

The Conservatives have been in power since 2010. Having initially formed a coalition with the Liberal Democrats, this centre-right party won a majority in the House of Commons in 2015. Under their leadership, the NHS has suffered significant budget cuts in areas such as cancer care, sexual health services and social care in the community. However, during the build-up to the most recent election the Conservatives laid out grand investment plans for the future of the NHS. These included promises to build new hospitals and bring in extra frontline care staff. Yet, when these figures are put into context against the cuts to the service, these investment plans appear relatively minor.

The Conservative government has been challenged regarding how it intends to operate the NHS and address the significant difficulties that the service faces, including the retention and recruitment of frontline clinical staff. For example, 'nurses' became a buzzword in the recent election campaign, partly because of Prime Minister Boris Johnson's pledge to recruit 50000 'more' nurses for the NHS. Mr Johnson later clarified this by stating that the actual number of new recruits would be 31000, while the remaining 19 000 would be pre-existing NHS nurses whom the government would work to retain. However, how the government intends to provide the 6000 additional GPs and other primary care professionals required to deliver the promised 50 million GP appointments was not addressed.

Even if the government does achieve this pledge, the NHS currently has 43 000 unfilled nursing vacancies despite numbers of nurses and midwives being at an all-time high. It can be argued that the government has not yet set out any concrete plans detailing how it will encourage nurses to stay in, join or rejoin the profession. Among individuals who leave nursing, one third cite the excessive pressure, leading to stress and/or poor mental health, as their reason. Given the cuts across the sector, the government seems only to add to the burden already weighing on the shoulders of healthcare professionals. Plans have been made to address staff retention by providing funding for professional training to improve staff morale, although how this will be achieved with current staff shortages remains unclear. Nevertheless, this does suggest that the Conservative government is at least listening.

In 2016 funding for nursing and midwifery student bursaries were also cut, resulting in students facing fees of £9000 a year. At the time, the government argued that this would lift restrictions on the number of places that universities could offer. However, the actual result was a decline in the number of applicants, with some courses ceasing to run because of poor intake. The Conservatives seem to be standing by this policy, although the recent Queen's speech did claim that all student nurses starting their studies in September 2020 will be given a non-repayable £5000 annual grant as an incentive. Additional grants of £3000 have also been promised for trainee nurses in clinical areas where there are current shortages, such as mental health.

The relationship between the government and healthcare workers is fraught. The former Health Secretary, Jeremy Hunt, drew up plans to reform the contracts of junior doctors, yet was unwilling to sit down with medical union representatives and listen to their reservations. This saw doctors walk out four times in 2016 over concerns regarding how the proposed working conditions would affect patient safety and care. More recently, the Conservatives have failed on several occasions to reassure European Union citizens about their rights to live and work in the UK once the divorce with the EU is finalised. As a result, the number of EU

doctors and nurses working in the NHS has fallen. The amount of EU healthcare professionals leaving the NHS has been increasing since 2012, jumping up by 14% in 2017 (among those whose nationality was known). Meanwhile, the number of EU nurses immigrating to the UK has fallen by 91% since the 2015 referendum. With the current Prime Minister's anti-immigration and 'hard Brexit' rhetoric, it is likely that this trend will continue.

The notion that the Conservative government will solve the NHS crisis is difficult to believe. They present themselves as investing funds into the health service but do not acknowledge the catastrophic effects of funding cuts that were green-lit by them. Their pledge of £34 billion per year for health services falls short of the 4% spending increase needed to address waiting times and the under-provision of much needed mental health services.

However, the Conservatives have pledged an extra £83 million a year towards dementia research. This includes plans to bring in appropriately trained health professionals from overseas on NHS visas to fill the staffing gap more quickly, as it takes around 10 years to train a GP and 4 years to train a nurse. The party also wants to provide quicker access to medicines for cancer and other diseases, which could come at a greater cost. There are thus two choices before the UK. One involves a radical reshaping of the British economy in order to take advantage of the freedom to strike trade deals, which would involve US participation in the NHS. The other option is a long-term and permanent reduction in British economic performance. In the authors' view, the latter seems more likely, as the political costs of a radical approach will always be too high for any government to stomach.

The end of the NHS in England as we have known and understood it is underway. However, a note of caution must be added: this will not happen with a straightforward announcement. Instead, policies and trade deals designed to make the NHS more market friendly and more efficient will be gradually introduced. Thus, the vital question is: can comprehensive, universally accessible treatment based on need and free at the point of delivery be maintained?