

Professional Independence at Stake

Consultants have firmly united to oppose Mrs. Barbara Castle's doctrinaire push towards a whole-time salaried consultant service in the N.H.S. Last weekend the Central Committee for Hospital Medical Services gave her three weeks in which to agree in principle new contract proposals acceptable to consultants (p. 416), a stand supported by the Hospital Consultants and Specialists Association. The Secretary of State's row with the profession, started by her ill-conceived remarks in Parliament on N.H.S. pay beds (9 November, p. 305), is now centred where it really matters—on the contract.

Ironically it was the Government itself that brought about this shift of emphasis by presenting to the Owen Working Party last week "Proposals for a Remuneration Structure for National Health Service Paid Consultants" (p.421) that largely ignored the profession's own strongly declared views already given to it (p.419). Whereas doctors might be reluctant to have a showdown on pay beds alone, according to C.C.H.M.S. members most consultants would be prepared to fight to the bitter end—including the use of sanctions—to preserve their professional independence. The Government's proposals endanger this independence. Relations between the Government and doctors have not been helped by its tactics in the Owen Working Party or by political propaganda to persuade the public that the working party is primarily an exercise to phase out private practice. The working party's paramount task was—and must remain—to produce fair contracts for consultants.

The Government's proposals are potentially divisive. Though undoubtedly tempting at first sight to consultants working full time they have alarmed all the profession's representatives on the Working Party. They should alarm all doctors for they point in one direction and one direction only: a total state monopoly of hospital medical services. And if that were to happen to the hospital service, would general practice be far behind? The C.C.H.M.S. was delighted to hear, therefore, that junior doctors and G.P.s firmly supported senior hospital staff in opposing a whole-time salaried service. Contrary to reports in the press quoting tempting salaries for those doctors opting for a whole-time contract, no figures have been discussed in the Owen Working Party—

indeed, its terms of reference preclude such discussions. Dr. C. E. Astley, Chairman of the C.C.H.M.S., warned his committee, however, that while the latest proposals could produce a differential of nearly 40% (and probably more) in favour of the consultants opting to work full time for the N.H.S. this would not necessarily result in a large increase over existing salaries: part-timers could well suffer a loss in income to create this differential.

When the profession's representatives met the Secretary of State on 7 November they reiterated two principles essential to any new contracts (p.426). "First, that the contractual hours given or services rendered to the N.H.S. must be defined and remunerated, together with any additional work done. Secondly, that any consultant, during time which he has not agreed to devote either to actual N.H.S. work, or to availability, must be free to exercise his skills in independent practice—subject always to his ethical obligation to his patients." The complete commitment allowance suggested by the Health Departments is contrary to this second principle.

If the precedent of the general practitioners' charter negotiations of 1965-6 is followed any agreed contract would go to the Review Body for pricing. The curious affair of Lord Halsbury's reported interview, however, has undermined doctors' confidence in him as an impartial chairman and, apart from wishing to consign him to the history books, consultants are clearly unenthusiastic about the Review Body pricing any new contract. Still, the urgent objective now is to agree a choice of contracts in the working party and send them to the profession so that consultants can decide themselves whether the choices are satisfactory.

The Owen Working Party has been given a three-week breathing space by its staff side, which represents the B.M.A., the British Dental Association, the Joint Consultants Committee, and the H.C.S.A. The professions are not looking for a confrontation: they want agreement. So Mrs. Castle and Dr. Owen can restore some of their lost negotiating credibility by showing willingness to meet consultants in their request for a choice of contracts which will ensure their continued professional independence. Its disappearance would be reflected in lower standards of medical care and yet more harm to the Health Service.