LETTER FROM WESTMINSTER

Review body reports in PM's in tray

WILLIAM RUSSELL

This is the time of year when the chickens—in other words, the reports of the pay review bodies—come home to roost. First to arrive was the one on nurses' pay with a recommendation said to be 9%, which is way beyond the 3% figure that ministers have been talking about for public sector pay. The report from the doctors' and dentists' review body should have arrived by now, and there again there seems every indication of an award that simply cannot be given in full. But the nurses present a special problem. Last year was the first year of their pay body and as a result its report was honoured. But they are now in the real world. Mr Neil Kinnock, the Labour leader, asked the Prime Minister in the Commons if, as a matter of policy, she would support an award that at least would begin the return to the levels of real pay received by the nurses in 1980, and give an undertaking that in no circumstances would Mrs Thatcher finance any part of the award by taking money from the rest of the National Health Service.

Mrs Thatcher took refuge in the need for proper consideration of the reports—that is expected to take until early June—and on his mention of the levels of pay received by the nurses in 1980 to claim that the government had done much better by the nurses than the previous Labour one had. Mr Kinnock said that was because of the Clegg award and demanded to be told "without evasion" that she agreed that public money should be used to give justice and proper rewards to those who obviously deserved them. "This government honoured the Clegg award," Mrs Thatcher replied. "The previous Labour government, not having the resources, made empty promises which they left us to honour. This government honoured the nurses' award and reduced their working week from 40 hours to 37½ hours. This government found the resources for 57 000 extra nurses and midwives. You have a nerve even to ask that question."

It was a remarkable edgy exchange and indicates that the reports are proving possibly more than their usual headache. The nurses have the incalculable advantage of having the popular press on their side, being angels of mercy and all that, which makes it very hard politically to deal with recommendations to put up their pay with quite the same detachment as is possible with less publicly popular groups—like already "rich" doctors and dentists, whose awards can always be staged.

Mr Norman Fowler, Social Services Secretary, is still adding the final touches to his review of the social security benefit system, so Labour's decision to stage a full dress Commons debate on the welfare state was intended to signal alarm at what seems to be in store once Cabinet approval has been secured and all is revealed, probably later this month. The debate provided Dr Roger Thomas, Labour MP for Carmarthen, a general practitioner, with an opportunity to attack the government for causing demoralisation among family doctors. "The morale of the medical profession has not been so low for a considerable number of years," he claimed. "It is low not only among ancillary staff, who were badgered into submission when they tried to strike for better conditions in 1982, but among nursing staff, consultants, and general practitioners. The general practitioners, first hit by the deputising fiasco, then by the limited list fiasco, are now in an uncertain position. Since the

visit of the Minister of Health . . . to the Harrow private clinic we do not know what to expect with regard to general practice."

He said morale among consultants was also at a low ebb. They had to spend more and more time attending committees which did not achieve any improvement at the sharp end, and less and less time in the operating theatre or on surgical rounds. Dr Thomas said that 35 years after its inception there was "discontent, misery, and demoralisation" inside the NHS and it was time it was put right.

Not, however, so far as Mr Fowler is concerned. He painted the inevitably rosy picture, although with the caveat that it had never been part of his case to pretend that by waving a financial wand all the problems would be magically resolved at once. In terms of cash over £17 000m a year was being spent on the NHS, and the increased efficiency the government had secured was releasing substantial extra resources for patient care, he said. Last year health authorities in England, by managing their activities more effectively, had released an extra £100m for developing patient services, and he had approved plans for the coming year that would release a further £150m. More patients were being treated in the NHS than at any time, and the hospital building programme had been restored.

Evading the limited list

Some of the government's "good ideas" have produced their problems, and ministers have not been slow to react to the latest ploy by the drug companies to evade the limited list.

Mr Clarke told Mrs Renée Short, Labour MP for Wolverhampton North East, who had used the debate to paint a contrary picture of the NHS, that ministers would not hesitate to act against any doctor or pharmacist who continued to participate in attempts to evade the regulations for the benefit of the drug companies at public expense. He claimed that one company had actually issued rubber stamps listing the generic ingredients of a scheduled proprietary pain killer. The wheeze is simple. If the ingredients of a banned drug are not themselves banned prescribe the ingredients—the only possible drug meeting that list of contents will be the banned one, which will have to be supplied. Mr Clarke, however, claimed that the regulations allowed a pharmacist to substitute a scheduled drug only for one ordered by a non-proprietary name and that a list of ingredients was not a non-proprietary name, hence no substitution may be made. He promised that no pharmacist who had dispensed invalid prescriptions in good faith would be penalised, but that was it. Offenders will, at the very least, end up with a hefty bill to pay, and the drug companies are clearly going to have to think again.

Mr Fowler had not even mentioned unemployed doctors and nurses, Mrs Short declared. She conceded that resources had been allocated to the NHS, but the facts could not be glossed over. The problems remained. Staff were being sacked, wards were being closed, and waiting lists were lengthening.

It may not all add up, as Mr Michael Meacher, shadow Social Services spokesman, claimed, to a massacre of the welfare state—Mr Fowler would certainly resent that charge deeply—but there is no doubt that the problems are building up. I reckon that Mr Fowler's ideal world would be one in which he gets lots of kudos for his social security reviews and then in the next reshuffle this autumn is moved to new pastures, preferably Trade and Industry, which he is said to want very much. That would leave the green paper row to his successor.