

The Honigsbaum report

THE RT. HON. LORD ABERDARE¹

Minister of State, Department of Health and Social Security

IT is impossible to speak of general practice today without mentioning the dreaded word 'Honigsbaum'. Mainly because, being critical, this report² received widespread press publicity. It is, of course, never difficult to criticise general practice.

In a service of over 20,000 doctors in England alone, ranging in age from the twenties to the late seventies and with a very wide variety of countries of origin and training, it must always be possible to find occasional examples of error, misjudgment, thoughtlessness or worse. Moreover, the very nature of the work of general practitioners can impose very heavy strains, and these naturally can affect performance.

Some years ago these strains, coupled with work which had become increasingly unsatisfactory and remuneration which was regarded as inadequate, produced a crisis in general practice which in turn led to quite drastic changes in 1966. The method of remuneration was changed, the level of remuneration was raised, and various forms of help were introduced to enable premises and practice arrangements to be improved. As a result of these measures, which I do not need to spell out in detail to you, the number of general practitioners is now increasing and—at least as important—morale has very greatly improved. Such recent developments illustrate the danger of relying on evidence even a few years old when attempting to make an assessment of general practice in this country, or any particular aspects of it.

However, publication of the Honigsbaum report was intended to stimulate discussion about the quality of care provided by general medical practitioners and it certainly has done so. All praise to *The Journal of the Royal College of General Practitioners* for publishing it themselves for this very reason.³ I am sure that few doctors or people concerned in any way with the general medical services would deny that some of the matters discussed in the report do need to be improved.

There are still some premises which are very poor; there are still areas of the country where more doctors are needed; there are still far too many doctors in general practice who have had no specific training in this branch of medicine.

Nevertheless, there has been a great deal of progress in the last few years. The report quotes the number of health centres in operation at the end of 1970 as 217, but by July 1972 that number had increased to 307. The General Practice Finance Corporation was established in 1967, and has now lent more than £8 million to more than 3,000 doctors; in the last two years it lent nearly £5 million to nearly 1,000 doctors, and last year the Corporation reported that a higher proportion of the money than previously was directed to the improvement of surgery facilities. Executive councils will also know of the cost rent scheme introduced last year to provide further help to doctors who wish to build new accommodation or improve existing buildings. In the two years from April 1970 to April 1972 the number of doctors in general practice in England alone increased by over 550, most of whom went to the relatively under-doctored areas. . . ."

REFERENCES

- 1 Aberdare, Rt. Hon. Lord (1972). *Executive Council*, 23, 214–222. Address to the 25th Annual Meeting of the Executive Councils' Association.
- 2 Honigsbaum, F. (1972). *Journal of the Royal College of General Practitioners*, 22, 429–451.
- 3 *Journal of the Royal College of General Practitioners* (1972). Editorial, 22, 425–426.