LETTER FROM WESTMINSTER

Welcome truce over deputising

WILLIAM RUSSELL

A deathly hush has fallen on the battle royal over the government's plans to stop the abuse of deputising services by some general practitioners that has broken out between Mr Kenneth Clarke, the Minister for Health, and the BMA. It seems to be by mutual consent. Negotiation is now the name of the game, so both sides have decided that it is better to hold their peace—though the Royal College of General Practitioners has broken the temporary silence with its call for an independent inquiry (p 421). The decision by the *Daily Express* last week to expose the guilty men in a major series claiming to show that far too many general practitioners had not only opted for a 9 am to 5 pm life but could also make a profit out of not being available to their patients at night or at weekends was not entirely welcome to Mr Clarke. It may have backed up what he has been claiming, but it could only ruffle feathers that he had been trying to smooth. The paper's claim that last year two million patients rang for their family doctor and were visited by a total stranger is the kind of charge that leaves mud behind. So talking about changes is certainly a good idea.

The man who started the great deputising row, Mr Christopher Hawkins, Conservative MP for High Peak, has his own reservations about the exposure. He also insists that the fears that the profession has expressed so far about Mr Clarke's proposals are based either on not having read the consultative document, or misunderstanding what he himself has been saying. He says that taken at face value the proposed measures are too tough, and he is critical of the way the document was written. It bears, he reckons, the stamp of the Civil Service rather than of Mr Clarke. What the profession should realise is that it may make extensive use of deputising services, provided that it can make a reasonable case for doing so to its area committee, and that this is really all that is wanted.

He does not believe that doctors with a good case would be stopped from using deputising services, but just as they have to see the new arrangements as fair and reasonable, the public must also feel that it can get adequate health care at night. Nobody wants doctors to be overworked or to feel over-regulated, but abuses there have been and something must be done.

Mr Hawkins first raised the problem of abuse of deputising services with Mr Clarke during the election campaign when the minister was visiting his constituency. Mr Clarke said then that he must be exaggerating, that he could not believe that it was as bad as was being suggested. Mr Hawkins set about finding out and claims Mr Clarke was "stunned" by the evidence. The result was that the family practitioner committees were asked to report on the subject, and Mr Hawkins compiled a dossier of his own. Together they proved conclusive and Mr Clarke decided to produce his consultative document, whereupon the profession leapt to its own defence.

According to Mr Hawkins, the good doctors, the majority, do not realise what some of their colleagues have been up to. "Some doctors were upset by my campaign until they saw the evidence," he says. "We cannot go on with a system where members of the public, if they hear they are going to be put on to a deputising service, are worried. The consultative document has been issued to make absolutely sure what is done is sensible and fair to all." "Nobody needs to threaten to leave the health service because of it," he adds.

"All they need do is make constructive suggestions on how to protect the public without harming doctors." He believes that if the profession went through the proposals piece by piece nobody would object to the reforms that he asked for in the quality of the deputising services. "They were merely to bring the weak up to the standard of the good," he says. "And since doctors are legally responsible for the actions of their deputy, they should want them as much as I do."

Ministers have to know patients are visited in a reasonable time, and for that an adequate system of monitoring and control is needed. As for those who think that ministers have no right to interfere in the behaviour of independent contractors, Mr Hawkins says that he does not share their view. A minister's job is to protect the public since it is, after all, a national health service. He insists that there is no proposal to ban the use of deputising services by partnerships or group practices of more than two doctors. Everyone has to get round the table and agree on the answers. Doctors, he considers, have once again over-reacted, just as they did over the so called impact of the public spending cuts on the NHS. Even doctors who filled in as deputies at weekends and in their free time, because they wanted the money, had admitted to him that there was something wrong with a system that allowed them to do so.

Minister's confidence

Mr Clarke's willingness to listen was signalled last week in the statement he issued after the General Medical Services Committee had said that it had serious objections in principle to restrictions on the freedom of a doctor to arrange the provision of his services to his patients in whatever way he judged appropriate, consistent with his basic obligations under his existing contract. The minister agreed to have immediate discussions about this specific area, including the danger of making deputising services non-viable, and to take the findings into account along with those comments on his general proposals before drawing up the necessary circular. Mr Clarke seems confident that at the end of the day he will get some of what he wants and that the abuse will be stopped. He had better, because if he does not the impression will be left that once again a vested interest has howled loudly enough and has been given its way for the sake of peace and quiet.

Happily none of this applies to Scotland, where the use of deputising services is far less, being confined mainly to Greater Glasgow and Lanarkshire, and where Mr John MacKay, the Scottish health minister, is planning no action, although keeping a weather eye on the matter.

The Scottish Health Service Planning Council is doing some work on the arrangements for out of hours emergency health care, and its report is expected in the spring. It could have some bearing on whatever Mr MacKay decides to do, although should he think that something needs to be done urgently he would not wait until it was in his hands. But for the moment no complaints about abuse of deputising services have been received. The figures show that on 1 October 1983 some 27% of unrestricted principals in Scotland had permission to use a deputising service. Greater Glasgow had a figure of 81%, but in some areas, such as Ayrshire and Arran, the Borders, Fife, Forth Valley, and Grampian, there were none. That is interesting, since presumably some doctors somewhere manage without and without complaints.