

practitioners can work in harmony with mutual respect, but a few consultants seem to regard general practitioners as housemen in the field.

The issue is simple—are the new primary health care teams to be strengthened or weakened?

Representatives

General practitioners all over the country have now chosen their representatives for the new district management teams. Strong personalities have emerged in many areas, often with medicopolitical experience.

It has not, however, been fully realised how much the health care planning teams will influence the district management teams. The general-practitioner representatives for these teams will have to be chosen soon. And these choices will matter. The whole basis of locally integrated care is now at stake.

The Acts of 1910–11 gave general practice its first statutory base. The 1946–48 Acts extended general practice and established it as the basis of the British health system.

It would be ironic if the 1973–74 Acts, reorganising the NHS, passed with the intention of increasing general-practitioner participation in the Health Service, nevertheless seriously weakened personal doctoring and patient-centred care.

NURSING COMES OF AGE

One of the most interesting and important changes occurring with the new National Health Service is the position of the nursing profession. April 1974 marks a subtle but significant change in the relationship between nursing and medicine.

Throughout the history of nursing it has been, albeit decreasingly of late, a secondary profession. The nurse assisted the doctor inside and outside hospital. At best this relationship grew to partnership, at worst the nurse was seen as the handmaiden of the doctor.

During recent years nurses have sharpened their role, improved their education and taken on new managerial responsibilities. They have at last begun to discover the value of training in the community. Academic parity was achieved with the first Chair of Nursing Studies (like the first Chair of General Practice, at Edinburgh University). The financial gap is closing and senior nurses (who are still underpaid) earn more than many doctors.

The new system means that nurses are now responsible to nurses and are no longer ultimately accountable to doctors. In the new Health Service nurses are members of the regional and area team of officers. Other nurses are members—as equal partners—in the new district management teams.

Nursing has come of age. Two of the great caring professions have come to terms. We welcome this development. Nurses have earned their emancipation. Let us hope that we can now all work together for the benefit of the patient.