

Time for a radical rethink on our NHS

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It's time to think again about how we use and run our precious NHS – that is our message today, as we launch a week-long examination of the National Health Service. Envied around the world, the NHS is manned by the most professional, caring and dedicated staff who give their all for their patients.

But admiration for them cannot mask the fact that their jobs are becoming harder and their frustrations greater as resources are stretched tighter – and patients are being let down.

Health professionals want to help people but get bogged down with bureaucracy, administration and clipboards.

Our NHS is creaking through increasing demand, an ageing population, and ever more costly treatments and drugs.

These challenges are made all the harder because of the stringent targets that have to be met within tight budgets.

If a radical rethink does not happen, our NHS will sleepwalk into a crisis.

Ambulances queuing outside hospitals, patients being sent to the other side of the country for mental health care, hospitals on black alert and being forced to cancel planned operations are all scenarios being experienced with increasing regularity.

Our week-long look at the state of our health service starts today and shows that our hospitals have seen a huge rise in patient demand, leading to fears we are at a tipping point.

The number of accident and emergency patients has risen by 9pc in four years, and bed-blockers have nearly doubled.

This week we will also be looking at how GPs are retiring in droves and practices across the country are struggling to recruit replacements, making it harder for patients to see their overstretched family doctors.

The latest figures also raise fears the ambulance service is back to square one, with response times falling to new lows.

And an exclusive new report will reveal that mental health staff concerns are still high and fewer than one in four would recommend their



■ The National Health Service is one of our most loved institutions. But the system is facing increasing challenges.

Picture: PA PHOTO/THINKSTOCKPHOTOS

own service to family or friends for treatment or as a place to work. We can also reveal Norfolk's hospital trusts are set to rack up a combined deficit of nearly £30m this financial year.

Questions have been raised about whether the current way health is managed, through clinical commissioning groups (CCGs), is fit for purpose.

Following the most recent reorganisation, which replaced primary care trusts with CCGs, staff would certainly not want to see another costly restructuring.

But some fundamental changes need to be made, as the current model of financing and care is not sustainable, unless we continue to plough vast sums of money into the NHS at a

time when we are still trying to balance this country's books. When the National Health Service was first established in 1948, it was a shining beacon of hope for large swathes of the British population who could scarcely afford to look after their own health.

It is still respected and envied around the world, but it has become a very different NHS to the one that Aneurin Bevan envisaged.

Even those who set up the NHS were forced to concede after just a few years that spending on the health service was exceeding expectations.

This led, in 1952, to the introduction of a charge for prescriptions and for dental treatment – the only exceptions to the

NHS being free at the point of use.

If the NHS's founding fathers were able to have a fundamental rethink after just a few years, then it is surely about time we had another rethink more than 60 years later.

The creation of the NHS had cross-party support. What is needed now is for our parties to come together once again to decide on a long-term future for our health service.

It remains to be seen if party politics can be put aside and if this can be achieved, particularly when the NHS has become a key election campaign issue.

But we owe it to both staff and patients to sit down and come up with a long-term plan to ensure that the NHS is still here to care for our children's children.

Author enjoyed Norfolk but that doesn't make him an expert on the dialect

Many EDP readers are familiar with the Boy John Letters sent to this newspaper, in Norfolk dialect, by Sidney Grapes in the 1940s and 50s. I've written before that these letters are works of "not a little genius". Grapes was, by common local consent, a superb writer of our dialect.

Sadly, this opinion isn't shared by Dr Graeme Davis of Buckingham University, who published a paper claiming that "while the dialect can be glimpsed" in the letters, they are "not an accurate reflection of the dialect of that time or any time".

Dr Davis prefers, as an authority on 1930s Norfolk dialect, that well-known northerner Arthur Ransome – based on Norfolk dialogues from Ransome's unfinished novel *Coots in the North*. Dr Davis has done us a real service by publishing these dialogues.

But he argues that local people like Sidney Grapes and the Kippers are "unreliable", while Ransome's dialogues are an "extensive and reliable source for 1930s Norfolk, perhaps the best single source now available".

Peter Trudgill



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Here in Norfolk, where we actually speak the dialect, we strongly disagree. Ransome was a remarkable man, and many people love his novels. It's clear that he enjoyed Norfolk. But that doesn't make him an expert on our dialect. Grapes, on the other hand, was a native speaker and knew exactly what Norfolk people did and didn't say.

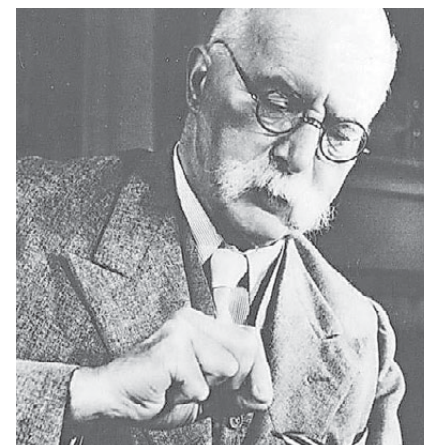
The education editor of *The Times* contacted me, through Fond (*The Friends of Norfolk Dialect*), for my views on Davis's paper.

After reading the dialogues, I replied that he could quote me as saying I saw no reason to change the view I formed when I read *Coot Club* at the age of 10 – that Ransome's representation of our dialect is rather poor, especially when it comes to grammar. A *Times* leader on January 4 then chided me for this, arguing that Ransome was entitled to write down what he heard, as he wished.

But there is so much in the dialogues he cannot possibly have heard. "Geewhillikins"? (Really?! The OED says that's American.) "He don't know what that be"? (That's West Country.) "Shurrup"? (Surely that's Coronation Street?) "Whiles he come back"? (Scots.) "Ain't"? (Cockney.) "It don't matter" rather than "that doon't matters"?

It's bad enough when the BBC uses *Mummerzet* to represent our dialect.

But when inaccurate written misrepresentations are defended on the grounds that famous authors know more about our dialect than we do, then we can see that Fond has much work still to do!



■ Northerner Arthur Ransome's opinions on the Norfolk dialect are at odds with those in the county.