Letter from Westminster

Government blamed for pay dispute

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The Commons debate on the National Health Service pay dispute (p 1883) provided Mrs Gwyneth Dunwoody, Labour's health spokesman, with a splendid opportunity to castigate Mr Norman Fowler, the Social Services Secretary, for his attitude towards the National Health Service unions over the dispute. She accused him of behaving like a Victorian iron master lecturing the poor on their duty and claimed that the Government had driven normally moderate health workers to near desperation. She also accused the Government of precipitating the current dispute, and alleged that the NHS was sliding into a slough of despond where it would remain—an underfunded, overstretched repository of low-paid workers and underprivileged patients. The remedy was in the Government's hands, she added. Health Service workers were not natural material from which militants were made. They had an unanswerable case for a pay increase at least commensurate with the rate of inflation.

Unless more money is forthcoming from somewhere it is difficult to see how ministers are going to solve the problem. Mr Fowler insisted that there was none. He told MPs that it was not possible to provide massive new pay offers plus new hospitals, new wards, and new staff. It seems that the NHS budget, which at £12 000m is massive, is finite. There is not, as some people in the NHS apparently believe, another parcel of money available to ministers to draw on. The 12% claim plus the other improvements on hours and holidays added up to something like £700m compared with the £320m that is the cost of the current offer, he said.

The suspicion does, however, persist at Westminster that ministers will continue with the divide-and-rule policy that they embarked on when they attempted to make nurses and midwives a special case with the 6.4% offer. It is admitted now that what looked good when the Royal College of Nursing started its ballot probably looked less good by the time the four or five weeks of voting reached its climax—other awards had become known. There is also a suggestion that they have always held back something just in case, so that an additional 1% would be possible out of the present parcel of money. It looks as if something more will have to be found if the ancillary workers are to be placated.

The fact that talks about new permanent arrangements on pay for the nurses have got off to such a good start could be an indication that somehow or other they will be persuaded to accept a slightly improved pay award. Whatever the outcome of those talks, it does seem that the least favoured option being discussed is an equivalent for nurses of the Doctors' and Dentists' Review Body. Rather it will be a machinery for feeding into the Whitley Council the sums available for sharing out. The task of devising a new arrangement is hideously complicated, but ministers are convinced that they have—after a lot of pushing and shoving—got things moving at last and that whatever they come up with will help ensure a more peaceful future for the NHS. So far as the other unions are concerned, should they feel

like talking about something similar for their pay then that could go on the agenda and welcome.

Privatisation loses appeal

One interesting shift of opinion among ministers is that privatisation no longer holds quite the same place among their pantheon of policy gods as it once did. Mr Fowler, as Transport Minister, was, of course, quite convinced of its virtues and sold off all sorts of assets. But now it seems that privatisation of things like catering facilities or portering has to be looked at carefully. If a great killing is not made in the first year of such a change then possibly it is a change not worth making. That is not to say that they do not believe that there is scope for improved efficiency inside the NHS—just that the Rayner review and the new regional accountability system may point the way ahead instead. In the immediate term privatisation does not, it seems, have a part to play.

Faint praise from Mrs Dunwoody

The Government's decision to provide £2.5m to help general practitioners and family practitioner committees buy and develop computer systems announced jointly by Mr Kenneth Baker, the Minister for Information Technology, and Lord Trefgarne, the junior Health Minister (p 1884) was damned with faint praise by Mrs Dunwoody. She complained that it was not enough. "If this is a serious attempt to help improve the efficiency of general practice then the Government should commit enough funds to make it a viable project," she told me. As for the decision to limit the systems that will qualify for use in 150 general practices chosen for an experiment in the use of micro computers to only two firms—CAP Ltd and British Medical Data Systems—she did not think much of that either. "It is an extremely unhelpful decision," she said. "At the present time this industry is burgeoning at such a rate that there are a great many good British firms capable of offering excellent equipment."

The use of the computers by the 150 GPs to record patients' registration details will be monitored over a three-year period. Ministers are still working on the selection procedure, and guidance will be issued later this month telling GPs interested in taking part how to apply.

A doctor at the top?

There is many a slip in politics, but the fact that Dr David Owen collected 12 supporters for his candidature for the Social Democratic Party leadership from his colleagues in the Parliamentary Party—only MPs may nominate a candidate, who has to have the backing of 15% of the party's MPs for the nomination to be valid—means that he is a far more serious threat to Mr Roy Jenkins than had been expected. Carry all the "ifs" on a little bit, and it could be that he will be the first medical man to lead a political party in this country.