LETTER FROM WESTMINSTER

Long run of Short reports

JOHN WARDEN

Mrs Renée Short's name has appeared in this and other medical journals with such consistent frequency over so many years as to be taken almost for granted. But not for much longer. The industrious Labour MP for Wolverhampton North East is not seeking re-election and will therefore vacate the chair of the social services select committee having presided over it and its predecessors for an unbroken 21 years. It must be something of a parliamentary endurance record.

In that time the select committee system has evolved into a pattern that seems likely to endure. It comprises 14 all party committees, each shadowing a government department. Mrs Short's committee monitors the work of the Department of Health and Social Security. In that capacity a succession of Short reports have made their mark on medicopolitics.

Counting only since the select committees took their present form in 1979 the output of 27 reports from the social services committee far exceeds any of its contemporaries. Mrs Short takes particular pride in two, and with good reason. Her report on perinatal and neonatal mortality (1979) led directly to improved resuscitation facilities for newborn infants resulting in a fall in perinatal mortality. Secondly, the committee's inquiry into medical education (1981) mapped out a new career structure, which the department is now beginning to implement to the mutual benefit of doctors and patients.

The final Short report, an up to the minute look at the problems of the acquired immune deficiency syndrome (AIDS), was being rushed out to beat the expected dissolution. With companion volumes going back to 1966 it represents not only a unique bibliography of the health and social condition of Britain in that period but an equally unparalleled career achievement for a backbench member of parliament.

Although the Commons select committees are accorded status and respect, they have not altogether overcome their Cinderella image. They tend to exist in the parliamentary backwaters and to be shunned by career minded politicians. Often their recommendations are modest and practical rather than radical or controversial. Either way, ministers and departments find their reports easy to sidestep whenever they wish to do so. On the other hand, the select committees have developed a maturity and are here to stay.

Queen of select committees

Mrs Short, the queen of select committees, says: "The chairman has a considerable influence in the direction of the work and how the whole thing is shaped and progresses." In the United States chairmen of congressional committees are powerful figures. Harry Truman made his mark that way. At Westminster, too often, it is for those on the way out rather than the way up, though Mrs Short is the outstanding exception.

She entered parliament in the heady days of 1964 on what was then a left wing ticket. Her decisive moment came early when she turned down a job as a government whip, the first step on the ministerial ladder. She recalls: "In these days, whips could not

speak or put questions down. I was having such a marvellous time speaking in debates and chairing the estimates committee. I would have to give up that and be silent. It was not me."

On her years on the select committee she says: "There is no suggestion ever that my committee is a mouthpiece of the government. We are able to appoint first rate advisers and we choose them. Nobody does it for us. We exercise a good deal of autonomy and can travel where we like at home or abroad. I think our reports have been very well balanced with no tinge I can recollect of party political bias. Ministers do take note and they have to respond to every recommendation. It puts the department on its toes."

Mrs Short's retirement ends a link with the foundation of the National Health Service. In her early years she was a disciple of Aneurin Bevan in a group known as the Second Eleven. Her interest in health care, as a local councillor in Hertfordshire and Watford, led to appointments to hospital management committees and experience of the NHS. Thirty years ago there were the same problems of allocating resources—"nothing changes; it just gets bigger and more complicated."

What would Bevan have thought of it today? "Nye would not have liked a lot of things that happened. He would have been absolutely staggered by the increase in prescription charges. I think he would have gone along with the introduction of technology into medicine. But he would have been campaigning for less money going into keeping people unemployed."

Mrs Short doubts if a free service will continue if Mrs Thatcher is returned for a third term: "I cannot see free prescriptions coming again. There is nothing to stop her introducing treatment costs if she has to look for more money. Will there be charges for outpatients or doctors' visits? I am not saying that is what Mrs Thatcher will do, but it may be an alternative to cutting back on the health service."

Her own view is that the NHS is underresourced and poorly managed in many areas. Either the oversize regions should be broken up or if they are to remain they should be given adequate management and administration to let the chairmen do the job they are supposed to do. Too many general practitioners work too long, she believes, especially in rural areas. In addition, she finds that community care is not working and it may be that regions will have to give up funds to provide for local authority housing and care centres.

If there was time Mrs Short would have set her select committee on to tackling an inquiry into smoking and alcohol, including policies on taxation and health education. It would have evoked a ready response. Meanwhile, her parting word is characteristically to the witnesses who, after all, have provided the raw material for the long list of Short reports: "Witnesses feel we have done them a favour by inviting them. I feel they have done us a greater favour in helping us to get the evidence right."

Last week I wrote that Mrs Thatcher's election battle cry will be to put the customer first or, in the NHS, the patient first. Labour is doing much the same. Its health spokesman, Michael Meacher, now promises a bill of rights for patients. Among the rights will be guarantees of treatment with "skill, care, and consideration," rights to choice (including a second medical opinion), access to medical records, and a right to have clinical matters reviewed by the health service ombudsman.

And no hospital or surgery would be without this patients' charter pinned to walls already much decorated with NHS graffiti.