Charity warns of “daunting challenges” for Iraq health system

Owen Dyer *London*

Iraq's Ministry of Health faces “daunting challenges” in its effort to rebuild the country's shattered medical infrastructure, according to a report released this week by the health charity Medact. “Even if the circumstances were much more auspicious, the difficulty of reversing this downward spiral could not be underestimated,” suggests the report.

The report mostly avoids allocating blame for the cumulative damage wreaked by dictatorship, three wars, and years of sanctions. It accepts, however, the findings of a recent study, published in the *Lancet*, which concluded that the invasion and its aftermath have led to an increase in civilian mortality of roughly 100 000 since March 2003. It adds that the 2003 war “not only created the conditions for further health decline, but also damaged the ability of Iraqi society to reverse it.”

Based partly on interviews with Iraqi and foreign health professionals, the report traces the decline of Iraq's health system not from 2003, but from 1990. After the Kuwait war, the Ba'athist

government increasingly abandoned its healthcare responsibilities and allowed creeping privatisation. This year's national health service budget of \$950m (£502m; €716m), which works out to \$38 per capita, compares favourably with the \$16m spent by Saddam Hussein in 2002.

From 1990, says the report, “the health system focused on curative, hospital-based care at the expense of already inadequate community services, health promotion and disease prevention. The net effect was that the health system failed to reorient itself to postwar needs and was poorly prepared to cope with the impact of the 2003 war.”

Among current positive signs are a recent national measles, mumps, and rubella immunisation campaign for school age children, which reports 97% coverage, and a dramatic rise in health workers' salaries. A doctor's monthly salary has risen from \$20 to \$120–\$180, and a nurse earns from \$60 a month.

Nevertheless, the doctor to population ratio is poor. Recent studies found 47 doctors per

100 000 population, less than half the ratio in neighbouring countries. The total of 16 700 civilian nurses for a population of 26 million represents an even more critical shortage, says the report.

In more prosperous days, Iraq depended heavily on foreign health workers. Most left long ago, and the security situation is now accelerating the brain drain

among Iraqi nationals. Doctors are considered high value kidnap targets by criminal gangs, and Medact reports attacks on ambulances, staff, and hospitals by both insurgents and coalition troops. □

The report, *Enduring effects of war: Health in Iraq 2004*, is available at www.medact.org.

Hala Madkoor, 24, injured by a roadside bomb in Iraq, is comforted by her brother at a Baghdad medical centre

Commission proposes end to star rating system for hospitals

Caroline White *London*

New arrangements for checking on the performance of hospitals and doctors spell the end to the unpopular star ratings system for NHS trusts in England.

The inspection body, the Healthcare Commission, this week published its new proposals for assessing both independent and public sector healthcare organisations and announced that 2005 will be the last year of star ratings.

The proposals will now go out to wide consultation until 21 February, in a bid to gather the views of the public and healthcare professionals and managers on what they think should be assessed and what kinds of information should be published.

Meetings with patients' groups have also been arranged for early in 2005 in London, Bristol, Birmingham, and Leeds.

The commission says that the proposals are designed to be

responsive to need and to make the process of inspection less burdensome. Inspections will no longer involve large teams of inspectors or require collection of large volumes of data.

Better use will be made of existing information gathered from other bodies involved in inspection and regulation.

The commission also promises to adopt “a targeted and proportionate approach to assessment,” deploying a “lighter touch” for those organisations with demonstrable good performance and effective leadership.

From April 2005, when the new framework takes effect, an organisation's annual perfor-

mance rating will be based on whether it is managing to get “the basics” right, with greater emphasis given to the ability to make and sustain progress.

In terms of the “basics,” organisations will be assessed on the core standards set out by the government earlier this year. These cover safety; clinical and cost effectiveness; governance; patient focus; accessible and responsible care; care environment and amenities; and public health. □

Copies of the consultation document, *Assessment for Improvement*, can be obtained from www.healthcarecommission.org.uk or by phoning 0845 601 3012.