Letter from Westminster

What to do about inner cities

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The problems of the inner cities, particularly London, where elderly general practitioners insist on carrying on too long, often singlehanded from inadequate premises, are well known. Professor Acheson has just met Mr Geoffrey Finsberg, the junior Health Minister, to discuss his as yet unimplemented report on the problem, and the Opposition, noting that so far the Government has done nothing about it, is beginning to pile on the pressure. It has, after all, been around for a while. Mr Roland Moyle, the former Labour Health Minister, has been hard at work putting down questions trying to elicit some response—so far with little result. He told me that it was difficult for young doctors to come to London to practise when they were in the prime of their practising life. "There is no way we can force GPs to retire," he added. "Acheson has come up with some suggestions as to how the situation might be remedied, but the Government have given no indication whether they approve or reject or accept with modification his report. It is about time they decided what they are going to do."

If lack of cash was the obstacle, and this was the excuse ministers always used, then he believed that Mr Kenneth Clarke, the Health Minister, could reorder the DHSS priorities so that spending on inner London was given priority over that on the home counties. "They have plenty of fat," he said. It is a point of view that Mr Clarke apparently shares.

Give go-ahead on Acheson Report "as soon as possible"

Mrs Dunwoody also criticised the lack of action on Acheson. "The Government should act immediately on the report's recommendations," she said. "They should show that they care about the quality of health provision in the inner cities. It is very noticeable that those most in need are those most at risk." She conceded that this was not a new conclusion, but said that it was becoming ever more relevant and that the Government could show that it really meant all the things that it had said about health care by giving the go-ahead on Acheson as soon as possible.

The Labour Party's plans for general practice in the inner cities are set out in the *Programme for 1982*, the policy document that will form the basis of the election manifesto if this year's annual conference approves it. That holds out various courses of action that may well be unpalatable to many GPs. Labour proposes to overcome the problems of inner-city practices by establishing a scheme to retire elderly GPs. It would also introduce financial incentives to improve the availability of younger doctors and change the present rules on overdoctored areas to allow more doctors into deprived

areas. New incentives for community nurses and other supporting staff to work in unattractive areas are also promised.

Anger over RHA appointments

The Opposition has demanded the resignation of Mr Norman Fowler, the Social Services Secretary, over his decision not to reappoint six regional health authority chairmen. The "purge" was bitterly attacked by Mrs Gwyneth Dunwoody, Labour's health spokesman. She accused him of having done it in a fit of pique because four at least had dared to point out that the current NHS pay offer was unjust, discriminatory, and divisive. She asked Mr Fowler for his reasons, and was told that it was because the current appointments in 14 RHAs were due to end on 31 July. "The new appointments, which include the reappointment of eight of the existing chairmen for varying periods, reflect my concern to bring to these posts persons with a broad range of proven management experience, both public and private," Mr Fowler added.

Mrs Dunwoody was not convinced. She said that she had assumed that he would at least attempt to rationalise his cynical action, but this limp reply proved that in his efforts to ingratiate himself with the Prime Minister he was willing to sacrifice not only those who work in the NHS but also its efficient management. "This was a childishly brutal reaction to his desperate position in the pay dispute," she added. "The time has come for him to resign." Her rage was all the greater because Mr Fowler clearly found answering her question a rather tricky thing to do—she got two replies: the substantive one, such as it was, and one the day before saying he would let her have a reply as soon as possible. Now that kind of answer is only given when ministers need time—or those who draft the replies need it—to come up with a convincing answer. Since the question followed the announcement of the changes, and they must have been the result of considerable consideration, Mrs Dunwoody has some grounds for her ire. The announcement of the changes said what the answer said—a week before the answer.

Mr Fowler was not giving much away when he gave evidence last week to the Social Services Select Committee on public expenditure. Perhaps the committee just had an off day, or maybe it was because its chairman, Mrs Renée Short, Labour MP for Wolverhampton North East, was not there, being a victim of the rail strike. Or it may just have been that public expenditure is a devilishly complicated subject. But the committee did elicit one or two scraps of information. Mr Fowler, for instance, denied that there was any danger of hospitals or wards being closed as a result of having to find the money to pay for the improved pay offer to the nurses and the ancillary workers. (My dictionary defines ancillary as subservient—presumably the compiler had not heard of NUPE or COHSE.) The major charges would be on new services coming on stream and that might mean new people. More on pay meant less for development, and fewer jobs would, therefore, be created this year.