

Teeth Rotters' Charter

The vouchers aren't coming! Hooray, hooray! In the health service, change averted fees almost like progress. *Promoting Better Health*, the government white paper on 'primary care' lacks the bite of the radical Right, and we are thankful.

It's miserable, all the same. Free eye tests and dental checks go, to subsidise 'health promotion' and minor surgery at the hands of your friendly family doctor. Robbing dentists and opticians to pay GPs means less prevention, not more, but 'health checks' and 'screening' are flavours of the month and somebody has to pay for them. Better to let teeth rot and eyes dim than eat into the profits of the drugs industry, which the white paper goes out of its way to protect.

'Primary care' is a myth and the white paper is another dull volume in the fable, concocted by the DHSS with professional collusion. The ramshackle networks of doctors, dentists, opticians, pharmacists and community clinics need radical treatment if they are to provide coherent, comprehensive and high-standard services. Instead the government has carefully endorsed existing trends, which will appeal to professional ambition, and it has mixed and matched alternatives adroitly, playing on professional rivalries. Shrewd politics, especially when the gap between official claims of robust health in the hospital service and actual experience yawns widely across tv screens and tabloid centrespreads.

Good GPs who invest in their practices and provide high-quality care will be rewarded. Barriers to working with other professionals - psychologists, physiotherapists and the like - will go. Contracts will be tightened up, to emphasise preventive work. Satisfied purring is audible within the Royal College of General Practition-

ers. Fat cats in the BMA are smiling, too. More fees for items of work done are promised, and more money per head of population registered. Quality and quantity are cobbled together in a pragmatic package reminiscent of Labour's style when Dr Owen headed the health team.

Some of it will work, some of it won't. The most energetic doctors will make more money, but not necessarily provide a different service. Some health centres might have acupuncturists whilst others have counsellors. Poor practices, which have failed to respond to incentives for 20 years, will carry on being poor. Some might get worse, overloading their lists to make more cash and reducing consultation time and quality. The variations in the standard of medical care that are so obvious across the country may widen, not narrow.

Stripped of its radicalism, Conservatism is both dull and dishonest. Under its guidance the DHSS insists that incentives improve medical practice, against all the evidence. We are encouraged to believe in absurdities: that charges to patients improve services; that consumer

choice in medicine will improve health; that 'health promotion' by hit-and-run professionals who are progressive if they give you 10 minutes of their time can fend off the illnesses so vigorously engendered by the tobacco, alcohol and food industries.

Promoting Better Health will make as many enemies as it makes friends. Eye tests and dental checks are too important to be lost without protest. Too many know the reality of general practice medicine to stomach pious hopes from a government whose only real interest is in saving money at public expense. The stakes are high for the Conservatives. Just as the stock market crash has soured popular capitalism, so the Conservatives' handling of the NHS undermines their credibility as a governing party. This latest reform is an effort to please and to conjure up the image of progress from minimal substance. If it falters through popular and professional resistance the government may have to retreat and increase the NHS budget. Was that the gleam of a harakiri knife, or was it a white paper? •

Steve Iliffe



Dental health: Profit replacing prevention