

Book review

Mandelstam, M. 2007: *Betraying the NHS: health abandoned*. London: Jessica Kingsley Publishers, 317 pp. £14.99. ISBN: 1843104822.

What a lively and interesting read! This book sets out a wide range of national policies within an empirical framework and lucidly explains the effects of national strategies on communities throughout England. Suffolk, the hometown of Mandelstam, is used to graphically illustrate how policies have affected services offered to the local communities, particularly the elderly and other vulnerable groups.

The 21-Chapter book takes the reader through a horticultural landscape of the condition of the health service, commencing with an overview of changes within the NHS since the election of New Labour administration in 1997, after 18 years of being in opposition. Policies are detailed up to 2006 and provide an up-to-date picture of the current position of the NHS. Many examples are cited, some of which have made headline news in the English national media.

The book allows the reader to dip in and out of interested sections without losing a sense of direction. It provides excellent discussion and explanation about specific targets, statistics and performance indicators. It provides different perspectives on how the location of the patient in Accident and Emergency departments is important to avoid breaching the government imposed 4 h limit that patients should wait. This obsession with targets has had adverse effects: for example, it led to hospitals ignoring infection control advice, which resulted in outbreaks of *Clostridium difficile* resulting in deaths of patients and infection of hundreds of others. The Healthcare Commission has even observed the potential conflict for NHS trusts between government targets and infection control advice. Statistics and performance indicators can be massaged to present a positive picture. The government in turn can choose which targets it selects to present to the public depending on whether they want to sow the seeds of blame or to

uphold the view that they are reliable indicators of improvement in service.

Discussion is also provided on the introduction of how market forces in the NHS has led to services being subjected to tests of business viability, which tend to reduce patients to units that can be measured and processed on the basis of contestability and competition.

Mandelstam explains that central government relies on the fact that legally, NHS provision of services can rarely be enforced by individual patients – particularly if the reason for non-provision is financial. This is because English courts seldom find against the NHS; when it does so, it is on the grounds of procedure rather than outcome of the decision. He outlines in graphic details the confusion in the NHS at government, regional and local levels between logic, long-term planning, patient care and short-term financial savings driven by targets. Throughout the book his assertions are supported by examples taken countrywide. The result of this is to expose how seriously flawed and damaging decisions have affected patients, particularly the elderly and other vulnerable people.

Partnership working or ‘joint working’ between health and social services is eloquently described. Whilst the concept of close working between hospital trusts, primary care trusts and local authorities is to be commended, Mandelstam paints a vivid picture of some of the adverse effects for patients of this type of working when both sides cannot agree on who should provide the service. Such robust arguments occur because the organizations have to balance their books at the end of the financial year otherwise ‘Turnaround teams’ are dispatched to sort out the problem. The implication is a move away from patient care to financial imperatives. Mandelstam claims that people with learning disabilities and with mental health problems have had their facilities/service terminated without due process of consultation, irrespective of the conflict this provoked between the community and the local primary care trusts.

The book brings up-to-date discussions on intermediate and continuing care, community hospitals,

hospital closures and financial recovery plans. Overall, it provides a solid account of issues facing the NHS and describes these in an easy-to-understand way. The accounts given of Suffolk are mirrored across the country. Anyone familiar with the NHS will readily identify in their own local health economy some of the issues highlighted in this book. Those not familiar with the NHS (and with horticultural procedures) will glean a contextualized understanding of the impact government policies have had on communities. I am sure that readers of this

book will gain an appreciable insight into the workings of health policies upon people.

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