Miscellanea

A tale of turbulent times

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For those who were not then qualified it is almost impossible to picture the high tensions and anxiety of the medical profession just before the inception of the National Health Service. Some of the flavour of those times is indicated in the *History of the British Medical Association 1932-1981* by Dr Elston Grey-Turner and Mr F M Sutherland,¹ and in a small booklet, *The Medical Surrender*, which was published by Lord Horder's Fellowship for Freedom in Medicine.²

It is sometimes said that most of the opposition to the NHS came from general practitioners rather than hospital doctors, but this is far from true. Most family doctors were strongly opposed to the proposal that the sale of goodwill of their practices would be made illegal under the 1946 Act.* Moreover, compensation for goodwill would only be paid at the time of retirement while, in the mean time, interest on the capital was to be paid at a pretty niggardly annual rate. Aneurin Bevan, the then minister of health, who seldom missed the opportunity for a shrewd blow at the doctors, had emotively referred to the sale of goodwill as "tantamount to the sale and purchase of patients."

In December 1946 a plebiscite of the whole profession had shown a clear majority against entering into negotiations with the minister on the regulations to be made under the Act. And on 8 January 1948 a special representative meeting of the BMA unanimously declared that "the Act in its present form is so grossly at variance with the essential principles of the profession that it should be rejected absolutely." A further plebiscite of the whole profession was proposed. In the mean time on 27 January consultants in London decided by 766 votes to 11 that they should not take service under the Act until it had been suitably amended. The forms for that second plebiscite were issued on 31 January, and, in an 84% poll, there was more than a nine to one majority against accepting service under the unamended Act.

Reluctance to get embroiled

During the ensuing two months a curious lull occurred with little information or leadership from the council of the BMA. It may astonish present day doctors, accustomed to almost annual battles over pay and conditions of service, to learn that hospital doctors had no idea of what their proposed rates of pay or their pensions would be until well after the appointed day, 5 July 1948. Furthermore, family doctors stood to lose all compensation for the goodwill of their practices if they did not sign on the dotted line before that date.

By virtue of their charters the then existing royal colleges (physicians, surgeons, obstetricians and gynaecologists in England,

and the physicians and surgeons in Edinburgh) showed some reluctance to get embroiled in the political battle. But Lord Moran, president of the Royal College of Physicians, was rumoured to be engaged in private parleying with the minister. The concern of many specialists was exacerbated when the three English presidents (Lord Moran, Sir Alfred Webb-Johnson, and Mr William Gilliat) addressed a letter to Mr Aneurin Bevan on 2 January 1947, to which the minister replied on 6 January; both letters were published in the *BMJ* on 11 January 1947.^{3,4} Shortly afterwards, at the request of the statutory number of fellows, a special general meeting was held at the Royal College of Surgeons in an attempt to ensure that the president was better acquainted with the views of the fellows. There remained a strong suspicion that their views might be ignored and so, in the following year, only a few months before the appointed day, a group of fellows from London and the provinces duly requested that there should be a further meeting.

The rebels

That second meeting at the Royal College of Surgeons was held on 28 April 1948, when some 250 fellows packed into one museum hall which then served as the only available meeting place before the rebuilding after the college's extensive destruction in the 1941 "blitz." The "rebel" group, led by Reginald Payne, included several highly respected senior surgeons—A J Gardham of University College Hospital; Basil Hume and John Hosford of Barts; Etherington-Wilson of Torquay; and Eric Lloyd of the Royal National Orthopaedic Hospital. Payne, a Barts man on the staff of the postgraduate hospital at Hammersmith until the inception of the NHS, was a most cultured and civilised person though something of a "loner." An able surgeon and excellent teacher, Payne had been a Hunterian professor of the college on no less than four occasions in the 1930s. The rebels, keen to ensure that younger fellows' views were taken into account, included in their group a 31 year old Barts chief assistant (the equivalent of a pre-war surgical registrar)—the author of this article. That the group was reasonably representative of the views of the fellows is shown by the support for the three resolutions that they proposed.

The opening speaker John Gardham, in a telling and restrained contribution that ably expressed the widespread concern of many British surgeons about the virtual nationalisation of medicine, spoke to a resolution: "That this meeting of fellows of the Royal College of Surgeons, being anxious lest the standards of British surgery might be lowered if the NHS is implemented in its present form, urges the council to represent to the minister the views expressed at this meeting." Despite the visible reluctance of the president to submit to anything so democratic as a ballot of the fellows present, the motion, duly seconded by Basil Hume of Barts, was eventually passed *nem con*. There were still deep suspicions that the president might not communicate his fellows' views to the minister.

A second, rather longer, resolution was proposed by Reginald Payne, emphasising that a satisfactory service could be achieved only if free from political control. It may seem naïve to us today that anyone could seriously postulate freedom from political control in a

*There were separate Acts for Scotland and Northern Ireland but the singular is used throughout this paper.

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service that would be almost entirely dependent on direct Treasury support. But Payne clearly expounded the dangers of centralised political control, the coercive powers of the minister under what was essentially an enabling Act, the threat to the independence of medical educational institutions, and the problems resulting from dominance by the government actuary and the Treasury. Fortunately, as it now transpires, our medical royal colleges—unlike the universities—have managed to avoid the dangers of governmental financial support.

In the course of a short speech, seconding Payne's resolution, I emphasised the anxieties that so many of my younger colleagues had expressed privately and at their own meetings. I added that "some of these men, through insecurity in their present jobs, have not been keen to express their views in public." I went on to refer to the presidents' letter of 1947 as a "tactical blunder [which] confused and divided the profession, weakened the position of the BMA and strengthened the hand of the minister." Perhaps I was a trifle ungenerous. My contribution was loudly applauded, though one or two of my colleagues did suggest afterwards that I might find it difficult to secure a senior appointment.

In the ensuing discussion there was a prolonged presidential filibuster in the course of which Sir Alfred rather plaintively asked, "Do you want to put me in the jackpot?" To which inquiry there were "loud cries of 'Yes'." The president tried to persuade the meeting that voting on the second resolution should only take place if the third resolution was withdrawn, but this was rejected by its sponsors. He also suggested that the meeting would be voting, not on the existing Act as published but on a promised amending Bill which had not even been drafted. Despite this attempt to dilute support for the motion I had seconded, it was carried by 153 votes to 73 on a ballot.

Presidential caution about the third resolution was due to its concluding words: "It is not in the best interests of the public, or the profession, that fellows should take service under the present Act." Etherington-Wilson, in proposing the resolution, emphasised the perils of entering a state service on what virtually amounted to a "blind date" with no assurances about professional freedom and the loss of independence of our old established voluntary hospitals. He was seconded by Eric Lloyd who, in a gently effective speech, emphasised his equal repugnance to control by any of the political parties under an unamended Act. After more than two hours there had been a marked thinning out of the meeting and, on a show of hands, this last resolution was passed by only 67 votes to 58.

Meeting secretly recorded

Finally, to satisfy the fellows' consciences and the college's honour, Reginald Payne suggested that a humble petition be sent to His Majesty, but this the president firmly rejected. So ended a historic meeting which the editor of the *BMJ* Dr Hugh Clegg was eagerly awaiting to publish. The *Lancet* had evinced no special interest in our meeting though it would surely have been different in the days of Thomas Wakley. Alas, we rebels suffered from being too well organised for, anxious to ensure that every detail of the proceedings was accurately recorded, we had spirited an expert parliamentary speedwriter into the meeting from the House of Commons. He sat in the midst of a solid phalanx of our supporters so that none but us could observe him recording every word and incident. Indeed, in the style of *Hansard* he included each round of applause and every spirited interruption. The resultant 49 foolscap pages, double spaced, were to have been made available to the *BMJ* when Payne, a man of unique and rugged integrity, observed that the president was recorded as having said that the proceedings were "secreta collegia." In fact, none of us could remember hearing this though Sir Alfred did sometimes slur his speech or, perhaps, some of us were not as well grounded in the classics as our opposite numbers in Trafalgar Square.* Payne thereupon declared that it would be a breach of honour and of loyalty to his college if he

released the record for publication. Clegg was furious, and so were all of us though none could persuade Payne to change his mind. So far as is known, the president did not acquaint the minister with the views of his fellows. The only report in the *BMJ* was a short editorial on 8 May 1948, entitled "Surgeons in Camera."⁵

A few years later I asked Reggie Payne if he would let me have a copy of the record of our meeting. "No," he replied, but added, "I shall bequeath it to you when I die." I enjoyed some years of further friendship with this remarkable man before he died quite suddenly at his home of a myocardial infarct on 20 October 1967. He had a happy family life and was survived by his wife and two sons, one of whom is an Anglican clergyman and the other, Dr Richard Payne, a consultant pathologist. True to his father's promise, Richard promptly wrote to me to say that he was sending by registered post certain documents which his father had left me. Thus did I receive the complete and lucid record of that parliamentary reporter whom we had secretly introduced into a vital college meeting. A photocopy of his report now reposes in the library of the Royal College of Surgeons and the college will have the original when I die. It has been read with great interest by several past presidents of the college as well as the present editor of the *BMJ*. I am grateful to Dr Stephen Lock for his invitation to write an abbreviated account of this historic meeting more than 36 years after its planned appearance.

It is a matter for conjecture whether stronger and better leadership might have saved the public and the profession from the viler breezes of nationalised medicine. But it would be wrong to blame the leaders of the royal colleges alone for the unsatisfactory outcome. There were equally strange goings on in the BMA where a special council meeting was called by telegram and then held on 15 April 1948. That meeting was never reported in the *BMJ* or in the supplementary annual report of the BMA council. Moreover, it is not even mentioned in Grey-Turner's history of the BMA. But it was at that meeting that the chairman of council, Dr Guy Dain, declared that there was no need for a further plebiscite. A wavering minority of the council then requested that the secretary of the BMA be heard. After Dr Charles Hill (now Lord Hill) had spoken a small majority on council voted in favour of holding yet another plebiscite under similar conditions to the second one. Not surprisingly, rumour became rife that the council was divided (which was true). The plebiscite result, reported on 5 May 1948, still showed an overall majority of the profession against accepting service without further safeguards, but the number of opposing general practitioners had not reached the previously agreed majority. Thus did the NHS come into being on the duly appointed day.

Reginald Payne was no blinkered opponent of "progress," but a man of great humanity and wisdom who rightly feared the disappearance of that spirit of service which epitomised the best of the voluntary system. In 1948, in reply to a question about the possible deterioration in standards, he shrewdly predicted, "The NHS will be carried on the broad shoulders of the professions—medical, nursing, and administrative—for a full quarter century; then, and only then, will the real cracks start to appear." That was a truly prophetic remark, for it was in 1973—just 25 years after its inception—that the NHS first tasted the bitter fruits of so called "industrial action." This was followed by growing evidence of the "closed shop" mentality, the introduction of "statutory holidays" (a device for granting extra overtime payments to ancillary staff while effectively scuppering many regular clinics and operation lists), and of many other measures that seem calculated to promote the comfort of those who work in the service rather than of those they have the privilege of serving. I end on this sobering Christmas thought for all trades unionists, including the medical and nursing ones, in the NHS.

References

- 1 Grey-Turner E, Sutherland FM. *History of the British Medical Association 1932-1981*. London: British Medical Association, 1982.
- 2 Fellowship for Freedom in Medicine. *The medical surrender*. London: Fellowship for Freedom in Medicine, 1951.
- 3 Moran Lord, Webb-Johnson A, Gilliat W. National Health Service Act: presidents of royal colleges and Mr Bevan. *Br Med J* 1947;ii:66.
- 4 Bevan A. National Health Service Act: Mr Bevan's reply. *Br Med J* 1947;ii:66-7.
- 5 Anonymous. Surgeons in camera. *Br Med J* 1948;ii:888.

*The Royal College of Physicians' former building was then in Trafalgar Square and was once picturesquely described by a London taxi driver as "the dirty end of Canada House."