ANDREW MARR:
Now then David Cameron said you could sum up his priority for government in three letters: NHS. At a time of unprecedented austerity, the health service budget has been protected and yet the demands on the system and the expectations of patients keep rising. Big decisions lie ahead. Should health continue to be favoured at the expense of other departments? Or if we value the NHS so much - and it’s been called a national religion – should we be prepared to pay more for it through taxes or charges or perhaps to see the GP? Well the Health Secretary Jeremy Hunt is with me now.

JEREMY HUNT:
Good morning, Andrew.

ANDREW MARR:
I have great ambitions for this interview, Mr Hunt. I am hoping that we don’t have to have one of these interviews where I say the health service is terrible and you say no, it’s absolutely wonderful, and we don’t really meet – you know like ships not meeting in the night.
JEREMY HUNT:
Well I think the truth is actually, you know it’s got both. I mean there are some really fantastic things in the NHS and there are some very profound problems, and I think my job is to lead the NHS to tackling those problems. And you know indeed money is one of those big ones, which is I’m sure one of the things you want to ask me about.

ANDREW MARR:
Absolutely. All the way through its history, right from the beginning, it’s enjoyed way above inflation real terms increases year after year after year, and in the last few years you have in effect frozen the increases, so it’s been doing with less money. Now the roof hasn’t fallen in, but there are lots of cracks in the system, and my big question really is can this go on? For how long can we carry on with an NHS? We’ve got a rising, an ageing population, more and more expensive drugs and treatments coming in. It can’t go on like this, can it?

JEREMY HUNT:
Well I think it’s worth saying at the outset that one of the reasons that the roof hasn’t fallen in is because of the incredible hard work of people on the NHS frontline. And people predicted a winter crisis and we didn’t have one; the NHS is doing more operations every year than it’s ever done in its history, and that is really because people in hospitals and GP surgeries and many other places are working very, very hard. But you’re right - money is very, very tight. And although the Budget was protected - and we were only able to protect that Budget because we took some very difficult decisions on the economy, we’re following a plan on the economy which means that we’re able to continue and actually slightly increase the NHS budget – but even despite that, we’re having to take very difficult decisions because of the ageing population …

ANDREW MARR:
Exactly.

JEREMY HUNT:
… demand growing around 3 to 4 per cent every year, and that’s why it’s necessary to have painful and difficult reforms.
ANDREW MARR:
I’m going to come onto those in a moment, but one of the big issues is of course therefore social care and we have a completely broken backed system. We’ve got one set of people, mostly from local government, looking after social care and yourself and the NHS looking after healthcare, and yet the two things are now bleeding into each other, there’s huge issues. Isn’t your Labour opposite absolutely right that actually those two things have to be brought together under a single umbrella?

JEREMY HUNT:
He is right. The only thing is that he didn’t do it when he was in power and we are actually doing it. We’ve announced a £4 billion merger of the health and social care system. But just moving away from the party politics for a moment. The big reform that we need in the NHS if it’s going to be sustainable in coming years is to transform out of hospital care because the NHS model – and I think you actually saw this when you had your stroke as well …

ANDREW MARR:
I did.

JEREMY HUNT:
I remember seeing … I don’t know if we’re allowed to talk about Jonathan Ross on the BBC, but …

ANDREW MARR:
We are allowed to talk about Jonathan Ross, yes.

JEREMY HUNT:
… but I remember seeing a very moving interview that you gave to him when you talked about how fantastic your hospital care was …

ANDREW MARR:
Yes.
JEREMY HUNT:
… but actually how disappointing …

ANDREW MARR:
It’s a money issue, I have to say. What we need is lots and lots of neuro-physiotherapy outside the system. But someone has to pay for these, so it does come back, I’m afraid, to money, doesn’t it?

JEREMY HUNT:
Well it does, but it’s also a false economy not to invest …

ANDREW MARR:
Absolutely.

JEREMY HUNT:
... in out of hospital care because if we don’t help to keep people healthy and happy while they’re at home, they’re going to end up in hospital and that’s going to cost us even more money. And so that’s why one of the things that I’ve said is that when you have people with long-term conditions, chronic conditions, people recovering from strokes, a quarter of the population now has a long-term condition like asthma or rheumatism or dementia …

ANDREW MARR:
And in lots of parts of the country, the social care system’s pretty close to collapse. I mean you talked just now about a merger of the systems. Isn’t what you’ve done actually taken money from the NHS to help plug the gap in social care? I’m talking about something much more radical where the social care and the NHS should be run centrally together.

JEREMY HUNT:
Well we actually are doing that because we’ve said as a condition of accessing this money, you do have to merge your systems at a local level, and actually we’ve had some very, very ambitious plans coming forward. But I think there are some basic things that the public want to know are going to happen. One of them is that you
know if you have a mum or a grand-dad who is not well living at home, perhaps on their own, but with one or two long-term conditions, I think you want to know that there’s someone in the NHS where the buck stops, someone who’s taking responsibility for that person. And that’s why I think at the heart of the changes that I’d like to see is a transformation in the role of GPs, so that we re…

ANDREW MARR:
(over) They take authority as it were?

JEREMY HUNT:
Yes … so that we rediscover the role of traditional family doctors, but using the benefits of modern technology, and we move from a model of essentially reactive care where GPs see people who come through their surgery doors to a proactive model where GPs are actually saying, “Well Mrs Jones came home from hospital this morning. I wonder how she’s doing?” And that’s … that’s a big change.

ANDREW MARR:
This makes all kinds of sense, but it does come at a time when the Head of the Royal College of GPs has said that the system is “under severe threat of extinction”.

JEREMY HUNT:
Well she used some quite strong language, but subsequent to that she’s strongly welcomed our plans that we’ve announced to train an extra 5,000 GPs because part of this is actually getting capacity in the system. GPs do work very hard.

ANDREW MARR:
Right. I’m sorry, this is a pilot project isn’t it?

JEREMY HUNT:
No. We have a pilot project which is actually …

ANDREW MARR:
Different.
JEREMY HUNT:
… a thousand of the eight thousand surgeries, so it’s quite a large chunk of surgeries and they’re experimenting with what you can do with longer opening hours and new technology. But completely separate to that, we’ve announced for all GPs from this April that everyone aged 75 and over has to have a named GP. That was abolished by the last government in 2004, I think. That’s widely recognised to have been a big mistake and we need to go back to having that personal relationship between doctors and their patients and that sense of responsibility, which is I think what makes many people want to become GPs.

ANDREW MARR:
So why do you think she was exaggerating? What was she reporting back that was wrong?

JEREMY HUNT:
Well what she was saying, I think, was that GPs are under a huge amount of pressure, and she’s absolutely right. And you know we’re not going to succeed by asking GPs to work longer hours. They work very long days. We need to look at the systems and we need to look at whether there are smarter ways of doing these things, and I think one of them is restoring that sense of responsibility. I’ve got rid of 40 per cent of the targets that GPs have to deal with every day and I’ve basically done a deal. I’ve said in exchange for getting rid of those targets, can we go back to this personal responsibility starting with the most vulnerable older patients who are the most critical people?

ANDREW MARR:
On the pilot scheme I was mentioning earlier on, I think you spent about £50 million and so forth and it’s just for one year. Is that going to be extended across the country?

JEREMY HUNT:
Well we need to see if it works. I mean the reason for that pilot scheme is to see whether by using modern technology – so for example by allowing people to contact their GP by email – does that actually save work for the GPs or does it create extra
work? And we want to learn those things. And I’m not a doctor, so I’m not going to
persuade doctors by telling them. What they want to look at is the evidence and these
pilots will give us that evidence.

ANDREW MARR:
Another very emotive area, which has come up again this week, is the expensive
drugs. We’ve had a very expensive cancer drug, Kadcyla, which NICE have said
cannot be used routinely. I know you can apply to a fund for it, but there’s been a lot
of fuss about that. Are we now at the stage where there are potentially life extending,
if not life-saving technologies, which are simply too expensive for the NHS to use on
a regular basis? And how do you make those kind of decisions?

JEREMY HUNT:
Well they’re impossible decisions and your heart goes out to anyone you know who
has breast cancer and for whom this is an absolutely critical, very very precious final
few months of their lives and anyone would want that for themselves or their family.

ANDREW MARR:
Of course.

JEREMY HUNT:
And that’s why we decide it by independent scientists at arm’s length from
government. But we do have the Cancer Drugs Fund, which I mean, if I may say, you
know that’s helped 44,000 people. It was set up by David Cameron. It’s been a big
success. But the truth is that no health care system anywhere in the world can afford
to have an open chequebook for every single new drug and so if we’re going to be
able to carry on affording new drugs we have to ask ourselves do we spend the £100
billion annual budget of the NHS wisely. And you know what doctors and nurses tell
me is that we spend too much on top-heavy management – and that’s why we got rid
of the strategic health authorities and the primary care trusts – and also that you know
hospitals pay too much for some of the basic products and services. That drives them
mad. And so today we’re announcing a big new scheme to improve NHS procurement
– a central list that we can use the bulk-buying power the NHS has. But sorry, yes …
ANDREW MARR:
I was going to say this conversation has not surprisingly been dominated by money and I come back to the big question. With this ageing population, all these new expensive treatments, all this pressure on the NHS, something has to give. Either the NHS has to do less or we have to find new ways of funding it, and I just wonder what you think about looking ahead? After the next election any health secretary, whether Conservative or Labour or something else, will have to take some very tough, radical decisions, and I wonder if we can talk a little bit about those – whether they might involve, for instance, I think on the left there’s been an idea of putting another 1 per cent on national insurance as a National Health Service tax? Or whether there’s going to be charges for things? You know wealthy, middle class people – should they not be charged for food in hotel accommodation as it were in hospital? Those sort of big tough decisions are lying ahead, aren’t they?

JEREMY HUNT:
Well I’d say two things. I mean, first of all, the basic principles which the NHS stands for are non-negotiable. We want a service that’s free at the point of use, that is there for rich or poor, young or old, city or country.

ANDREW MARR:
Under the Conservatives, no charges?

JEREMY HUNT:
No charges and we’re absolutely clear. And the NHS remains the single reason that we are most proud to be British as a country and I think the reason for that is because we’re proud of the values it stands for. But I think before we start saying we want to go back to ask people to spend more of their hard earned taxes, we do need to ask whether we are spending the huge NHS budget as wisely as we could; whether, for example, if we improve out of hospital care, we can stop people needing to go to hospital. And I think there’s one final point: the cost of poor care. I mean let’s not forget that we had tragedies like Mid Staffs, and because we didn’t do enough quickly enough to sort out those problems we spend more than a billion pounds every year on litigation claims. That’s got to be crazy.
ANDREW MARR:
Okay and are you carrying on the fight for ring-fencing of the NHS’s budget through the next election? Are you saying to your colleagues we have to carry on doing this? Or, like Liam Fox, do you think you should give it up?

JEREMY HUNT:
Well we have already shown you know our instincts on that, if I can put it that way, by continuing to protect the NHS budget into the next financial year, which actually goes beyond …

ANDREW MARR:
(over) So we should expect no charges and a ring-fenced budget looking ahead?

JEREMY HUNT:
I think, if I can put it this way, I think David Cameron and George Osborne are passionate about making sure the NHS continues to deliver for the British people and they understand the pressures it’s under.

ANDREW MARR:
Right, well you’re going to have to tax us more to pay for it, I suspect. But can I move onto UKIP, which is another big story of the day. They are carrying on shooting up the polls, way way ahead of you in the European Election polls. They are going to do serious damage to the Conservative Party. Are we going to see a change in policy, a tougher attitude towards Europe, tougher negotiating policies and so forth in response to UKIP’s success?

JEREMY HUNT:
Well you know I think we have to engage with UKIP and engage with the British public on the arguments, and I think there are basically two reasons why people consider voting UKIP. One of them is Europe and one of them is as a kind of protest vote against the big parties. And let’s just take both of those. I mean first of all on Europe, there’s a choice. We have a prime minister who has a plan. He’s the first prime minister who’s said he’s going to give the British people an In/Out referendum. He’s going to renegotiate the terms of our membership. And he’s got a track record.
He’s brought back powers from Brussels; he’s got us out of the bail-out mechanism; he’s vetoed a European Treaty. And the alternative …

**ANDREW MARR:**

*(over)* Sorry. We know the alternative …

**JEREMY HUNT:**

No the alternative – UKIP, if they do well – the only thing that happens then is Ed Miliband in Downing Street and he doesn’t believe in any of those things. So we have to make sure that choice is clear.

**ANDREW MARR:**

Well they are doing well. And part of the reason I think is a lot of UKIP voters will say well we have to really stick it to the Conservatives, we have to really push them and the best way to do that is with a sharpened stick called UKIP. They don’t like it up them.. but it’s the only way to keep them as it were honest on the referendum question.

**JEREMY HUNT:**

Well that’s sort of part of the attraction of a protest vote. But you know the reason people want to vote that way is because they’re angry. And I think they’re right to be angry. We’ve just had the worst recession since the Second World War. But all I would say is if you’re angry vote for the party that’s going to change things the most. And you know the Conservative Party has turned around the British economy. The papers this morning are talking about the economy growing faster than America, Germany and France. Iain Duncan Smith is tackling the welfare state and Michael Gove is transforming standards in schools. Of course it takes …

**ANDREW MARR:**

And you’re going to get Boris back in the House of Commons to lead you.

**JEREMY HUNT:**

Well that would be wonderful. But the point is of course it takes longer than people would like, but I think the British people understand that Rome wasn’t built in a day and we will get there but we have to have patience.
ANDREW MARR:
And sadly TV interviews can’t be built in a day either. We’ve run out of time.
INTERVIEW ENDS