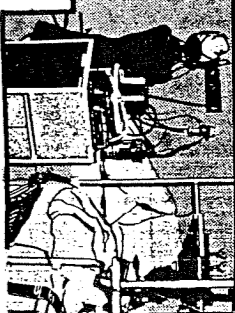




The National Health



Thirty years of care

THE Evening Telegraph of July 5, 1948 called it "practical applied Christianity".

Aneurin Bevan said it would ensure the people of great Britain received the best possible care "from the cradle to the grave".

For 30 years it has been criticised, stated, sometimes praised, improved and expanded.

It is the National Health Service. A piece of legislation which has completely changed the lives of every man, woman and child in this country.

Some people say we take it for granted or at the very least expect too much. Others that the service is being buried in bureaucracy.

Thirty years ago the National Health Service was considered the most liberal piece of legislation ever to be passed by a British government.

It meant that every person in the country had the right to consult a GP, receive free hospital treatment, and make use of dental, ophthalmic and prescribed pharmaceutical services — absolutely free. At first even transport to hospitals was available on the State.

When the Health Service replaced what was a system that was almost unworkable, below a certain figure, you were automatically insured — as today — and so received care. If you earned above it, you were considered able to pay for your treatment.

But if you were a wife, child, pensioner or for some other reason didn't work, then the wage earner of the household had to find the money, or resort to the poor law doctors, or the casualty clinics of cottage hospitals.

Dr. Harold Voss, who recently retired as consultant pathologist at Kettering Hospital said: "If hospital treatment was necessary, it was considered preferable to enter a voluntary hospital rather than a municipal hospital for although patients were means tested at both, voluntary hospitals could only ask repeatedly for payment of accounts; municipal hospitals could — and did — send in the bailiffs.

Even with a system operating, which today seems unthinkable, Aneurin Bevan's proposed health act did not meet with universal approval.

Fiercest and most bitter opponents were the doctors. It was their adamant refusal to work under the new legislation which caused the introduction of the Health Service to be postponed for three months.

A look back to the start of an era

Always a very independent and proudly professional body, they would under no circumstances work for the State, and it was only by introducing Executive Councils to oversee the work of the GPs and to deal with administration that the scheme was able to come into force in July.

Mr. Percy Strouger was clerk to the Executive Council for Northamptonshire from 1948 until he retired 15 years ago.

Now 83, he can still remember vividly the arguing and bad feeling of the months before the Health Act became law.

He explained: "In the end, the doctors remained self employed, and we administered the service. The problem was that as the Health Act was postponed for three months, everyone waited for July 5 before getting new teeth or spectacles, so they wouldn't have to pay. There was a tremendous rush.

Another problem caused by the introduction of the Health Act was the registering of every man, woman and child with a GP.

Mr. Strouger recalled: "We had to take on 50 extra people to cope with it, and it took us over a year.

Once the initial chaos subsided, everything settled down fairly quickly. But there were still criticisms.

Mr. Strouger spoke of one hotly debated issue: "There were complaints that people were being prescribed two pairs of glasses when they could do with one pair.

What was in actual fact happening was that people were getting glasses for long distance and for reading that they needed, but had had to

do without before. Little money was squandered."

In fact if anything, the Regional Boards appeared almost too careful with their funds.

The finance committee of the first Oxford Regional Hospital Board reported on July 3, 1948 that £250,000 had been received from the Ministry of Health.

It was stated in the report: "As the first cash advances by the Board were estimated not to exceed £100,000 and a reserve of £50,000 would be adequate, it was agreed that £100,000 should be returned to the Ministry."

Hospital life was to change considerably.

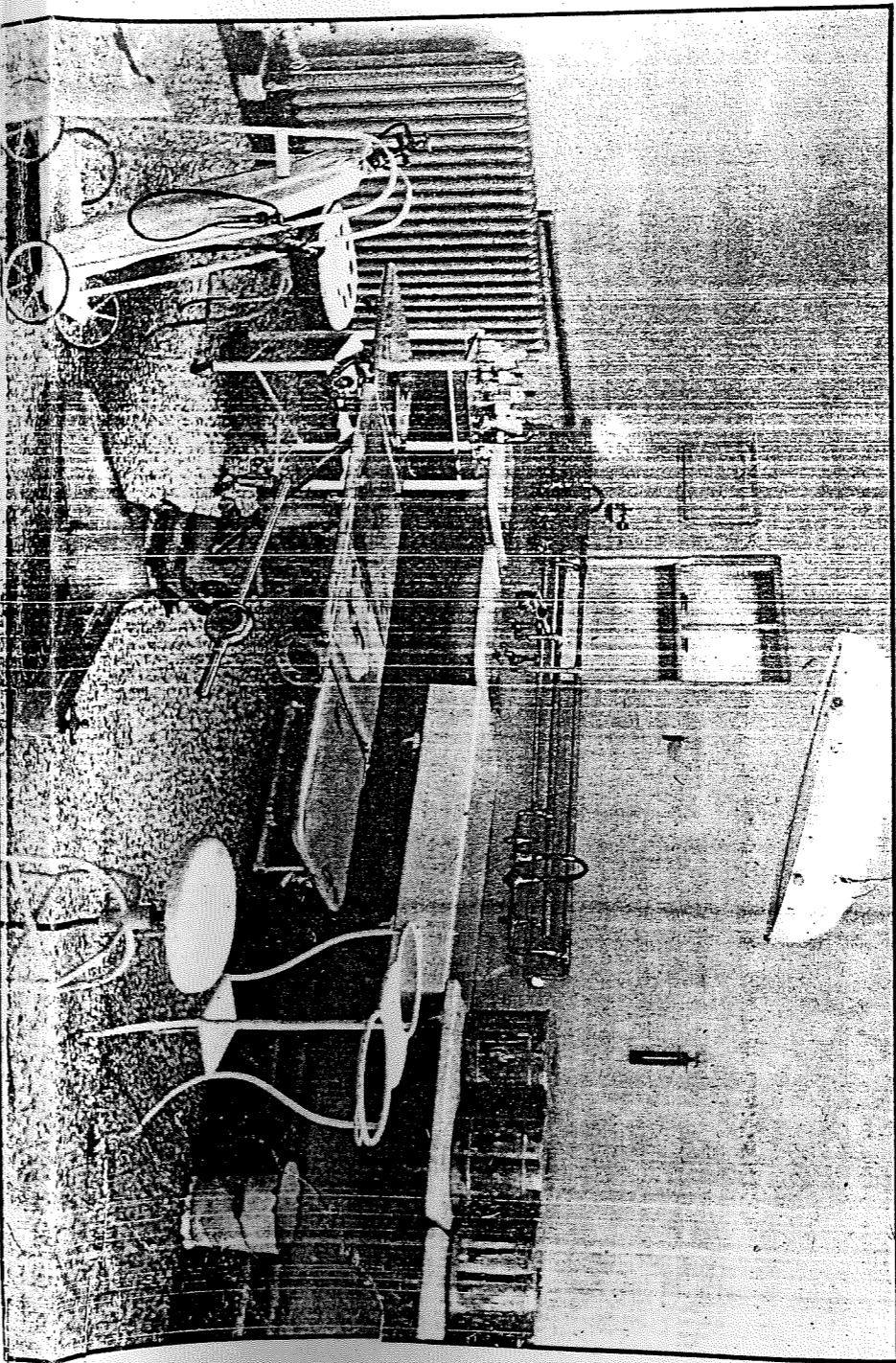
Dr. Voss explained: "For the first time, consultants could work anywhere in the country and earn the same salary, so gradually all over England hospitals acquired full specialist services that previously were only available in big cities."

When Dr. Voss was first appointed to the position of consultant pathologist in 1948, he was shown a model of the new General Hospital at Kettering — it was finally completed two years ago.

He said: "Kettering was chosen, and other cottage hospitals ignored because it was one of the few hospitals that already had regular fortnightly visits from consultants. The bones of the service were already there."

Commenting on how the Health Service has developed over the last 30 years, Dr. Voss said: "It can't be perfect, because although we were the first to nationalise our health service, no other country has copied us.

"It is certainly a great deal better than what preceded it, providing a very high standard of health care. Unfortunately



An operating theatre at Kettering General Hospital — 1924 style.

nately people expect more and more.

Mr. Voss explained that in 1948 it was commonly believed that once the backlog of illnesses had been treated the strain on the health service would begin to lessen.

This hasn't happened, and he said why: "As standards of living rise, people expect their health to be kept equally as high.

"People no longer put up with the foibles and aches they did 30 years ago. At some stage we will have to decide what price we are prepared to pay for a complete health service. "Catering for minor illnesses is harming the important work such as fighting cancer.

The Health Service has come a long way in 30 years. Particularly in Northamptonshire where the standard of care, says Dr. Voss, is particularly high and the health service would begin to lessen.

The leader column of the Evening Telegraph on that first day of the health service stated: "The cost will be heavy, but if there is one thing we cannot afford, it is to have a poison stream of avoidable illness contaminating our people as in the past."

The question we will have to answer in the next 30 years is how high a cost are we prepared to pay in order to provide free medical care? From the cradle to the grave, and is that what we want?

Then and now

IT COST an average of £8 7s 9d to spend a week in Kettering Cottage Hospital in 1947, according to a report of the 50th and final Court of Governors before the National Health Service came into being.

Compared to figures supplied for Kettering General today, they show that life there has changed — just a little.

Total number of patients treated in 1947 totalled 2,492. In 1977 the figure was 116,052. The cost has increased somewhat too

in 30 years, it now costs £339.50 to spend a week in a hospital bed.

The number of operations performed has risen from 1,775 to 8,134, radiographs are now called x rays, and there were 100,000 of them last year. Live births at the hospital rose from 112 to 1,398, but this large jump is in part due to the fact that only the complicated deliveries took place at Kettering Hospital 30 years ago.

The rest were performed at St Mary's or at home.

NOTICE

THE NEW
National Health Medical Service

COMMENCES ON
Monday, 5th July, 1948

Prisons wishing to avail themselves of this service should complete Form E.C.1. and send to their doctors at once

H3

No costly full page advertisements to announce this leap into the welfare state — just this modest notice tucked away in the pages of the ET.

Denise McIntosh spotlights an important anniversary

A 22-bed women's ward pictured pre-war at Kettering General Hospital. The National Health Service was still a long way off.

