

## Correspondence

### Doctors and Dictators

SIR.—Sir Stafford Cripps has now joined Mr. Bevan and Mr. A. V. Alexander in the gravest misrepresentation of the doctors' attitude towards the National Health Service by suggesting that the will of Parliament is being flouted. The Act specifically gave all medical men in this country the right to give or to withhold their services as they think fit, and now the party politicians turn on the doctors and cry "sabotage"!

In the course of the same speech Sir Stafford used the following words :

"It is essential that we should get a general agreement among our people to act on sound economic lines ; the alternative is likely to be some form of totalitarian Government. This deplorable development, so contrary to our national character, is one that the present Government will use every endeavour to prevent—as it can be prevented if wise action is taken."

It is best therefore that Sir Stafford should be his own witness as to methods of government. The following extract is taken from *Law and Orders* by Dr. C. K. Allen, formerly Professor of Jurisprudence in the University of Oxford :

"Let us compare some ideas propounded, under the title 'Can Socialism Come by Constitutional Methods?' by Sir Stafford Cripps in a volume of essays called *Problems of a Socialist Government*. The objective, we learn, is 'to seize power from the ruling class and transfer it to the people as a whole.' The manner in which popular government is to be vindicated is that 'from the moment when the Government takes control rapid and effective action must be possible in every sphere of the national life. . . . The Government's first step will be to call Parliament together at the earliest moment and place before it an Emergency Powers Bill to be passed through all its stages on the first day. This Bill will be wide enough in its terms to allow all that will be immediately necessary to be done by ministerial orders. These orders must be incapable of challenge in the Courts or in any way except in the House of Commons.' All opposition to the Government is to be treated as treachery and sabotage. If 'the capitalists' did not yield, the Government 'would be justified in overriding any obstruction it found placed in its way. . . . It would probably be better and more conducive to the general peace and welfare of the country for the Socialist Government to make itself temporarily into a dictatorship until the matter could again be put to the test at the polls.'"

The Sir Stafford of a few years ago and the Sir Stafford of to-day are speaking with but slightly different voices. It is precisely because the doctors of this country do not wish to become the unwitting or unwilling accomplices of a Government which seems determined to create National Socialism that their opposition to the National Health Act has become so strenuous. The doctors are now fighting for matters of principle and matters of conscience. Meanwhile we should do well to remember that, while Mr. Bevan would be medical dictator, Sir Stafford would have the ultimate responsibility for financial control.

If the State insists on making fantastic and monopolistic claims, then the medical profession will resist indefinitely in the interests of freedom and in the interests of the sick. Bigotry and fanaticism are not particularly English vices, but they have flourished temporarily here in the past and their political and economic counterparts are again seeking to take root. The present administration have yet to learn that the art of democratic government only begins after the verdict of the polls, and they have also to learn the truth of Spinoza's dictum that "the true end of government is liberty."—I am, etc.,

REGINALD PAYNE.

### Right of Appeal

SIR.—In your report (Feb. 7, p. 264) of the meeting of consultants and specialists held at B.M.A. House on Jan. 27 your report (and correctly) Dr. H. B. Morgan as saying that I made no protest in the House of Lords against the clause of the Bill which denies the right of appeal against dismissal. I knew this

statement to be untrue, but I had no copy of *Hansard* with me by which to confute it. Here is the confutation :

"The prohibition placed upon the buying and selling of a doctor's goodwill in his practice, the power of negative direction, and the refusal to allow a doctor the right of appeal to the High Court are surely matters that require amendment. *They seem to me . . . to be gross infringements of personal liberty.*" (*Hansard*, Official Report, Vol. 143, No. 128, Oct. 8, 1946.)—I am, etc.,

London, W.1.

ORDER.

### Telegram from Australia

Profession in Australia congratulates Council and Representative Body on its magnificent lead of Jan. 8 and hopes whole profession will stand firm in this struggle for freedom and independence.—H. S. NEWLAND, President of Federal Council.

### Tell the Public

SIR.—Now that every doctor has decided upon his attitude to the National Health Service it is his duty to explain to his patients what he thinks the Act will mean to them, and how, on their behalf, he has recorded his vote in the plebiscite.

Whatever they may have read in their newspapers, it is our business, rather than the journalist's—for we know more about it than he does—to present the case to our patients. They respect our views and value our opinion on subjects other than their personal health, and they will insist, at the present time, on hearing what we think of the Health Service. But we must make our case clear. Few of us are eloquent, and most of us have difficulty in translating into words the sincere convictions in our hearts. Many of us will find ourselves unconvincing, or even inarticulate, when we try to explain a situation so complicated by strife and political controversy to patients with whom our conversation is usually homely and humanitarian.

It might be helpful if the various organizations which claim to represent the profession would issue a simply worded, short statement of what we should tell our patients. This should cater for the needs of doctors in different localities, for what the London doctor should say might not interest the inhabitants of John o' Groat's. Such pamphlets would therefore be better issued by local rather than central bodies of the various organizations.

There may be some of us who do not need, and indeed may resent, such instructions. But whether or not we welcome assistance in doing so, let us all from now onwards dutifully, conscientiously, and sincerely tell the people, for it is their concern even more than ours.—I am, etc.,

London, W.1.

P. M. F. BISHOP.

### Socialist Says "No"

SIR.—I have campaigned in favour of a National Health Service since I entered medical school in 1932. It is therefore with some regret that I have to cast my vote against entering into service under the present Act, and for the benefit of Socialists who, like myself, have long desired such a service feel that I must communicate some of my reasons for so doing.

First of all I see that the Act must lead fairly soon to a salaried State service, and that that in turn must lead to direction of patients as well as doctors. A Socialist service need not be a salaried service, for there are many methods of payment employed in a Socialist State better able to preserve professional freedom and the interests of the individual patient—e.g., organization into doctors' co-operatives, "piecemeal" (i.e., payment per item of service), or collective responsibility and a capitation payment *without* basic salary.

Secondly, I am unimpressed by the Minister's arguments against appeal to the Courts against a decision of the employing authority, a tribunal, or himself. It may be unprecedented for an employee to be able to appeal against a legal dismissal, but it is equally unprecedented for there to be only one potential employer (virtually) for the whole of any given trade or vocation, whose refusal of employment will within a very few years mean complete exclusion from earning a living by the practice of one's only profession. In these circumstances one cannot accept assurances of good will or of impartiality, but

must have a black-and-white right to appeal outside of and above the employing authority or its superior, the Minister. Especially is this so as Section 42 of the Act states only that a doctor must have the opportunity to appear before a tribunal but says nothing of the right to call witnesses or evidence, or to have representation by counsel. Again, it might be the intention, but would be better down in black and white.

Thirdly, negative or positive direction is incompatible with individual freedom, Socialist or otherwise. Each of us must have the right in law to starve wherever we might choose to try to make a living, even though that right may never be exercised and we go where there is a vacancy to which we can be appointed.

Fourthly, I see no good reason why doctors, who are in the best and most literal sense "workers by hand and brain," and very hard workers at that, should be given compensation at retirement or death, when capitalist coalowners and transport shareholders are paid out immediately in convertible stock or cash.

Finally, were I convinced I could sacrifice all these points I still could not enter into service under a man and a Ministry which has treated our elected representatives with a gross discourtesy and blank refusal to come to terms which if proffered by a capitalist board of directors to a shop-stewards' committee would probably have led to industrial dispute. The Minister has said we are fruit ripe for the picking. Let us then offer him a raspberry.—I am, etc.,

Leigh-on-Sea, Essex.

A. M. GOLDTHORPE.

#### Whole-time Researchers and the Act

SIR,—We, who are at present engaged in whole-time medical research, have been asked to vote on Question A of the plebiscite and to state either that we approve or disapprove of the National Health Service Act, 1946, in its present form. If we reply that we disapprove, the implication to be drawn is that in greater or less measure we favour the campaign which is being conducted to prevent the Act being put into operation. Since we consider the campaign to be both ill conceived and undignified, and think that the proper approach of the medical profession should be to attempt to work the Act in a spirit of co-operation and to criticize and modify it at those points where *in practice* it is proved at fault, we cannot reply that we disagree.

Although, therefore, we do not regard the Act as perfect, we are forced by the manner in which the question is put to give it our complete approval. We hope that others faced with a similar dilemma will do the same.—We are, etc.,

J. H. HUMPHREY.

E. D. BARLOW.

J. D. JUDAH.

N. B. MYANT.

#### M.P.U. Members Resign

SIR,—The recent circular letter W.128 dated January, 1948, issued by the M.P.U. will not commend itself to those who support the B.M.A. policy. The letter is signed by Mr. L. W. Hefferman, and Drs. M. B. Bayly, Alfred Welply, and Alexander Crawford, but it has a familiar flavour reminiscent of the Minister's recent circular. We are invited to co-operate in operating and perfecting the National Health Service Act. Does any doctor really believe that when we have once espoused the new Service we shall have any power to bring about those modifications which we feel to be essential in the interests of public and profession alike?

We the undersigned have to-day resigned from the M.P.U. It is to be hoped that all other members of that Union who do not endorse its policy will do the same.—We are, etc.,

B. McDougall Johnson.

TERENCE M. DORAN.

Gosport, Hants.

Southport.

E. CRONIN LOWE.

#### Tribute to Dr. Dain

SIR,—It does seem a little odd that in the spate of letters appearing in the *B.M.J.* there has not been one word of thanks to the Council of the B.M.A. and its Chairman. I do not know him personally any more than I had personal knowledge of Mr. Churchill whom I trusted and endeavoured to follow in 1940. Dr. Guy Dain's fearless utterance seems to me to be in the Churchillian tradition. Both are Englishmen who know how to answer a bully—even if his power is theoretically irresistible.—I am, etc.,

Ifjord, Essex.

R. M. NOORDIN.

#### Alternative Service

SIR,—I regard the plebiscite as a tragedy, in that the B.M.A. have lost the greatest opportunity they will ever see of getting for this country the health service it needs. We should not be voting pro or con for the Government Health Service. We should be voting either for the Government Service or for the B.M.A. Health Service. The B.M.A. could have proposed an amended service to which most doctors would subscribe, and such a weight of medical opinion would influence Press and Parliament, because it would be positive. If the vote against the Government Health Service is large, we are no further on—a negative vote cannot get us anywhere. I feel that the B.M.A. leaders are to blame for the present situation, and I should like to see a complete change in leadership, the present men being replaced by men with a capacity for looking forward as well as back.—I am, etc.,

Leeds, 7.

R. A. MURRAY SCOTT.

#### An Alternative Wanted

SIR,—Having listened to several eloquent addresses by leading members of the profession and read the many communications from the B.M.A. all upon the subject of the National Health Service Act, 1946, I completely agree with the advice given that the profession should refuse to operate the Government scheme with all its difficulties, doubts, dangers, uncertainties and unsatisfactory conditions. But one also feels strongly that there is something lacking in our professional position in that we have not presented to the public, to the profession, and to the Government of the day a clear, concise, concrete alternative scheme which the profession could and would unanimously operate to the advantage and satisfaction of all those of the community who desire to avail themselves of such a National Health Service.

Surely after such a long and intense examination of the present Act it should not be beyond the ability of the profession and of the B.M.A. especially, to quickly produce an attractive, acceptable, and workable alternative; for without such the position of many by July 5, especially of the younger members of our profession, will be untenable. With all their best intentions to remain loyal, they will be faced with the choice of turning down what to many may be an attractive appointment with professional and domestic security in which to many the advantages will outweigh the disadvantages and against which they have no alternative except the suggested B.M.A. relief fund for a few weeks.

If it is the desire of the country to have a National Health Service, let it be one designed by those who know the medical needs of the community and how best to supply them to the satisfaction of all concerned. Let us refuse to operate the present Act or any other scheme than that of our own design and provide the people with what they need, the profession with what they can unanimously undertake, and the Government with what they request—namely, a satisfactory, workable, efficient National Health Service. Let us leave the defensive, negative attitude and take up an aggressively positive position, stating quite clearly that the country's health requirements can and will be provided for by a National Health Service which the medical profession has designed and will operate, and by no other, and demand that the Government implement its provisions, for the welfare of the country. Such an alternative scheme should be published as soon as possible, discussed, advertised, and if necessary voted upon before July.—I am, etc.,

#### Wanted: Alternative to Salary

SIR,—Means must be found for the young doctor without money to live during his first few years of practice. We agree with the Minister in this aim, but many do not like the proposed means—i.e., the salary. Let us then suggest an alternative means. If the Council can put before the Minister an effective scheme whereby the young doctor can practise unburdened with debt, the Minister should be willing to accept it. And if the scheme does not involve public money there would cease to be any case for "direction." In this way two

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