From Dr. Clive Froggatt, C.C.

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Dear Prime Minister,

You invited me to submit further comments on the NHS Review. I feel strongly that serious consideration should be given to linking the Government's consideration of Roy Griffiths proposals on community care to the outcome of your review of the NHS. The accompanying Paper gives briefly my reasons. I should be happy to expand on them if requested.

Yours sincerely,

Clive Froggatt.

Enc

The Prime Minister

From Dr. Clive Froggatt, C.C.

NHS AND COMMUNITY CARE REVIEWS

The reviews of the NHS and community care have a common origin in the recognition by Government of the need; (1) to use existing resources, primarily financial, in a more efficient and effective manner, and, (2) to bring about some form of budgetary control. It is important also that the outcome of both reviews should be perceived by the public as in their best interests and of direct benefit to the individual consumer (patient/client).

To some extent this will be a matter of presentation but for the NHS many, if not most, of the fundamental reforms will be somewhat mechanistic rather than of immediate and obvious advantage to the patient. The same is not true of community care.

The outcome of the community care review is likely to impact on the general public to a much greater degree. A larger proportion of the population will be concerned since a significant number are elderly themselves and those who are not will have family and neighbours who are.

The delivery of care to the elderly impinges directly on the health service review since many acute hospital beds are occupied presently by elderly people for whom alternative domiciliary or residential provision is not easily identified. If general practitioners took more responsibility for maintaining older people in their own homes, supported by community nursing and other services, the demand for expensive hospital or residential provision would be reduced. Specific financial incentives would encourage this to happen.

Separation of the reviews is illogical since the same consumer groups are affected by both. No review of the NHS would be complete without addressing the problems of community care. Separate announcements will leave a hiatus within which a competent Opposition would take the initiative and undermine both reviews by arguing the case for taking them together.

Conclusion

To retain the initiative in both areas of important public policy formation, the Government should determine simultaneously the outcome of both reviews.

This will facilitate decisions and consultation on any White Paper and condense any political heat generated by unpopular changes.

Finally, taken as one, the outcome of both reviews will be more readily identified by the public as of relevance and direct benefit to patients and clients of respective services.

C.F.