LETTER FROM WESTMINSTER

Consensus out of crisis?

JOHN WARDEN

The Easter break marks only a pause in the great debate which has so far characterised the 40th anniversary year of the National Health Service. It brings to an end a winter of distraction, if not discontent. Is there a spring of discovery to follow? The curious feature as MPs dispersed on Maundy Thursday was a distinct feeling that the air had been cleared.

After weeks of turmoil there is a better idea of the political realities. The first of these is that the government is not going to capitulate to campaigns for amorphous amounts of cash. In its view the NHS suffers from no more than an occasional cash flow problem that can be met by relatively minor adjustments from time to time. From this there follows an expectation that the doctors' and nurses' pay awards this month will to all intents be fully funded. Also it is clear that Labour has shot its bolt for the time being. It is long on protest and short on policy.

So much for the small change of controversy. The big pay off is to be the "fundamental review" of the NHS, possibly in time for its 40th anniversary on 5 July, though more likely after the summer. Even that far ahead, MPs believe they can discern an emerging pattern. With little that is positive to go on there is nevertheless a collective impression forming of the way forward. The Secretary of State, John Moore, has kept silent about the review, yet the components of a package are seen to be falling into place without his intervention, almost as a byproduct of the public discussion.

The Westminster consensus is that the radicals are in retreat, meaning that solutions based on an insurance system or the introduction of health vouchers as a means of funding health care are out. So also it seems are new methods of delivering health care in the fashion of American health maintenance organisations. On the contrary, political opinion is hardening that Mr Moore, essentially a cautious man, will produce reforms that are perceived to be on the modest side.

Medical opinion, however, may well have a different perception of the Moore package when doctors find themselves the main targets of Mr Moore's efficiency blitz. The implications for clinical practice can be assessed more appropriately on other pages if and when the time comes, but to seasoned Thatcher watchers the politics of it is clear. The underlying philosophy is that for the NHS to be efficient everyone should be made aware of exactly what it costs—the taxpayer in general and the patient in particular.

The practical way for Mr Moore to achieve this brings us back to insurance funding or vouchers, for which it is believed the public is not yet ready. As a start, therefore, the drive to be cost effective must be directed at the NHS itself—to health professionals in general and doctors in particular. In other words, if the public is not quite able to face reality the drive must begin with doctors. What is the practical way to achieve this? Look no further than Mr Moore's growing enthusiasm for performance indicators.

They do what they say, which is to compare variations in performance at every level of health care. The aim is to extend the approach to each hospital, right down to unit level where the clinical decisions are taken. Mr Moore's aim, by the end of next year, is to include all doctors and nurses in a "medical audit" of the resources

they use under a system of peer review. That is the shape of things to come.

Gift from the Lords for Mr Moore

It will confront Mr Moore with difficult presentational problems, to say the least. In that respect he must have been encouraged by the Lords debate on the NHS on 23 March when medical peers delivered gift wrapped exactly what he wanted. What better token of the profession's good will could Mr Moore have wished for than this from Liberal peer Lord Winstanley: "We must at long last embark upon cost-effective studies in relation to medical procedures. That is something on which we have always turned our backs. We must see which investment brings the maximum return in terms of the relief of human suffering and the saving of lives."

Listen, also, to Lord Hunter of Newington, a founder member of the NHS, who advocated more sensitive medical management and added: "It seems that the medical profession, aware of the problems facing the country, is prepared to cooperate in the whole matter of medical audit in a way that it has never been prepared to do before." He believed that the greatest single challenge facing Mr Moore was to evolve with the profession the proper approach to costing treatments and initiating change.

A medical academic, Lord Perry of Walton, issued a different challenge—that doctors should become the leaders which the NHS never had. To Lord Perry the consultant should reign supreme. The hospital staff were there to help the consultant look after the patient. It therefore followed that the consultant ought to control the distribution of scarce resources and decide how they should be used.

"In a hospital the only person who can command loyalty and respect from all the staff and provide leadership is one who is drawn from the ranks of senior consultants." Lord Perry thought consultants should run the hospitals and said that morale in the NHS would not be restored until it was headed by a professional.

But are consultants fitted to so exalted a role? Reason for doubt came from one of their number, Lord Trafford. He said that generally speaking it was doctors who had resisted the idea of being leaders in the field of resource management. So the hospital sector was neither managed nor led. The doctors who dictated the level of demand were mavericks, in the sense that there was no coherence in what they did or in the relationship of one activity to another. "This is not a criticism of the doctors but a fact of life," he said.

Lord Trafford's remedy was to suggest setting up a health inspectorate on the lines of the inspectorate of education: "We should have a body which can report, monitor, evaluate and tell us the difference between what one authority and another may do."

This idea was passed over by junior health minister Lord Skelmersdale in winding up the debate, though he hinted that their lordships' enthusiasm for doctors to run everything had perhaps got the better of them. The DHSS's line is that it will remain the responsibility of general managers to lead colleagues from all disciplines in searching for efficiency.

It could be said that the past four months of non-stop scrutiny of the NHS began with the doctors, and the December declaration from the presidents of the medical royal colleges. It has proceeded through episodes of dying babies, striking nurses, and street demonstrations. Now it has come full circle back to the doctors, with whom in the end the buck is likely to stop anyway.

JOHN WARDEN is a parliamentary lobby journalist