



10 DOWNING STREET
LONDON SW1A 2AA

THE PRIME MINISTER

20 June 1989

Dear Mr. Day,

Thank you for your letter of 15 June about membership of the NHS Policy Board.

Let me say at once that it is quite wrong to believe that the fact that a nurse has not been appointed to the NHS Policy Board means that the Government no longer has a high regard for the nursing profession. We have consistently encouraged and supported nurses and the nursing profession. Our very high opinion of the profession has been amply demonstrated and clearly stated on many occasions. There has been no change on that score.

I also wonder whether you and the Council of the RCN have misunderstood the purpose and nature of the Policy Board. Its task is to determine the policy and strategy for the management of the service. Most of the members of the Board have been appointed on a non-executive basis for the personal contribution which they will make. The only exceptions to this are the Ministers at the Department of Health, the Permanent Secretary and the Chief Executive who are ex-officio members. The Board will need advice on a wide range of subjects. Anne Poole, the Government's Chief Nursing Officer, will be present at Board meetings whenever issues affecting the delivery of care by nurses, midwives and health visitors are discussed. However, it is not intended that the Board should determine wider issues of health care policy. The Government will continue to look to its Chief

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Nursing Officer to provide advice on health care policy from a nursing standpoint.

I know that you have already had a very full discussion with Kenneth Clarke about why a nurse has not been appointed to the Policy Board. I do not believe that much would be gained by our meeting, as there is nothing I can add to what Kenneth Clarke has already said to you and to what I have said here.

Yours sincerely

Raymond Dalrymple

Trevor Clay, Esq.

PRIME MINISTER

LETTER FROM TREVOR CLAY

I attach a reply for signature to a further letter from Trevor Clay complaining about the membership of the NHS Policy Board.

I am sure DOH are right to advise against the requested meeting; I gather Ken Clarke would like to talk to you if you thought you should see Trevor Clay.

Patricia A. Parker

P PAUL GRAY

19 June 1989



DEPARTMENT OF HEALTH AND SOCIAL SECURITY

Richmond House, 79 Whitehall, London SW1A 2NS

Telephone 01-210 3000

From the Secretary of State for ~~Social Services~~ Health

Paul Gray Esq
Private Secretary
10 Downing Street
London
SW1A 2AA

19 June 1989

Dear Paul

RCN AND THE NHS POLICY BOARD

at head
Thank you for your letter of 15 June. My Secretary of State is quite sure that the Prime Minister should not agree to meet Trevor Clay. I attach a draft reply which she might send Mr Clay.

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Andy

A J MCKEON

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Trevor Clay Esq MPhil RCN RMN FRCN
General Secretary
Royal College of Nursing
20 Cavendish Square
London
WLM 0AB

June 1989

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Thank you for your letter of 15 June about membership of the NHS Policy Board.

Let me say at once that it is quite wrong to believe that the fact that a nurse has not been appointed to the NHS Policy Board means that the Government no longer has a high regard for the nursing profession. We have consistently encouraged and supported nurses and the nursing profession. Our very high opinion of the profession has been amply demonstrated and clearly stated on many occasions. There has been no change on that score.

I also ~~think~~ ^{wonder} that you and the Council of the RCN ^{may have} misunderstood ^{so} the purpose and nature of the Policy Board. Its task is to determine the policy and strategy for the management of the service. Most of the members of the Board have been appointed on a non-executive basis for the personal contribution which they will make. The only exceptions to this are the Ministers at the Department of Health, the Permanent Secretary and the Chief Executive who are ex-officio members. The Board will need advice on a wide range of subjects. Anne Poole, the Government's Chief Nursing Officer, will be present at Board meetings whenever issues affecting the delivery of care by nurses, midwives and health visitors are discussed. However, it is not intended that the Board should determine wider issues of health care policy. The Government will continue to look to its Chief Nursing Officer to provide advice on health care policy from a nursing standpoint.

I know that you have already had a very full discussion with Kenneth Clarke about why a nurse has not been appointed to the Policy Board. I do not believe that much would be gained by our meeting as there is nothing I can add to what Kenneth Clarke has already said to you and to what I have said here.

NAT HEALTH

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June 1952

WIM 022

Travis Clark, Esq. M.D. F.R.C.S. (Ed.)
General Secretary
Royal College of Surgeons
20 Cavendish Square
London
W1M 0AA

Thank you for your letter of 12 June about the proposed
policy board.
Let me say at once that it is quite wrong to believe that the Board
has a number of people appointed to the NHS Policy Board means
that the Government is honouring a high regard for the nursing
profession. We have consistently encouraged and supported nurses
and the nursing profession. Our very high opinion of the
profession has been amply demonstrated and clearly stated on many
occasions. There has been no change in that regard.
I also think that you and the Council of the R.N.S. misunderstand the
purpose and nature of the Policy Board. The task is to advise
the policy and strategy for the management of the service. Most of
the members of the Board will have been appointed on a non-executive
basis for the personal contribution which they will make. The only
exceptions to this are the Ministers at the Department of Health,
the Director General and the Chief Executive who are all full
members. The Board will have a wide range of subjects
and the Government's Chief Nursing Officer will be present
at Board meetings whenever it is necessary to discuss the
nursing services and their future. However, it is
not intended that the Board should discuss the activities of
any body. The Government will continue to look to the
Nursing Officer for advice on health care policy from
nursing establishments.

I hope that you have already had a very full discussion with
Kenneth Clark about the nurse who has not been appointed to the
Policy Board. I do not believe that such a person would be
needed as there is no doubt that Kenneth Clark has
already said to you and what I have said here.