Consultants vote in favour of revised contract

Zosia Kmietowicz *London*

Six out of 10 consultants in England who voted have agreed to a new NHS contract that will change the way they work.

Slightly fewer specialist registrars were in favour of the new brokered deal, with 55% of those who voted saying yes.

The result is a reversal of the first ballot on the new contract last November, when 66% of consultants and 84% of specialist registrars rejected the offer (*BMJ* 2002;325:1053) and threatened to take industrial action if a better deal was not offered (*BMJ* 2003;326:1165). Altogether nearly 70% of the 29 000 eligible consultants took part in the ballot, and 37% of the 8500 eligible specialist registrars voted.

Dr Paul Miller, chairman of the BMA's consultants' committee, welcomed the result and admitted that the last few months of negotiations with the government have been tense but that ministers had failed to implement local contracts in place of a national deal.

"This is a much improved contract to the one offered last year, and I am pleased to see that most of my consultant and junior colleagues share this view. This result also gives a clear yes

to a national contract as opposed to local deals," he said.

Under the new contract consultants stand to see their pay rise by an average of 15%. However, doctors who devote a higher proportion of their time to the NHS could see their salaries rise by as much as 24%.

The major sticking point to accepting the original contract was the "excessive and inappropriate managerial control" over when and how consultants should work, which had more to do with reaching government targets than with the clinical care of patients, said Dr Miller. However, under the new deal the focus will be on "joint planning where consultants and managers sit down and work out what needs to be done," he said.

Consultants in England have until the end of the month to sign up to the new deal.

Results of the BMA's ballot of Scottish consultants are due at the end of the week. Hospital doctors in Wales will be voting on their contract over the next few weeks, with the results due in mid-November. Negotiations are still under way in Northern Ireland, with no date yet set for a ballot. □

Mr Nizam Mamode, chairman of the consultants' negotiating subcommittee, faces questions over the ballot result

Belgium to subsidise costs of contraception to teenagers

Rory Watson *Brussels*

The Belgian government is planning to provide hundreds of thousands of teenagers with monthly vouchers from 1 January next year to help pay for the costs of contraception, in a bid to reduce the number of unwanted pregnancies.

Each voucher will be worth €3 (£2.1; \$3.5)—the monthly cost of the second generation pill—

and will be available to about 372 000 young men and 357 000 young women aged 15 to 20 years. But the starting age may be raised to 16, the current age of consent in Belgium.

Distributed by the country's mutual health funds and family planning centres, the vouchers can be used towards the cost of any form of contraception. The

total cost of the exercise, which is one of the initiatives in the coalition government's draft budget for 2004, will be €5.29m.

Although the political decision has been taken, the government still has to work out final details of the scheme with doctors and pharmacists and ensure that adolescents are provided not just with financial help but also with practical advice.

The programme may also lead to a reassessment of the current situation whereby there is almost no reimbursement of contraception costs for the general population, except for the

first generation pill, which gets a 20% refund from the mutual health funds.

The scheme is attracting mixed reactions. Some people welcome it as a small social gesture in the right direction. Others wonder whether the vouchers will be a sufficient incentive for youngsters, who may be embarrassed by the subject, to go to family planning centres and chemists to make use of them.

According to Belgium's most recent statistics some 2200 abortions were performed on girls between the ages of 13 and 19 years in 2001. □