

CCCMCH gives oral evidence to Acheson inquiry

Dr David Miles led a deputation from the Central Committee for Community Medicine and Community Health last month to give oral evidence to the Acheson inquiry, which is looking into the future development of the public health function and community medicine. He was accompanied by Dr Kathleen Dalzell, Dr Eileen Wain, Dr H G Pledger, and Dr Stephen Horsley.

Dr Miles told the CCCMCH on 11 September that the group had received a sympathetic hearing and had been questioned about child health and environmental health. It was not unreasonable, Dr Miles thought, to spend some time talking about the delivery of child health services because other organisations that had given evidence, such as the Faculty of Community Medicine and the Association of District Medical Officers, represented only doctors in community medicine.

The report of the inquiry is expected in December and arrangements will be made for the committee to consult its constituents and make an early response. If necessary a special meeting of the craft conference may be convened.

The chairman reported that he had joined other standing committee chairmen at a meeting with Sir Roy Griffiths, deputy chairman of the NHS Management Board, who is inquiring into the provision of community care.

Negotiating stalemate

The negotiating subcommittee, chaired by Dr Lindsey Davies, had been looking forward to a long promised meeting with the department in August, but this had been cancelled. So there has still been no discussion about permanent arrangements for community physicians appointed as general managers. The committee agreed with her request that the department should be asked to issue a letter to the effect that the interim arrangements would continue. Dr Davies saw no possibility of progress on a draft model contract for community physicians until the Acheson inquiry had reported. If the department continues to refuse to respond to a request for a meeting the chairman of council may be asked to intervene.

Child health forum mark II

Now that the annual representative meeting has endorsed the report of the child health forum Dr Kathleen Dalzell, who chairs the community health doctors subcommittee, is anxious that progress should be made. Dr George Duncan is being invited to chair a joint craft working party with a similar constitution to the forum "to promote detailed negotiations towards implementation of the recommendations of the child health forum." Dr Dalzell, Dr Margaret Anderson, and Dr Miles (with Dr Lindsey Davies as his deputy) will represent the CCCMCH.

The committee was concerned at the appearance of a document from the Faculty of Community Medicine, *An Integrated Child Health Service: A Way Forward*. The committee believed that the faculty document should be taken in conjunction with the forum's report and should be referred to the joint craft working party that has been set up.



Dr David Miles, who was re-elected chairman of the CCCMCH. Dr Kathleen Dalzell and Dr Eileen Wain, chairman of the executive subcommittee, were re-elected deputy chairmen.

The BMA is to make representations to the department about the implications for doctors in the training grades of the proposed steep rise in defence society subscriptions, but this would not help the many doctors who work part time in community health. Some members raised the question of a subscription linked to salary levels or to the "risk" of the job but it was pointed out that this had disadvantages. The chairman suggested that each individual should try to negotiate a reduced subscription with his or her defence society.

The committee continues to be concerned that advertisements for posts of interest to community health doctors are not published in both editions of the *BMJ*. This particularly affects advertisements for senior clinical medical officers and for posts in child health, which are published in the *Clinical Research* edition; most community health doctors receive the *Practice Observed* edition. The *BMJ* will be asked to ensure that where appropriate advertisements are published in both editions.

"Primary health care on the agenda?"

A new report from the King's Fund Centre argues for changes in primary health care policy. Linda Marks points out in *Primary health care on the agenda?* that fragmentation of responsibility for primary care services, coupled with the independent status of family practitioners, creates difficulties in achieving accountability, proper user participation, and even a planned and coordinated service. She thinks that the government's consultative document *Primary Health Care: An Agenda for Discussion* defined primary care in narrow professional terms. There was little critical analysis of the complexities of planning primary care and the

document did not look at the possibility of adopting the World Health Organisation's approach to primary health care.

Primary health care on the agenda? is available, price £2.50, from the King's Fund Centre, 126 Albert Street, London NW1 7NF.

New consultant posts in 1988

Central funding for 55 new consultant posts will be available in 1988 and health authorities should submit their bids by 31 October. This second allocation forms part of the package of proposals in *Hospital Medical Staffing: Achieving a Balance*. In July health authorities were told of their successful bids for 45 new posts in general medicine, general surgery, and traumatic and orthopaedic surgery (1 August, p 343).

Patients' access to records from November

From 11 November anyone will be entitled to be supplied with personal data about him or her held on computer by making a written request and paying a fee. This includes medical records. Such a request for subject access will have to be responded to within 40 days.

To help health authorities with preliminary planning arrangements the Department of Health and Social Security has issued advice on the terms of an order that the Secretary of State proposes to lay before parliament together with guidelines on the procedures for implementing the order.¹ The order may be amended and will have to be approved by both houses of parliament.

The order allows access to data relating to the physical or mental health of the patient to be modified to enable a data user to withhold data likely to cause serious harm to the physical or mental health of the subject or another person and data that would lead to the identification of another individual other than a health professional who has been concerned with the care of the patient.

The order assumes that people will normally be provided with access to personal health information held about them on computers and that modification of that access would be allowed only in the limited circumstances described above.

Under the Data Protection Act 1984 the position of children and the rights of parents are complex. The department is seeking urgent legal advice and further information will be sent to health authorities as soon as possible.

The guidelines attached to the order illustrate the extra workload that will fall on doctors, who will usually be the "lead health professionals." The latter will have to examine the data, liaise with other health professionals, advise which computerised data are likely to cause serious harm, and prepare a report of all the information that can be released to the applicant. The lead health professional will also have to prepare a separate summary indicating the various points that might have to be explained to the applicant and who is the most appropriate person to give an explanation and to provide any counselling that might be considered necessary.

¹ Department of Health and Social Security. *Health service management. Data protection act 1984: modified access to personal health information*. London: DHSS, 1987. (HC(87)14.)