Letter from Westminster

Swedish training and distinction awards under scrutiny

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The judgment of Solomon facing the Social Services Committee about which I wrote last week (p 1088) will be made some time in June. Mrs Renée Short, the chairman, more a Sheba than a Solomon, hopes the committee will finish work on its inquiry into medical education early that month, with Mr Patrick Jenkin, Social Services Secretary, among the last witnesses. Her aim is to get the report written and published early in July so that it will be ready to be included in Mr Jenkin's holiday reading. Getting it out early in the summer also means that colleagues, not to mention the profession, will have time to read and digest its proposals properly before Parliament debates it, probably during the autumn spillover period. Mrs Short expects it to be a pretty frank affair, though at this stage she cannot pre-empt its findings by suggesting what it will contain. The committee still has to get down to the job of sifting the evidence and drawing conclusions. But the message it will contain is already clear enough. The profession, having failed to put its own house in order, even though it recognises the need and agrees on some of the goals to be achieved, is going to be told how to do it.

The committee has two out-of-town trips ahead. One is a three-day jaunt this month to Aberdeen, Edinburgh, and Glasgow, with a stopover in Newcastle on the way back south. In May there is a five-day trip to Sweden, where the system of medical training is said to be akin to our own but not to be bedevilled by private practice as is the NHS. As a result the Swedes do not suffer from the siphoning off of consultants' time as we do. In Sweden the committee hopes to visit Uppsala, Lund, and Gothenburg. One of the reasons for leaving Mr Jenkin pretty well until last is that when it sees him the committee will have a pretty clear idea of what it wants done. It will all depend on money or on a ministerial willingness to issue the necessary guidance about using existing resources in a different way from health authorities. So as well as taking evidence, it looks as if there will be a little missionary work going on.

Meanwhile, the taking of evidence proceeds apace. The most recent person to fill the hot seat has been Sir Stanley Clayton, chairman of the Advisory Committee on Distinction Awards. He put up a firm defence of the system, which was introduced by Aneurin Bevan, the founding father of the NHS. It had been set up on the grounds that if recruitment to and the status of specialist practice were to be maintained specialists had to feel that more than ordinary effort and ability received an adequate reward. Sir Stanley clearly thought that distinction awards were the best way of achieving this. He also insisted that no award was ever made, or withheld, because of the opinion of one person. The membership of the committee being 16 or more, he argued that an unbalanced judgment by an individual was easily opposed. It was also untrue that awards were made for mere seniority. Nor was there a fixed quota for any discipline or region.

Sir George Young, the junior Health Minister, has been giving a little more information about the Government's plans to charge foreign visitors who come from countries with no reciprocal health agreements for using the NHS. In a series of answers to questions from Mrs Short he assured her that after consultations with NHS representatives he was satisfied that hospitals could ask a few simple questions to establish whether a

patient was entitled to free treatment. To avoid offending susceptibilities consultations are to be held with ethnic minority organisations about the form of words before the Government reaches a decision, he said. Sir George added that the questions would be about the patient's home address and would be posed in a non-discriminatory way. It was the sort of question hospitals often had to ask now.

Broad guidance is to be issued to health authorities on the operation of the scheme, which, all being well, is to start in the autumn. Sir George added that certain categories of people on the borderline would be exempted by the regulations and that that should reduce the area where uncertainties of interpretation of what constituted ordinary residence might occur. At least he has Mrs Short's support, provided there is no hounding of people who come here legitimately. "I feel those who do not have a reciprocal arrangement should do precisely what we have to do when we go abroad—take out insurance," she told me. "I do not see why we should have an open door for people who come here to abuse the NHS. I have no sympathy for people who come to rip it off."

Mrs Short seeks a reprieve

I don't want to turn this into the Renée Short fan club's newsletter, but she was also active during Prime Minister's question time, when she raised the losses being made by the Royal Postgraduate School at Hammersmith—£914 000—and the London School of Tropical Hygiene and Medicine—£750 000. These losses are the result of the fall in the number of overseas doctors following the Government's decision to increase student fees. In fact, because the Prime Minister was abroad, she did not get very far—but nobody ever does with Mr William Whitelaw, who was deputising. On the other hand, she got the point across. Mrs Short raised the issue because she believed a meeting between London University's Vice-chancellor, Lord Annan, and Mr Mark Carlisle, the Education Secretary, was imminent, and she wanted to see if some Prime Ministerial pressure might not be brought to bear on Mr Carlisle to give the postgraduate schools a reprieve.

"It would be a scandal if our best institutions had to close down," she said. "They cannot stand losses of income as enormous as that. I really do think our medical education is the best in the world, and this is urgent." She was possibly jumping the gun a little, in that the meeting has still to take place, but it could happen next week.

Statistics, it is well known, can deceive, and Dr Gerard Vaughan, the Health Minister, admits as much in a letter to Dr Roger Thomas, Labour MP for Carmarthen, who is still a practising GP. It seems that the total number of doctors registered as seeking work on the professional and executive register, the best indicator available, was 634 on 21 January. This figure, Dr Vaughan admitted, might include some doctors between jobs who were waiting for particular jobs or jobs in a specific location, and some doctors already retired who had registered to draw unemployment benefit temporarily. "The register only records what applicants state, and it is left to employers to check the veracity of qualifications claimed," Dr Vaughan added. "The list may, therefore, include some who are not doctors."