

Stand and Deliver: Has Labour's Public Spending Spree Worked?

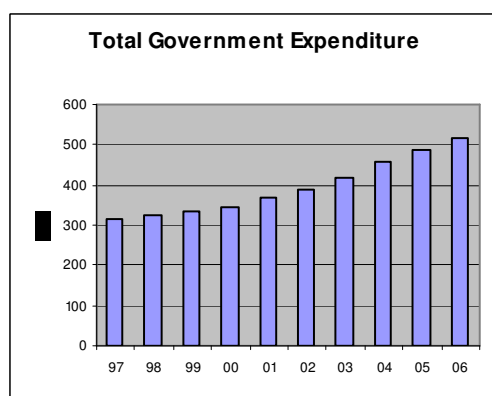
A Policy Brief from The Bow Group, by Mark Nicholson

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The theory that additional government spending can improve public services has been tested to destruction since 1997. Vast sums have been poured into an unreformed public sector in the hope that performance will improve. However, this paper shows that there has been not been an improvement in service delivery corresponding to the increased expenditure. Taxpayers' money has instead been wasted on a) rampant public sector inflation and b) additional public sector resources being consumed by declining productivity. Increased spending alone has not improved Britain's public services.

1. Introduction

Since 1997, the Labour government has presided over a spectacular increase in public spending. The 2003/4 budget provided for government spending of £456bn. This compares to £316bn in 1996/7, an increase of 44% in seven years. Government projections envisage £516bn being spent in 2005/6.¹



Despite this huge effusion of taxpayers' money, the public do not perceive that public services have improved as a result.^{2,3} We will assess the accuracy of this perception and, if it is justified, identify where the extra money spent has gone.

Where could the money have gone?

Additional public spending can result in one of four ultimate outcomes:

- Extra Public Sector Inflation. Real spending could be increased without actually providing extra resources. This represents extra public sector inflation:
 - Extra public sector inflation might lead to higher productivity – for example, due to a better-paid and motivated workforce. This would be “**productive inflation**” (outcome 1)
 - If extra public sector inflation does not improve productivity, this would be “**waste through inflation**” (outcome 2)

- Extra Public Sector Resource. If extra resources are provided:
 - Corresponding extra output might be generated – this would be “**productive additional resources**” (outcome 3)
 - There might not be additional output (i.e. improved healthcare, education). This would mean public sector productivity has declined and is “**waste through inefficiency**” (outcome 4)

Focus on Health and Education

To assess whether additional public spending is contributing to improved service provision, we must examine the spending, resource provision and output of each department since 1997. We must investigate which outcome (or combination of outcomes) of the four possible is in fact occurring. We will focus on health and education. These are the services with which the public are most concerned and which Labour placed at the foreground of their election campaigns in 1997 and 2001. We all remember slogans such as; ‘Education, Education, Education’, ‘24 Hours to Save the NHS’, and ‘Remember to Vote for Schools and Hospitals this Thursday.’ But what has actually happened?

2. Health

2a. Health Spending

In its effort to prove that the health of the nation can be improved through increased spending alone, spending on the NHS spend has risen from £42.3bn in 1996/7 to £63.3bn in 2003/4 (a rise of 49.6%) and is planned to be £76bn in 2005/6 and £90.2bn by 2007/8.⁴ This is equivalent to a rate of increase of 5.9% p.a. between 1996/7 and 2003/4. Labour has promised to speed the rate of increase to 7.4% p.a. in the five years to 2007/8. Capital spending on health is planned to rise at 15% p.a. in real terms between 97/8 and 05/6.⁵

2b. Health Resources

The resources available to the NHS have not increased proportionally with the recent increases in spending. This implies that there is an element of extra inflation in the health service.

Staff and spending in the NHS⁶

Year	1996/7	2001/2	Change
Spending	£42.3 b	£58.0 b	+ 37% / 25%*
NHS Staff	1,058,686	1,224,934	+16%
Non-clinical staff	538,792	621,857	+15%
% Clinically Qualified	49.1%	49.2%	+0.1%
Doctors in NHS (FTE)	89,619	104,460	+17%
Nurses	300,000	346,537	+16%

* Nominal increase / Real increase (RPI deflated)

The number of staff employed by the NHS increased by 15.7% over 5 years, when spending on the NHS increased by 37.1% nominally, and 24.6% in real terms. The number of nurses in the NHS rose from 300,000 to 346,537 between 1997 and 2002, this 15.5% increase being in line with the overall increase in staff. Although the increase in the number of doctors between these dates was also significant at 16.6%, this represents only a modest increase in growth rate above the 13.3% increase achieved between 1991/2 and 1996/7 when overall NHS spending rose more slowly.

Increases in NHS staff resources have therefore been smaller than increases in expenditure. This would imply a material element of extra public sector inflation, above normal inflation in the economy. This suspicion is confirmed by the fact that 30.77% of increased expenditure in 02/03 went on pay inflation.⁷ It is worth noting that approximately two thirds of health spending goes on salaries.

Beds⁸

The number of hospital beds in the NHS has fallen since Labour came to power in 1997, despite the enormous increases in health spending.

Bed Type	1996/7	2000/1 ⁹	Change
Overnight	198,848	186,091	-6%
Day Only	6,766	8,155	+21%
Residential Care	4,902	5,420	+11%
Total Beds	210,516	199,666	-5%

This 5.15% decline in bed numbers means that the average bed occupancy rate in 2000/1 was 84%, up from 81.3% in 1996/7 and comparing to rates of around 60% in France and Germany. Although this improvement in occupancy implies a slight (3%) improvement in productivity, it does leave the NHS more vulnerable to sudden surges in demand for beds compared to our European neighbours. However, the decrease in beds is in part due to a higher proportion of operations being carried out on a "day" basis.

2c. Health Output

Activity rates have only seen very small increases compared to the increased funding, and waiting times have actually worsened overall. This implies that the additional resources provided to the NHS are being wastefully employed.

Activity

Although an analysis of resources gives an indication of excess inflation in the NHS, only an assessment of its service outputs can determine the ultimate efficiency of health spending.

NHS Activity Statistics

Year	1991/2	1996/7	2001/2	Chge
	('000)	('000)	('000)	97-02
Ward Attendances ¹⁰		1,026	1,078	+5%
A&E Attendances ¹¹	13,717	14,126	14,044	-1%
1st Outpatient Attendances ¹²	8,942	11,294	12,714	+13%
Total		26,446	27,836	+5 %

Year ¹³	1998/9	2001/2	Chge
	('000)	('000)	
Ordinary Admissions	8,563	8,764	+2%
Ordinary Operations	3,434	3,269	-5%
Day Cases	3,421	3,593	+5%
Day Case Operations	3,031	3,173	+5%

Overall, activity in the NHS since Labour came to power has increased by 5%. However, over the same period spending has increased by 37.1% (24.6% real terms) and staff numbers by 15.7%. The low growth of activity compared to the rate of increase in the number of staff suggests that the new resources were deployed less efficiently than before.

Accident and Emergency (A&E) attendances fell by 0.6% between 1996/7 and 2001/2, compared to an increase of 2.9% in the preceding five years. The rate of increase in outpatient attendances declined 12.6% in the latter comparison period from 26.6% previously. While ward attendances were up 5.3% between 1996/7 and 2001/2, this was equivalent to only one-third of the increase in NHS staff.

Similarly, the figures for operations in the second table show either a decline in activity from 1998/9 (the earliest comparable figure) or a modest increase. The total of 'ordinary' and day case operations combined was in fact marginally lower in 2001/2 than three years earlier.

More recent statistics do not suggest that increased spending is having an immediate effect. In 2002/3, health spending increased by 21.5% while the NHS's assessment of its activity was up only 1.6% and admissions to hospitals actually declined by 0.5%.¹⁴

Waiting Times

The NHS's recent record in reducing waiting times for operations and treatments is mixed. Whereas waiting times for cataract operations and some heart operations have declined considerably, waiting times for many other operations have gone up. There has been little change in the average times taken to treat injuries and diagnosed diseases.

Median Waiting Times (Days)¹⁵

	1998/9	2001/2	Change
Operations			
Cataract	204	153	-25%
Upper Digestive Tract	33	34	+3%
Heart CABG	170	153	-10%
Heart PCTA	48	58	+21%
Hip	198	220	+11%
Kidney Transplant	13	15	+15%
Treatment for Diagnoses			
Cancer	18	19	+6%
Heart Disease	70	75	+7%
Influenza	121	121	-
Hernia	82	80	-2%
Head Injuries	4	4	-

Across the NHS as a whole, the average waiting time for an operation increased from 90 days in 1997 to 96 days in 2003.¹⁶ The number of inpatients and outpatients seen within three months also declined.

Year	1996-7 ¹⁷	March 2003 ¹⁸
Inpatients seen within 3 months	72%	54%
Outpatients seen within 13 weeks (of going on outpatient list)	81%	77%

Waiting Lists

The Labour government's much trumpeted success in reducing waiting lists is in fact based on inpatient waiting lists only. Since Labour came to power, inpatient waiting lists have fallen from 1.16m¹⁹ to 0.99m²⁰. This represents a 14.7% decline, steeper if it is considered that inpatient waiting lists initially rose under Labour, by 55,000 from March 1997 to September 1998.²¹

Outpatient waiting lists however have risen from 1.3m²² in March 1997 to 2.4m in March 2003.²³ This 1.1m increase means that, taking inpatient and outpatient waiting lists together, 930,000 more people are waiting for treatment in March 2003 than in March 1997, an increase of 21% in six years.

Quality of Care

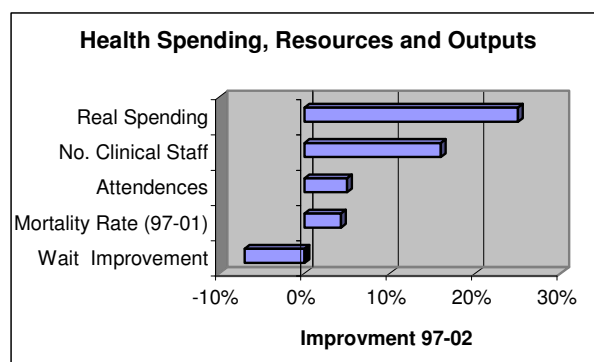
Overall mortality rates between 1997 and 2001 only improved by an average of 4.3%, in line with historic trends²⁴. Similarly, UK life expectancy increased only slowly in Labour's early years in office, from 77.1 years in

1995 to 78.2 years in 2000.²⁵ This represents simply a continuation of its slow and steady increase over recent decades.

There has also been no improvement in the UK's generally poor cancer survival rates that continue to lag behind those of much of the rest of Europe. A 2003 study showed that only 44% of UK cancer patients were still alive 5 years after diagnosis (Men 37.1%, Women 50.8%), compared to European averages of 40.5% for men and 53.6% for women.²⁶ UK Cancer mortality rates were static or worse in 2001 compared to 1997²⁷.

Conclusion

As the table below shows, the 25% real increase in health spending in the first 5 years under Labour has not resulted in corresponding increases in resources (only 16%) and has not resulted in improved activity – attendances are only up 5% and waiting times have increased by 6%. The extra money has been largely wasted in excess inflation and inefficient application of additional resource.



3. Education

3a. Education Spending

As with health, since Labour came to office, total spending on all education has increased significantly. Government spending on education increased from £38bn in 1996/7 to £59bn in 2003/4, a rise of 55.3%.²⁸ Education spending rose at an average of 5.1% p.a. between 1997/8 and 2002/3, equivalent to £800 more per pupil in real terms.²⁹ As with health, this spending spree is to continue with schools being promised an average increase of 5.5% p.a. in 2004/5.³⁰

Although an average 27% of education spending is retained by Local Education Authorities (LEAs)³¹, the total amount spent on schools also increased dramatically after 1997, rising 31.1% per pupil in real terms by 2001/2.

Real Term Spending on Schools ³²

(£bn, 2002/3 Prices)

Year	97-98	00-01	01-02	02-03 (est.)
Under 5s	1,989	2,488	2,995	3,169
Primary	7,430	8,366	9,026	9,269
Secondary	9,261	10,458	11,482	11,945
Other	2,034	3,002	3,138	3,447
Total	20,714	24,314	26,640	27,829

The amount spent per pupil has also risen impressively under Labour. It increased by 44.3% in total between 1996/7 and 2001/2, equivalent to a 31.1% per capita increase in real terms.

Cash terms LEA expenditure per school pupil, (£)

Year	Teaching	Support	Books and equipment	Total
1996-97	1,342	199	81	1,622
1997-98	1,357	211	84	1,652
1998-99	1,402	231	99	1,732
1999-00	1,514	271	120	1,905
2000-01	1,626	310	148	2,084
2001-02	1,806	373	162	2,341

Education capital expenditure increased even more dramatically, remaining on target to grow 18% p.a. in real terms from 1997/8 to 2005/6.³³

3b. Education Resources

The increase in education spending has increased the resources available to schools in England, although not in line with the scale of additional real spending. As with Health, this implies extra public sector inflation.

Number of Teachers³⁴

Year	1997	2002	Change
Per Cap Spend			+ 44% / 31%*
FTE Teachers	412,400	437,100	+6%
FTE Qualified Teachers	396,800	408,200	+3%
Percentage Qualified	96.2%	93.4%	-2.8%

* Nominal increase / Real increase (RPI deflated)

The number of full-time equivalent teachers has risen by 6% over five years while the real per capita increase in spending on school level education was 31.1%. This is clear evidence of excess public sector inflation. There has been a slight dilution of the base of qualified teachers, although this is in part to be expected at a time when overall teacher numbers are increasing and newly trained staff entering the profession.

Staff Vacancies³⁵

Year	1997	2002
Primary vacancies as a % of teachers in post	0.6%	1.0%
Secondary vacancies as % teachers in post	0.4%	1.4%

A justification of excess public sector inflation (i.e. public sector inflation increasing at above the rate on inflation in the rest of the economy) is that public sector salaries needed to increase in order to retain skilled staff. However the increase in the number of teacher vacancies at a time of rising salaries shows that extra pay alone is not persuading teachers to stay in the profession or return to it, so undermining this argument. Moreover, a survey by the National Union of Teachers suggests that 74% of teachers who quit cite excessive bureaucracy as the main reason for their decision, not pay rates.³⁶ This suggests that the excess inflation is wasteful rather than productive.

Class Sizes

Average Class Size ³⁷	January 1993	January 2003	Change
Primary	26.3	26.3	-
Secondary	21.9	20.9	+4.5%
Average	24.1	23.6	+2.0%

Despite per pupil increase in spending on teaching in 1997-2002 of 31.1% in real terms, class sizes have changed little over the last decade, despite increased spending on education by governments of both parties. This low correlation is mirrored internationally.

Hours Taught

Change in average number of 35 minute periods taught to secondary school pupils, 1996-2002 ³⁸	
Year 7	+1
Year 8	+1
Year 9	+2
Year 10	0
Year 11	-2

Likewise, pupils received little additional teaching in 2002 compared to 1996. Across the five years of secondary education, hours taught rose by only 1%.

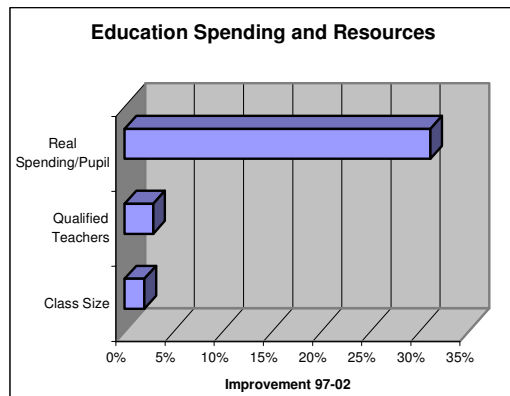
3c. Output

The Labour government's claims of success for its education policy have been based around an improvement in GCSE grades.³⁹ This indicator has been devalued by widespread and persistent suspicion of 'grade inflation'. Even so, the government's preferred measure of attainment, the proportion of pupils leaving school with the equivalent of 5 GCSEs or more increased only modestly from 71.3% in 1997 to 75.4% in 2002.⁴⁰ A more objective assessment can be made by reference to comparative international tests carried out by the International Maths and Science Survey⁴¹ and the OECD on reading ability.⁴² Both surveys show the UK languishing in mid-table in comparisons of developed

countries, and have not materially changed over the period of the studies.⁴³

Conclusion

As the chart below summarises, Labour's increased spending on Education has not generated anything like corresponding improvements on key measures. As with health, a combination of wasteful excess inflation and inefficient application of extra resources are to blame.



4. Where Has the Money Gone?

As we have seen from our studies of health and education, increased spending has not produced improved service outputs. Overall, extra spending has led to some extra resource, but not as much as it should – meaning that there has been extra public sector inflation. Overall output improvements are only a fraction of the resource increases. This means that we are mostly seeing a combination of:

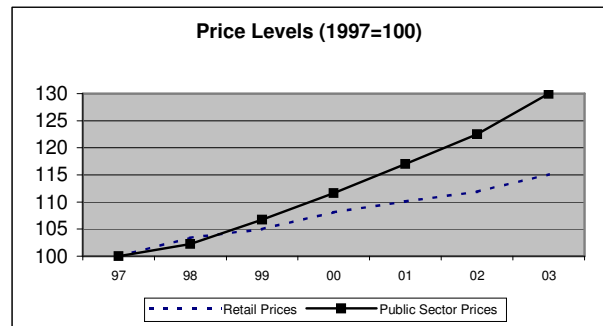
- **Outcome 2 - Waste through inflation**, as extra real spending has not led to corresponding resource increases. This extra public sector inflation has not delivered productivity improvement, and
- **Outcome 4 – Waste through inefficiency**, as extra resources that are provided (after inflation) are not delivering extra output

4a. Waste Through Inflation

Inflation is a useful indicator in calculating waste as it measures the increased cost of providing the same resource. It could be argued that some public sector staff were previously underpaid and that above-inflation pay rises were necessary to increase morale, staff retention and productivity. However, we have already seen that excess (i.e. over real inflation) public sector inflation has, by and large, not led to productivity improvements. For example, the teacher vacancy and retention statistics quoted above do not show an improvement, despite above-inflation pay rises. The increased cost of providing the same level of resource therefore represents waste through inflation.

As measured by the Office of National Statistics⁴⁴, Public sector inflation was 6.5% in 2002/3, compared to an increase in the Retail Price Index of 2.9%. **If public sector inflation had run at the same rate as the rest of the economy, £15.1bn could have been saved from the 2003 budget – equivalent to 3.6% of total spending.** Such a saving would have allowed the basic rate of income tax to have been cut by 4%. Alternatively, inheritance tax and stamp duty could have been abolished and the basic rate of income tax cut by 1%. 'Tax Freedom Day', the day up to which the average taxpayer effectively works simply to pay off their tax bill, would have been 5 days earlier, falling on 28 May rather than 2 June as was actually the case in 2003. Alternatively, the £15.1bn cost of 'excess' public sector inflation is equivalent to the total government expenditure on transport in 2003/4.⁴⁵

The cost of the 'excess inflation' in the public sector is even more remarkable when its cumulative effect since 1997 is calculated. Compound public sector inflation was 30.4% between 1997 and 2003 while the equivalent increase in retail prices was only 15.1%.⁴⁶ **If public sector inflation had run at the same rate as private sector inflation since 1997, the amount of taxpayers money wasted would be an incredible £144.8bn.** This is more than the amount spent on health and education put together in 2003/4.



Defenders of the government's spending record could argue that public sector inflation is an inevitable consequence of increasing public spending. However in the period of Conservative government from 1993⁴⁷ to 1997, public sector inflation was running at slightly below the RPI, even while public spending increased by 10.9% in real terms. Keeping public sector inflation below the RPI 'saved' the taxpayer 16.3bn over these four years.⁴⁸

4b. Waste through Inefficiency

Notwithstanding the billions spent fuelling surplus public sector inflation, additional public resources have been provided under Labour. Once all inflation has been stripped out, the real resource available to the public sector increased by 10.8% between 1996 and 2003, an average increase of 1.4% p.a.⁴⁹ **However, crucially, a better service is not being provided. There is a further 'leakage' of public sector funding between resources provided and output obtained. This**

means that public sector productivity has declined.

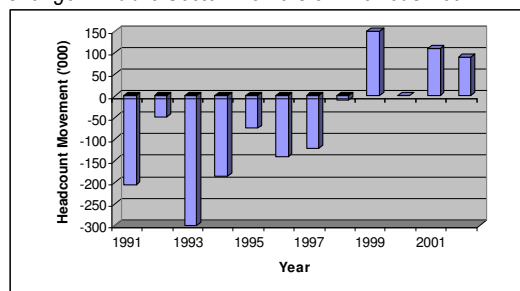
According to a recent estimate, public sector output increased by only 0.2% in the year to June 2003⁵⁰, at a time when resource increased by far more. A practical example of increased inefficiency is the rise in public sector employment without equivalent increases in output.

Public Sector Employment

The dramatic increase in public sector employment under Labour illustrates that the increased resources pumped into the public sector is failing to improve output.

As with public sector inflation, the trend of public sector employment changed diametrically after 1997. Prior to Labour coming to power, employment in the public sector had fallen for fifteen years in a row. The number of public sector jobs fell from 7.4m in 1980 to 4.9m in 1998. However 354,000 new public sector jobs have been created since 1998, a 7.2% increase.⁵¹

Change in Public Sector Workers on Previous Year⁵²



The increase in the number of central administrators was especially marked. 22,000 new civil service jobs were created in the Civil Service in the year to April 2003 alone. This represents a 4.5% increase, five times faster than the overall rate of job creation in the economy.⁵³ By contrast jobs in 'Whitehall' fell by a third between 1979 and 1997.⁵⁴

Among 'functional' departments, public sector employment grew fastest in those departments where spending increases were focused. The Department of Health created 61,000 jobs in the twelve months to June 2002. In the same period, the Department of Education created 11,000 jobs.

Of the 354,000 new public sector jobs, half were in administrative, as opposed to active front-line roles.⁵⁵ For example, the 83,363 additional clinically-qualified staff recruited by the NHS between 1997 and 2002 were almost matched by the 82,885 extra employees without such qualifications who were taken on. The percentage of NHS staff with clinical qualifications was static at 49% between 1997 and 2002⁵⁶. Similarly, although there were 6,000 more policemen in 2002 than in 1997, the number of home office civil servants increased by 10,000.⁵⁷ Additional resource is being channelled into bureaucracy rather than frontline services and so undermining productivity.

5. International Comparisons

Mirroring the UK's experience since 1997, international comparisons of expenditure and output in the fields of education and health suggest that higher levels of spending alone do not necessarily result in better services. There is little correlation between spending and results, suggesting that there is more to delivering better public services than simply pumping more cash in.

5a. Health

Efficiency of Resource Provision

In the 2003 Budget, the government claimed that the British public is less healthy than it ought to be because less has been spent on health than our competitors over the last 30 years. However analysis of comparative international data suggests that spending patterns alone are not responsible for this and that UK health expenditure has been comparatively inefficient in providing key resources.

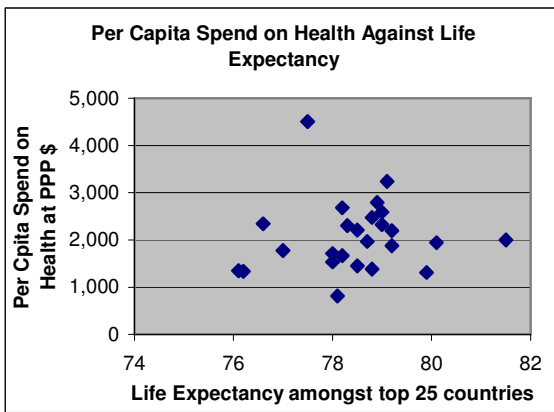
Assessed on the basis of per capita expenditure on a Purchasing Power Parity basis, UK healthcare, the majority of which is provided through the NHS, is less efficient in providing doctors and hospital beds than the healthcare systems in competitor economies.

In 2003 the UK spent the equivalent of \$1,666 per person on healthcare and provided 1.8 doctors and 4.1 hospital beds per 1000 people, an effective 'cost' of \$925,502 per doctor and \$406,318 per hospital bed. Obviously not all of this amount was spent on either doctors or beds but the figures are useful to compare national efficiencies.

By comparison, the Italian health system provided a doctor for every \$334,097 and in Japan, a hospital bed was provided for every \$121,796. Overall, the UK came 19th out of the 25 countries with the highest life expectancy in terms of most cost-efficient provision of doctors and 19th out of 24 for efficient provision of hospital beds.⁵⁸

Health Spending and Life Expectancy

Furthermore, once a country reaches an advanced level of development, it is also questionable as to how much difference marginal changes to the quality of healthcare makes to longevity. The scatter diagram below illustrates that there is little correlation between spending and healthcare among those countries with the highest life expectancies. Lifestyle, diet, the way that healthcare is organised and environmental factors influence longevity in these economies much more than healthcare spending.

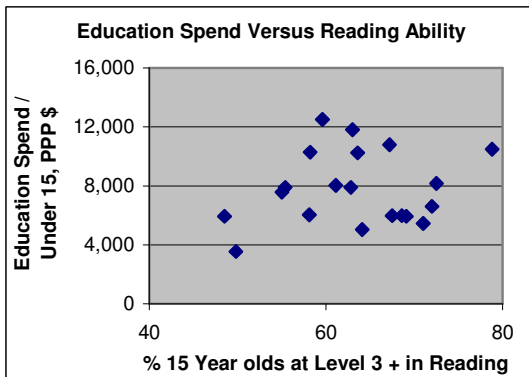


5b. Education

International comparisons⁵⁹ suggest that, for developed countries at least, the generally accepted positive correlation between education spending, class sizes and reading proficiency is not very strong.

Education Spending and Reading Attainment

Plotting per child education spending in purchasing power parity against reading ability at 15 (as assessed by the OECD) gives a graph which is virtually flat, especially if Greece and Portugal, the two countries with the with the worst reading performance, are excluded. This implies that, as with health, once certain levels of development and spending are reached, increases in education spending have little effect on standards.



The same lesson can be drawn when performance is tracked across time in one developed country. American educational standards failed to rise between the 1970s and 2000, despite substantial increases in real funding.⁶⁰

Class Sizes and Reading Attainment

Although comparative data on class sizes and reading performance at 15 is available from fewer countries, there is actually a negative correlation between primary and secondary class size and performance. At the least, this suggests that improving educational performance is a more complicated exercise than simply increasing school funding, classroom and wider cultural factors probably playing a significant role.

6. Conclusion

The testing to destruction of the 'stealth tax and spend' thesis since 1997 has led to increasing realisation among the general public that pumping more money into the public services does not by itself guarantee better service delivery.^{61 62}

The opportunity therefore exists for politicians to be bold:

- There is scope for reducing or reallocating public spending without cutting front-line service provision, by reducing the bureaucracy created by Labour. The money saved could be given back to the public as tax cuts, or re-invested in front-line services. At the very least, a future government could deliver better value for money simply by keeping public sector inflation to the same level as RPI, as was achieved before 1997.
- To obtain better value for money and to ensure that a greater proportion of public spending goes to pay for front-line services, the way in which public sector services are organised needs to be reformed. These have been much discussed of late, but the wasteful consumption of extra resource by the public sector as currently organised makes the case for reform very powerful. Principles which could underlie such reforms include:
 - **Greater freedom for providers** to run their own affairs, and especially freedom from central dictation. This would lead to correspondingly reduced bureaucracy
 - **Giving the users of public services a choice** of providers to encourage better provider performance. Competition between providers is a more effective way to drive quality than hundreds of centrally set targets.

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- ¹ Office of National Statistics, 30 September 2003
 - ² YouGov poll published in Daily Telegraph, 22 September 2003
 - ³ Sunday Times, 28/9/03
 - ⁴ Department of Health Website, October 2003
 - ⁵ HM Treasury, Budget 2003, April 2003
 - ⁶ All statistics from Statistics Sub-Site of NHS Website, October 2003
 - ⁷ Statistics Sub-Site of NHS Website, October 2003
 - ⁸ Form KH03, NHS Statistics, October 2003
 - ⁹ Latest available year
 - ¹⁰ Form KH14, NHS Statistics, October 2003
 - ¹¹ Form KH09, NHS Statistics, October 2003
 - ¹² Form KH09, NHS Statistics, October 2003
 - ¹³ NHS Hospital Admitted Patient Data, NHS Website, September 2003
 - ¹⁴ NHS Website, November 2003
 - ¹⁵ Statistics Sub-Site of NHS Website, October 2003
 - ¹⁶ The Times, 27 September 2003
 - ¹⁷ NHS Red and Green Books for 1996/7
 - ¹⁸ NHS Red and Green Books for 2003/4
 - ¹⁹ NHS Green Book, March 1999
 - ²⁰ NHS Green Book, March 2003
 - ²¹ NHS Green Book, March 1999 and September 2000
 - ²² NHS Performance Book, 1996/7
 - ²³ NHS Red Book, March 2003
 - ²⁴ Department of Health Website, accessed 9th December 2003. Table A4 and A3: Death Rates by selected Causes.
 - ²⁵ Economist World in Figures
 - ²⁶ Eurocare study quoted in London Evening Standard, 25 September 2003
 - ²⁷ Department of Health Website, accessed 9th December 2003. Table A4 and A3: Death Rates by selected Causes.
 - ²⁸ Budget 2003, HM Treasury Website, April 2003
 - ²⁹ Speech by Charles Clarke, Secretary of State for Education, 25 September 2002
 - ³⁰ Speech by Charles Clarke, Secretary of State for Education, 30 October 2002
 - ³¹ 2001 Figures. Nick Seaton, 'Unfair Funding', CPS 2001.
 - ³² Statistics Sub-Site of Department for Education and Skills Website, October 2003
 - ³³ HM Treasury, Budget 2003, April 2003
 - ³⁴ Department for Education and Skills Website, September 2002
 - ³⁵ Department for Education and Skills Website, September 2002
 - ³⁶ National Union of Teachers Press Release, September 2003
 - ³⁷ Pupil Characteristics and Class Sizes in England (DFES 10/2003)
 - ³⁸ Statistics Sub-Site of Department for Education and Skills Website, October 2003
 - ³⁹ Budget 2003, HM Treasury
 - ⁴⁰ 'Qualifications at age 19', Education Form H5, Office of National Statistics, December 2003
 - ⁴¹ 'Learning the Right Lessons', Article by Nick Gibb MP in *Crossbow*, Autumn 2003
 - ⁴² Table A11.1, OECD PISA Database, 2001
 - ⁴³ Third International Maths and Science Survey results, 1995, 1999 and 2003.
 - ⁴⁴ All statistics from Office of National Statistics (www.statistics.gov.uk)
 - ⁴⁵ HM Treasury, Budget 2003, April 2003
 - ⁴⁶ Office of National Statistics, September 2003
 - ⁴⁷ This is the earliest year for which comparative statistics are available.
 - ⁴⁸ Office of National Statistics, September 2003
 - ⁴⁹ Calculations based on public sector inflation data from Office of National Statistics
 - ⁵⁰ The Times, 27 September 2003
 - ⁵¹ Office of National Statistics, September 2003
 - ⁵² Office of National Statistics, September 2003
 - ⁵³ Financial Times, 17 October 2003
 - ⁵⁴ Daily Telegraph, 22 October 2003
 - ⁵⁵ Daily Telegraph, 22 September 2003
 - ⁵⁶ Department of Health Website, September 2003
 - ⁵⁷ Daily Telegraph, 22 October 2003
 - ⁵⁸ All data are sourced from the 'Economist World in Figures' (2003). Amounts are stated in US\$ and have been adjusted to take account of the general costs of living in different countries.
 - ⁵⁹ Statistics derived from the Economist and the OECD
 - ⁶⁰ American Legislative Exchange Council, Report Card on American Education: A State by State Analysis 1976-2000, 17 April 2001
 - ⁶¹ YouGov poll published in Daily Telegraph, 22 September 2003
 - ⁶² Sunday Times, 28 September 2003