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From the Secretary of
State for Health
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Das Dominica

I believe my Secretary of State had a word with the Prime Minister about the way in which the new doctors' contract was settling down. He thought she might be interested to see the attached article in 'Doctor' - a journal not usually noted for its sympathetic line.

STEPHEN ALCOCK Principal Private Secretary

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Leading players . . . (from left) Dr Michael Wilson, Kenneth Clarke and Dr Ian Bogle

Clarke's 'baby' thrives

Six months after the 1990 contract came into force Simon Warne assesses what effect it has had on GPs

Cries of anguish heralded the birth of the GP contract.

For over a year before its de-livery GPs around the country screamed out at the Government's proposals.

The message given out loud and clear was that GPs were not ready for such a radical change in their terms of serv-

Predictions of doom and gloom were relayed from GP surgery to the British Medical Association to Parliament.

When they were ignored and the Health Secretary laid the contract before his colleagues in the House of Commons, GPs threw their hands up in horror at the monster he had created.

Six months later reports of teething problems are all that GP leaders at the BMA can offer to substantiate their previous worries.

The clamour of angry voices which preceded the contract's imposition has been followed by a deafening silence. The contract is no longer a 'hot' is-

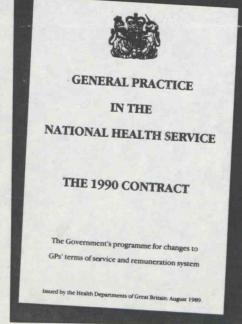
The Government is likely to play on this fact at its annual conference in Bournemouth next month.

As members of Mrs Thatcher's team report back to their supporters under the banner 'Strength to Succeed' heavyweight Kenneth Clarke will be able to inform them that all is quiet on the contract

For the General Medical Services Committee, the main problem in its campaign against contentious areas of the GP contract has been tim-

Before standing down as GMSC chairman in June, Dr Michael Wilson launched a programme to monitor the performance of the contract and its effect on GPs.

This entailed a questionnaire of local medical commit-



tees, adverse reaction cards for GPs to monitor individual problems, an inquiry into GP expenses and workload (by accountants Coopers and Lybrand Deloitte), and an indepth look at a sample of practice accounts to identify any significant changes in practice

All of the various lines of attack have been pursued. But six months into the contract there are no results.

Collating and analysing data takes time. Any delay can only frustrate GP opponents of the contract while aiding the Government's promotion of its health policy.

To assess the contract's effect, GPs need to sit down and examine their account books. They must ask themselves whether they are any better off and whether patient care has improved or deteriorated.

While GP leaders are anxious for ammunition to fire at the Health Secretary, such information can only be gathered once the contract has been in operation for some

Birmingham GP and GMSC member Dr Charles Zuckerman believes that the contract's most immediate effect will be on GPs' pay.

Inefficient computer programs will make it near impossible for FHSAs to get accurate payments to GPs on time, leading to unnecessary financial worries for practices each quarter, he says

As FHSAs and GPs become more bogged down in administration, stration, patient services could suffer.

But before they do Kenneth Clarke could latch on to payments complaints and GP leaders can well do without another wallet jibe.

GP leader Dr Ian Bogle has declared that his way forward will be to monitor the contract and challenge the Gov ernment every time the GMSC has evidence against it.

He is heartened in his endeavours by signs of flexibility at Whitehall

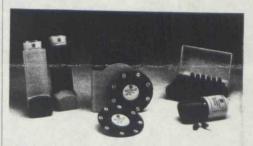
Although not consulted as much as he would have liked, Dr Bogle has already seen alterations to GPs' minor surgery requirements - enabling more GPs to carry out minor surgery and more patients to benefit.

When Kenneth Clarke implemented the contract he pledged to make ammendments at a later date if they were deemed necessary.

It is now up to Dr Bogle and his colleagues at the BMA to come up with the evidence

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In the run-up to the contract Doctor visited 11 GPs from different parts of the country, who had very different worries about how their lives would be changed under the new terms of service. Over the next few weeks we will be returning to them to see whether their anxieties have proved unfounded or whether Mr Clarke's new contract is the monster everyone feared.

