The biggest debate since the NHS was founded

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New leaders are advised to implement major change at the start of their term in power. Andrew Lansley, the new secretary of state for health, is certainly playing from the management consultant's script. Health experts have described the Con-Lib coalition's proposals for health as the most dramatic restructuring of our health service since the NHS was founded. When the new health white paper revealed that primary care trusts would be scrapped and budgets controlled by GP consortia, shockwaves were created by the extent of the proposals not the nature of them.

Indeed, this is not new thinking to readers familiar with GP fundholding. Clinician leadership has been a mantra of Conservative health policy in opposition. As has a preference for quality outcomes focused on clinical indicators rather than process measures. Yet the early GP fundholding experiments were inconclusive and a limited roll out. We now have a blanket national policy that many clinicians will view as simply another reorganization of the NHS.

In theory, clinical leadership is to be encouraged. Clinicians are eminently capable of acquiring the necessary strategic, management, and financial skills to control budgets and resources. A proportion of clinicians, the entrepreneurs and frustrated businessmen, will embrace this dramatic reform. Others will be ambivalent,

unsure how it will affect them and how they might cope. The remainder will be unhappy that their focus might be diverted from clinical care; a career in medicine was supposed to be about managing patients not budgets.

But whichever category clinicians fit into, they will require support. You might have the inclination but you probably won't have the time to delve into the finer dealings of your consortium. You might not even have the inclination. Medical school barely prepares doctors to treat patients; it certainly isn't any preparation for running a multimillion pound budget.

If the first question is who will support clinicians in running the new world, the second is who will provide them with the appropriate information to make sensible decisions about the population that they are responsible for? Private companies will be queuing up to provide solutions with huge pound – and dollar – signs in their hungry eyes.

The world has also changed for hospital specialists. Will the new system make them disempowered service providers to their colleagues in primary care? We want to hear your views. The editorial and essay pages of the *JRSM* are ideal channels for this explosive debate – the biggest healthcare debate since the inception of the NHS.