LETTER FROM WESTMINSTER

Government's vague promises on drug misuse

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The Social Services Select Committee's investigation of the misuse of drugs has come up with a predictably bleak report. The committee has concluded that existing services to treat addicts are woefully inadequate to cope with the increasing pressure and that there is still little sense of direction in the government's preventive efforts. "Merely encouraging local and health authorities to create services out of existing resources will not work," it asserts. "The government must put forward a clear long term strategy for the coordinated development and maintenance of services for drug misusers. New money will be needed and projects of proven worth must be guaranteed adequate funding."

Well, indeed, that may be the case, but money, under this government in particular, is tight. There was certainly nothing in the response to the report by Mr John Patten, the junior health minister, to provide much encouragement. He uttered a series of vague promises, which in the end boiled down to the fact that ministers would be writing to regional health authorities individually to comment on the progress that they had made and to encourage appropriate further action. But he did say that he intended that there should be multiagency drug advisory committees for every region and district by the end of the year.

What the committee said, however, was, "Merely encouraging local and health authorities to create services out of existing resources will not work." It sounded as if it had a pretty good idea of how Mr Patten, the minister responsible for the problem (he gave evidence to it), was going to react.

The Home Affairs Committee has looked at the problem in a penal sense, recommending the use of the armed forces to stop drug pushers and smugglers and demanding punitive fines. It also warned of a crisis developing at great speed, and said that the position in the United States was already so bad that the country's resources could barely cope and had all their time cut out just standing still. That report made sobering reading, but there is no doubt that the report by Mrs Renée Short's committee is, if anything, worse. It says that treatment facilities are few, underfunded, often inaccessible, and always with long waiting lists. "Rehabilitation is provided, if at all, by voluntary organisations unable to plan ahead for lack of secure funding. . . . Experienced staff are in very short supply. Drug misusers and their families do not know where to turn for help. General medical and social services are too often unable or unwilling to become involved. Many drug misusers end up in prison where they are likely to receive no help at all."

On the part that general practitioners can play, the committee says that there is no reason why a general practitioner, with adequate training, ready access to specialist advice, and social support for his patients comparable to that which clinic attenders receive, should not prescribe oral methadone on a reducing basis if he considers it to be a necessary part of treatment, and every reason why he should. It recommends that the DHSS should examine the feasibility of making some additional payment in respect of treatment given for addiction to drug misusers on their list for those general practitioners who have undertaken special additional training in the treatment of addiction, and that family practitioner committees, in conjunction with health authorities and social services departments, should

regard as a priority the encouragement of general practitioner services to drug misusers.

It also recommends that the DHSS should explore, in negotiation with the pharmacists' representatives, the possibility of extending the use of a multiple prescription form to general practitioners, and that the Home Office and the Department should urgently review the licensing of doctors in private practice. So far as prescribing practice is concerned, it calls for fresh guidance from the General Medical Council and commends the warning by the council that it will take a grave view of cases of irresponsible prescribing.

But in the end it all boils down to cash. The committee calls on the DHSS to create a central fund for services for drug misusers to which regions could apply.

Richard Hickmet, Conservative MP for Glanford and Scunthorpe, has received a reply from Mr Kenneth Clarke, the Minister for Health, which consultants might take heed of. The tone is sharp, to put it mildly, and, given some of the recent stories about moneys not going where perhaps they ought, the reply should not be ignored. Mr Hickmet had asked about policy towards the treatment of private patients by consultants within NHS hospitals, and about waiting lists possibly being artificially prolonged to encourage patients to have operations performed privately.

Mr Clarke condemned that as quite unacceptable. While there was, he said, no evidence to suggest that the practice was widespread—the significant point there is he did not deny its existence—he would expect health authorities to investigate thoroughly any allegations received, and to take a look at their lists to see if they were long and whether that was a cause for concern.

Mr Hickmet, who has been engaged in what he admits is a "fishing expedition"—that is when an MP tables questions in the hope of unearthing he is not sure what—seems this time to have hit on something.

Powell's last word

Mr Enoch Powell may have had his hopes for his Unborn Children (Protection) Bill frustrated in the Commons, but he still managed to have the last word on the matter. The Friday debate last week was on the government's policy for science, usually an opportunity for Westminster's computer buffs to display their knowledge and baffle the shorthand writers with their command of jargon. But Mr Powell, gagged the preceding week by the way the procedures were used, seized his chance to make one of the speeches he might have made previously.

He argued that nobody was doing the sort of work on embryos that his Bill would have banned and accused the Warnock committee of "shoddy investigations" and of failing to ask some pertinent questions about the purposes and the benefits for which it was indispensable to experiment on human embryos.

He also claimed that Mr John Biffen, leader of the House, in his reply to people demanding legislation along the lines favoured by Mr Powell had committed the government, when in due course it did bring a Bill forward, to leaving it "to the individual consciences of MPs" and that no collective view of the government would be formed. Mr Powell took that as meaning that the legislation would have to reflect his Bill, and argued that the work of the Warnock committee was coming to pieces and no longer offered a basis on which tenable or defensible legislation could be founded.