JANE BATES

Telling patients the cost of their care is immoral

My friend, who is an occupational therapist, is dismayed about the lack of joined-up thinking where NHS provision and social care are concerned.

She is familiar with bed-blocking and its effects. She also knows how demanding some patients can be, while others in greater need do not receive their due.

‘Maybe what should be done is to wise patients up about the real cost of their treatment,’ she said.

I am not sure about this. To present each patient with a bill could make some people angry (what do we pay our taxes for?); some anxious (I’ve had a hip replacement and have diabetes, so does that mean I’ve used my quota?); while others would feel guilty about ‘bothering the doctor’.

For most patients – the frailest and most dependent who swallow up a large chunk of the NHS budget – it would be immoral to provide them with such information.

And who would present patients with this unwelcome data? Nurses, of course, who have more than enough to do without getting into arguments, even civilised discussions, about NHS funding.

By all means educate the public about the cost of a healthcare system such as ours, free at the point of delivery. But making it personal? This is a step too far.

Jane Bates is an ophthalmic nurse in Hampshire

Hospitals are full and staff are exhausted. Sending Jeremy Hunt to fix this by scrapping the four-hour A&E target is akin to an incompetent mechanic tinkering under a car bonnet when the wheels are falling off.

Only adequate funding and a comprehensive approach will fix our NHS. This means looking at health care in its entirety, not just A&E. We need a government that values people’s health.

Liz Charalambous is a staff nurse in Nottingham

Higher demand for healthcare services are to be expected with people living longer, and winter pressures have put emergency departments under significant strain. But one of the main reasons many hospitals fail to meet the four-hour target is a shortage of beds.

The target should be maintained as a performance indicator, but issues around bed shortages need to be addressed urgently.

Edwin Chamanga is a tissue viability service lead in London

 Readers’ panel members give their views in a personal capacity only