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NHS REVIEW

It has one major defect among many merits. This is that, on the basis of the present draft, it more or less concedes game, set and match the argument of those who claim that the Government decided what it was going to do, never consulted anyone who was likely to disagree with it and is now simply giving the country due notice of its intentions. It may well be no worse for this. But the singular lack of detailed argument in support of its proposals will reinforce the criticism that this is an arrogant Government which is simply going to brook no argument in pursuit of its aims.

We need to deal with this important presentational point if we are to give the document the fairest wind. I believe we can do so fairly readily if we:

- i) recognise this is an action document, take credit for it and reflect this in the presentational approach;
- ii) pay particular attention to Chapters 1 and 13;
- iii) and pay especially close attention to Paras 1.4-1.6 in Chapter 1 and the title and introduction to Chapter 13.

The key passage which will set the tone is Paras 1.4-1.6 under the heading "The Need for Change". I suggest this passage should be re-written to present the outcome of the review - an action programme - as a logical consequence of the Government's experience over the last 10 years. The Government needs to demonstrate that it has not conjured this White Paper out of thin air but that its programme is deeply rooted in its long experience of trying to improve health care for the British people over a decade. As we discussed, it can also legitimately call in aid the views and opinions of a wide variety of organisations and people who have written to Departments.

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Consequently I suggest Paras 1.4-1.6 should follow this construction:

"Throughout the 1980s the Government has thus presided over a massive expansion of the NHS. It has ensured that the quality of care provided and the response to emergencies remain among the best in the world.

"But increasingly the country as well as the Government have recognised that more needs to be done because of rising demand and an ever-widening range of treatments resulting from advances in medical technology. It has increasingly been recognised that the injection of more and more money per se is not the answer.

"It is clear that the organisation of the NHS - the way it delivers health care to the individual patient - also needs to be reformed.

"The Government has been tackling these organisational problems. It has taken a series of measures to improve the way the NHS is managed. The main one was the introduction of general management in 198-. This has been particularly successful and has also demonstrated the way ahead.

"The new management information systems have provided clear evidence of a wide variation in performance up and down the country. [Take in rest of Para 1.5]

"The Government wants to raise the performance of all hospitals and GP practices to that of the best and the main question which this review has addressed is how to achieve that.

"It is convinced that this can be done only by two related measures:

- i) devolving responsibility down the Service as close as possible to the delivery of health care to the patient - predominantly to the GP and the local hospital; and
- ii) developing clear accountability for the use of the resources involved in dealing with patients.

[Take in rest of Para 1.6, omitting last sentence]

"This White Paper presents a programme of action, summarised in Para 13, to secure two objectives:-

- i) to give patients wherever they live in the UK, better health care and greater choice of the services available; and
- ii) greater satisfaction and rewards of those working in the NHS who successfully respond to the opportunity to meet local needs and performances."

Chap. 13. The Action Programme
 So far as Chapter 13 is concerned I do not like the heading "The new NHS takes shape". Surely we should describe this Chapter as "The action programme". We also need to introduce it properly rather than go bald into the commitment to early legislation.

The other main point I have is the confusion I find when I come to Part 3 on general practice. It stems from the use of "buying a defined range of services" and an annual budget of only £600-700,000 for 11,000 patients. This raised in my mind just how substantial a scheme we are talking about or whether we are just tinkering. It would help if the word "defined" were inserted into the fourth action point in Para 1.7 and similarly in the third para of the introduction to Part 3.

I think another point of political controversy - the ending effectively of representational authorities etc - is adequately explained in Para 8.4. But this raises a general point: any publicity or explanatory material needs to make clear the reasons for the actual points as well as the proposals themselves.

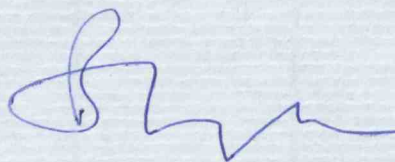
In the media's eyes money will talk and I have yet to see the Treasury's paras, so judgment must be reserved. But another aspect of this is equipment. The Scottish section (Para 14) helpfully says that in time a GP should be able to call up a range of information on best buys and hospital waiting lists/vacancies. This is not mentioned as a goal in England or elsewhere. Surely it should be. It is quite clear that the media are expecting something like this. Shouldn't we avoid disappointment?

Finally, I found the Scottish, Welsh and Northern Irish stuff a bit repetitive, though they are clearly necessary because of the differences. We need to be absolutely certain, however, that in polishing the drafting they are consistent in spirit as well as form. I am not sure some of them are living in the same islands as us.

Other points

1. We need to import into Para 1.2 the important political point (defensively over-emphasised in Para 3.7) that there will be no question whatsoever of patients who need urgent treatment being denied it.
2. I am uneasy about the words in the first sentence of Para 1.3 "out of all recognition". It is a bit colloquial and not really accurate. The public still recognise it only too well. But rapidly, massively, hugely or formidably hardly do the job either. I wonder whether "is growing at a truly remarkable pace" is better.
3. We need to get greater consistency in our figures. In Para 1.3 we put the budget at "£24billion" and in 2.1 at "in excess of £20billion".
4. A glossary of abbreviations at the front would help. I was somewhat stunned by FPCs appearing (I think) unadorned for the first time in 3.21.

I hope this is helpful.



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