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LONDON SWIA 2AA

From the Principal Private Secretary

30 January 1987

Dear Tony,

NATIONAL HEALTH SERVICE

The Prime Minister held a meeting yesterday with your Secretary of State, the Minister for Health, Sir Kenneth Stowe, Sir Roy Griffiths and Professor Brian Griffiths of the No.10 Policy Unit, about current issues of NHS policy.

Presentation

The Secretary of State said that presentation had been sharpened up. The Regional Health Authority Chairmen had taken to heart their meeting with the Prime Minister last autumn. Prominent themes in presentation for the next few months would be the increased services available, the record of hospital building, the review of primary health care which the Prime Minister thought would be better understood if it was referred to as the review of health care and family doctors - the rise in the number of patients treated and the increased number of doctors and nurses. The Parliamentary Under Secretary of State for Health and Social Security would continue to concentrate attention on the importance of health promotion. Presentation would go beyond publicising the Government's record on the NHS and draw attention to the various initiatives which were now underway.

Your Secretary of State then turned to these initiatives.

Waiting Lists

He hoped to make an announcement soon on the waiting lists, along the lines that an extra £25m. would be made available to treat 80,000 more patient cases. There could be no guarantee that this would reduce the waiting lists by 80,000. It was unfortunate that figures would be published next month which showed a small increase in the waiting list. This underlined the importance of highlighting the successes of the new initiative as they come through. The recent poor weather might add to lists.

16

The following points were made in discussion:-

- i. The work in hand to validate waiting list figures should be pressed ahead.
- ii. The authorities should be ready to publicise any restrictive practices or lack of co-operation which inhibited the reduction in lists. There was a case for altering consultants' contracts but that task was not one for the short-term.
- iii. Central TV's scheme for broadcasting, during the night, information of jobs vacant might be replicated to publicise hospitals where waiting lists were shorter. GPs in the West Midlands already received weekly lists of waiting times so that they could direct patients to consultants with the shortest lists.

RAWP

The Secretary of State said that the bridging fund was a useful step forward in dealing with some of the problems, including those at sub-regional level and in the inner cities.

Resources

The Secretary of State said that the PES settlement for the NHS 1987/88 had been satisfactory, though demographic pressures were imposing a severe strain. The trend of pay was crucial, especially as some 50 per cent of NHS pay was outside the Government's control.

In answer to a question from the Prime Minister about hospitals' use of agency staff, the Minister for Health said that there was an increasing tendency for nurses to work part-time for an agency in their spare time. £50m was being spent in London alone on agency fees. In parts of London there was a nursing shortage, though this should not be exaggerated. The Service was trying to recruit back former nurses. Talk about an emergency nursing crisis needed to be watched carefully. There were signs that the Royal College of Nursing were taking a more constructive attitude to nursing supply.

Capital

The Secretary of State said that the capital building programme was going well. Publicity needed to draw attention to the decline in hospital building in the 1970s and the rise in the 1980s.

Cancer Screening

The Forrest Report would say that breast screening of women in the 50-64 age group would reduce deaths by one-third. Such a programme was an important priority. He

was discussing with the Chief Secretary how it should be funded, for example by transferring funds from the Family Practitioner Service.

Syringes for Diabetics

The Prime Minister said that she was impressed by the case put forward by Mr Michael Hurst, M.P., and others for making syringes for diabetics available on prescription. The Secretary of State said that he was considering this. The difficulty was the cost, some £10m.

NHS Management Accounts

The Prime Minister said that she found the progress on inter-region and inter-district charging (which were described in your letter of 23 January) to be disappointingly slow and cautious. She believed that a greater priority should be attached to this issue and would like a report on progress made in six months' time.

I am sending copies of this letter to the Private Secretaries to the Minister for Health and to Sir Kenneth Stowe, Sir Roy Griffiths and Professor Brian Griffiths.

> Vansenly Nigel Wicks

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