

## Health and Social Care Budgets

Sarah Wollaston Chair, Health Committee

It is a pleasure to follow Meg Hillier. I pay tribute to all the Select Committees and their members for the work that they done and to all those outside this House who made the compelling case that led to the announcements in the Budget. I say to the Minister that I unequivocally welcome those announcements, and I thank the Government for listening to the case that was made, not only about social care but about capital.

However, I would nuance some of that, because the point about social care is that we must not consider it "job done". The Â£2 billion over the next three years is very welcome—it is also welcome that it has been profiled to address the back-loading of the previous settlement. However, I would like the Minister to say how we will ensure that it gets to the frontline and is distributed fairly according to need, and also that that reflects the different abilities of councils to raise their own money through the social care precept, because that is important for public confidence about how the money is spent.

I also welcome the announcements on capital—the Â£325 million for the sustainability and transformation plans that are ahead of time is very welcome. I look forward to the announcements in the autumn Budget about further money, although the Minister will know that Â£1.2 billion has been transferred to revenue from capital. That is an ongoing issue that is hampering the ability of areas to put effective plans in place. Will he touch on that and say how quickly he thinks we will get to a position where we do not see these capital-to-revenue transfers as being necessary?

Another welcome announcement was about the capital improvements available to accident and emergency departments, although I would caution that this is being linked to putting general practitioners alongside casualty departments through co-location. This is not only about funding; it is about having a general practice workforce that can fund these co-located departments alongside out-of-hours departments and providing routine surgeries on Sundays. I am afraid that we simply do not have the workforce to sustain that activity. I know that there is a commitment to increase the workforce in primary care, but that is alongside a significant retirement bulge in primary care. Something will have to give. As things stand, I simply do not feel that we have the workforce to do that work.

Finally on the Budget, there was a very welcome announcement of a review and a Green Paper in the autumn, which we all look forward to. However, I call on the Government to stop and take stock, because next year will be the 70th birthday of the NHS, and it will come at a time when it is under unprecedented financial pressure. Over the last Parliament we saw a 1.1% annual uplift, against the background of uplifts of around 3.8% traditionally since the late '70s. This is a sustained financial squeeze, at the same time as an extraordinary demographic change and an increase in demand across the whole service. As welcome as the announcements were last week, I am afraid that they do not go far enough to address the scale of the generational challenge that we face. It is of course very welcome that more people are living longer, but that is happening alongside a shrinking base of our working

population who are able to fund that demand.

We simply cannot carry on as we are. If the review focuses simply on social care, we will miss an extraordinary opportunity to address the issue in time for the 70th anniversary of the NHS. I would therefore ask the Minister to go back to colleagues and say, "Can we widen this Green Paper to take in health and social care, and can we try to do that on a consensual, cross-party basis?", as has been said by many across the House. Notwithstanding the issues about that in the past, the scale of the challenge is so great that we owe it to all our constituents to put that aside and to take nothing off the table in considering the scale of the challenge and the solutions ahead.

We have an opportunity to explain that to the public, because whenever I address public meetings and I ask people whether they would be prepared to pay more to fund our health and social care adequately, I find that the response is almost unanimous. People are ready for this. They understand the pressures, and they value health and social care immensely. That would be my big ask of the Minister: think again, widen the review, make it consensual and explain it to the public. Let us get the consent and move forward.

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