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MPs criticise waste of public money on suspensions

The House of Commons Public Accounts Committee has attacked the NHS for allowing too many doctors and other clinical staff to be suspended for as long as two years on full pay while disciplinary proceedings occur.

Between April 2001 and July 2002, 1063 clinical staff were excluded in England, 208 of them doctors, says the report.

"Astonishingly, there were 30 cases where exclusions lasted over two years," said Edward Leigh, MP and chairman of the committee, in his report.

"The annual cost to the NHS, at £40m [\$74m; €57m], is much too high. And very long cases can be damaging to the clinicians involved."

Five cases have each lasted for a total of 11 years and one of them is still continuing, costing the tax payer more than £2.5m to date, says the committee.

Limiting the exclusions to six months would save the public £14m a year, said the report.

The committee also criticises NHS trusts for issuing confidentiality clauses when staff resign.

Lynn Eaton *London*

The Management of Suspensions of Clinical Staff in NHS Hospitals and Ambulance Trusts in England is available at www.publications.parliament.uk/pa/cm/cmpublicacc.htm

Coroner criticised over conduct of SARS inquest

The inquest of the Hong Kong Coroner's Court into six health-care professionals who died while caring for patients during last year's outbreak of severe acute respiratory syndrome (SARS) has returned a verdict of natural causes.

The court heard testimony from 43 witnesses, including family members of the deceased, doctors, nurses, medical experts, and hospital executives. Witnesses told the court that they thought the health workers had

Risk factors for death in infancy persist into older age groups in England and Wales

Deaths of children aged between 3 and 8 years have been compared on a large scale for the first time in England and Wales with risk factors present at birth.

Statisticians at the Office for National Statistics did a linked analysis of birth and death records for children who were born between 1993 and 2001 and died before 2004 under the age of 8 (*Health Statistics Quarterly* 2004;(24):30).

A strong association between low birth weight and high mortality was found not only to exist during infancy but to persist in children aged 1 to 4 and, to some extent, even in children aged 5 to 7.

Another key factor determining infant and childhood mortality was maternal age at delivery. Children born to mothers younger than 20 had the highest, whereas those born to mothers aged 30-34 had the lowest mortality (1082 v 581 deaths per 100 000 children of the same age between 1993 and 1995).

Raghav Chawla *BMJ*

The report is available at www.statistics.gov.uk

inadequate protective equipment. But the coroner, Michael Chan Pik-kiu, told the jury that it had to return a verdict of natural causes if it believed that SARS was the cause of death.

Witnesses explained that although Tuen Mun Hospital had no shortage of supplies, medical workers were given one mask per 10 hour shift, had to turn gowns inside out and hang them up when they went on breaks, and had to clean goggles with disinfectant scrub and reuse them.

The verdict was very disappointing and deviated from normal practice, said Dr Kwok Ka-ki, the medical profession's representative in Hong Kong's legislative council.

Jane Parry *Hong Kong*

Practice based commissioning may not work for mental health

Plans to allow general practitioners to commission a wider range of mental health treatments will result in substandard care, a report published by the Sainsbury Centre for Mental Health has said.

The charity, which works to improve the quality of life for people with severe mental health problems, has condemned the UK government's plans to expand the practice based commissioning scheme under which individual practices, rather than

primary care trusts (PCTs), are responsible for directing secondary treatment into specialised areas such as mental health.

The government wishes to extend the scheme to include a greater variety of secondary care services.

The centre sees some benefits in allowing practices to take responsibility for a limited range of services, such as cognitive behaviour therapy and "talking therapy" for somatisation disorder and depression. But it questions the wisdom of individual practices taking direct responsibility for more complex and extended care.

Madeleine Brettingham *London*

Threat of new European legislation to health care exaggerated

The European Commission has forcefully rejected claims from the medical profession that draft legislation being negotiated in Brussels would pose a serious threat to the NHS. But it has admitted that the text now on the table must be reworked to remove existing ambiguities.

Margot Froehlinger, a senior commission official, told a public hearing organised by the European Parliament last week, "The commission understands the particular sensitivity of health."

Mrs Froehlinger was responding to concerns, raised by the BMA and others, that proposals designed to enable a wide range of professionals in the services sector to work anywhere in the European Union would limit the ability of national health authorities to set their own standards.

The European Commission insists that the interpretation misrepresents the objectives of the planned legislation. Mrs Froehlinger pointed out that under the services directive "every hospital, home for the aged, and medical practice would be entirely covered by the rules and regulations of the country in which it was located."

Rory Watson *Brussels*