWINDON, the long-running saga of a £90m PFI project to build a new general hospital opened a new chapter of delays with the decision to postpone the transfer

creased a few weeks later when Trust boss Gerry Green abruptly announced he was leaving, to work in the private sector.

The entire PFI scheme is now becoming so discredited, with h ever-increasing numbers of NHS managers admitting that PFI is a more expensive way to finance new buildscheme in Edinburgh were forced to re-tender after their first prices were 50% higher than the health authority could afford, with charges of up to £60m a year.

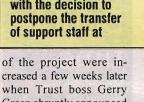
**REFERRING** to the PFI as an alternative source of investment for the NHS, Chancellor Kenneth Clarke slashed another £200m from the NHS capital budget for 1997-8, hard on the heels of the previous year's 16% cut, despite a massive £2.4 billion backlog of NHS maintenance.

PFI projects total-ling over £800 million for London alone are currently stuck in the growing log-jam of the failed scheme.

derwrite any liabilities should a Trust default on a deal.

This is just the latest shift of the goalposts as the government struggles to sell a scheme that could massively increase the overhead running costs of Trusts for decades to come, leaving the taxpayer to foot the bill as companies coin in profits

## be followed by problems



d health unions across the country

AFFILIATE NOW to Health Emergency. The basic fee is still only £15 (basic) or £25 for organisations with over 500 members. Affiliates get regular bun-dles of Health Emergency, plus mailings, plus discounts on LHE publications and on any research work or publicity work you might require from us.

DI FAOF WELL

Happy ending: UNISON housekeepers working for West Suffolk Trust won a

speedy victory over private cleaning contractors Trident's attempts to cut wages.

ONCE AGAIN Health Emergency is at the forefront of the fight against cuts.

We were the first to reject the now discredited King's Fund-Bottomley-Dor-

rell theory that GP services can replace axed hospital beds. We are now step-

ping up the light London-wide, and looking for closer links with campaigns

closures and the half-baked theories on which government policies are

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over the cost.

Now you can beam us up! goes on

**London Health Emergency has** opened up a new web page on the Internet!

At present the site carries samples of LHE's press releases, reports, a list of publications available, details of subscriptions, and a brief history of LHE since its formation in 1983.

It is hoped that the page will soon be more regularly updated, offering a full back catalogue of press releases and

contacts with useful local campaigns. LHE can also be contacted by e-mail. The web page can be found at http://www.jingo.com/healthemergency/

Our e-mail address is emerg@health.win-uk.net Don't forget you can also Fax us in the old-fashioned way on 0181-960-8636, or even telephone on 0181-960-8002.

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