Letter from Westminster

Labour's planned Utopia

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The growth of private medicine under the present government is one of the main targets on which Labour's health policy is focused. This policy is now set out in the party's campaign document, *The new hope for Britain*, which will be the foundation of the election manifesto. The 15 000 word document is introduced by Mr Michael Foot, the Labour leader, with a bitter attack on the Prime Minister and her advocacy of Victorian values. Mr Foot accused Mrs Thatcher of extolling them without even a passing comprehension of the human suffering and indignity that the mass of the people had to endure in that predemocratic age. The Labour movement had come into being to vanquish the hard, pinched values of Victorian Britain, a world of ruthless devil take the hindmost individualism. The Labour Party had created the National Health Service in the teeth of bitter Tory opposition, he added, promising that it would come to its rescue when in power and make it worthy of those who founded it and served in it, and of the patients who needed it most of all. "It is a common sense example of democratic socialism in action," he said.

Labour leaders, particularly Mrs Gwyneth Dunwoody, shadow health spokesman, are convinced that the Conservatives will close down the NHS after the next election—at least, that is how they see the policies being pursued by Mr Norman Fowler, Social Services Secretary, and there is not all that much that he has seemed able to do to dispel the impression. It is, of course, fostered for all it is worth in the campaign document, which asserts that the creation of the NHS is one of the Labour Party's greatest achievements.

"It now faces a double threat from the Tories: a lack of resources for decent health care; and the active encouragement of private practice. Labour will act to defend the basic principle of the service. We will ensure that it is free at the point of use and funded out of taxation and that priority depends on medical need not ability to pay." It then pledges that Health Service expenditure will be increased by 3% a year in real terms, which is what Mrs Dunwoody wanted a commitment on, and that a fairer distribution of these resources at both regional and district levels will be sought. Labour will also phase out health charges.

On private medicine it pulls no punches. The present expansion is said to be a serious threat to Labour's priorities in health care, and the promise that a two tier service where the rich can jump the queue will not be allowed to develop is given. "We shall remove private practice from the NHS and take into the NHS those parts of the profit making private sector which can be put to good use," it adds.

The policy's overriding aim is said to be to reduce the inequalities in standards of health care for all who need it, and to that end eight goals are listed. They include giving greater emphasis to prevention, developing services within the NHS and the local authority services for those who require long term care like the elderly, the mentally handicapped, and the disabled, and the improvement of the inner city primary health services.

In addition, the Labour Party will improve antenatal services, introduce an independent complaints system into both hospitals and the family practitioner services, ensure that community health councils have power and facilities to represent the community fully, abolish special charges for overseas visitors, and take a major stake in the pharmaceutical industry to ensure that the drugs available are safe, effective, and economic. The section concludes: "While continuing to defend and respect the absolute right of individual conscience, we will improve NHS facilities for family planning and abortion, including counselling and day care, and we will remove barriers to the implementation of the existing right of choice for women in the termination of pregnancy." That last will probably mean lending a helping hand should some backbencher take up the gauntlet, rather than introducing legislation of its own. But the passage is part of Labour's commitment to a better deal for women—they are to get a Cabinet minister whose job will be to promote equality between the sexes—so it could lead to legislation.

Turning to the section on enhancing democratic rights, the document promises to bring in data protection legislation to prevent the abuse of confidential information held on personal files; and, subject to certain exceptions, to allow individuals access to their personal records. That is, of course, the legislation that will replace the Police and Criminal Evidence Bill, which has now ended its committee stage in the Commons. Mr Roy Hattersley, shadow Home Secretary, said at the end of the proceedings last week that the new legislation would repeal intimate body searches and ensure that intimate body samples were taken only by consent and by a doctor.

Prospect of changes on data protection

The Data Protection Bill, which started in the Lords, completed its stages there last week and will reach the Commons after Easter. It is not as controversial as the Police Bill, but its provisions on access to information have upset the BMA, as Lord Avebury, the Liberal peer, said during an attempt to have it amended to deal with the criticism about possible disclosure to a third party.

"The BMA, of course, would like to have absolute confidentiality, but that is something we shall certainly not achieve in this House," he said. "But the minister may find that when this Bill goes to another place these provisions will excite a little more wrath from the outside world than they have done so far. Just as with the Police Bill, where people have woken up very late in the day to the iniquity of what the government are trying to do, I believe that in the case of this Bill, after the BMA and other professional bodies have started to make representations on these provisions, the same will occur. I believe that the government will have a much tougher battle in the other place than they have had here."

What people would want to know, not just the BMA but most patients and others whose records would be kept, was whether they could give information to a hospital in the certain knowledge that the hospital secretary would not be disclosing it to exempt users for all sorts of other purposes.