

## *Correspondence*

### **Merit Awards—A Proposed Scheme**

Sir,

It is now some time since the Ministry of Health set aside the sum of £500,000 for distribution among a number of general practitioners in the form of merit awards. Since then there has been much controversy and even bitterness over the definition of the word "merit". It would appear that the feeling amongst general practitioners is that there is no fair way of selecting a doctor in general practice who is actually doing work more meritorious than that done by his colleagues.

In that there is so much truth in this as to bring thought on the disposal of this money almost to a standstill, it is perhaps time that the word "merit" be newly interpreted. Thus an award might be conferred on a doctor not as a result of the opinion of his worth in the eyes of his colleagues, nor yet of lay bodies, but instead by his contribution to the more efficient running of the National Health Service.

We have discovered that in order to earn an adequate remuneration we must aim at acquiring a full list. As a result, because of the sheer weight of numbers, many doctors are unable to devote as much time to their patients as they would wish, often referring them to hospital when, had they had more time, they might have treated them themselves. Patients too, often feel this as many of us know. The hospitals complain that their outpatient waiting lists are becoming unmanageable, and that a not inconsiderable proportion of inpatients could well have been treated at home. Ways must evidently be sought to eliminate these problems, and some means might well be combined with those seeking an answer to the merit award problem.

The following scheme attempts to do this and is therefore brought to your notice:

(i) Many general practitioners already undertake extra work within their practices in the form of obstetrics, and this is recognized by the Ministry in the form of separate remuneration. There is thus no reason why the same principle should not be applied to doctors undertaking other specialized work such as psychotherapy, minor surgery, cardiology, treatment and prevention of allergic conditions, hypertension, etc., and also haematology and other laboratory investigations.

(ii) It is suggested that general practitioners be invited by their executive councils to submit plans for specialized clinics in which

they would treat patients suffering from conditions in which the doctor has special interests, but who would normally have been referred to hospital.

(iii) It is further suggested that remuneration be allotted from the merit award pool so that large lists of patients could be reduced, or lists kept at lower figures, making time available for this work.

(iv) That doctors be selected for merit awards on the basis of such plans for future specialized work in their practices, together with a personal interview.

(v) The Ministry should fix a sum per merit award, e.g. £250—£500, and select an executive council to conduct a pilot scheme for one or more years. If this proves successful the scheme could then be generalized throughout the country.

(vi) General practitioners who receive these awards should be required to submit six-monthly or annual reports of their work containing such figures as: time spent per session, number of sessions per week, number of patients treated and number of consultations per patient. The data from these reports would be invaluable and could be used in gaining a comprehensive picture of community health and requirements for future planning.

(vii) The above reports could also be considered in conjunction with hospital returns as to outpatient attendances and inpatient turnover so that the effects of extra work undertaken in general practice could be measured.

It must be stressed once again that the word "merit" is here being used to denote not a personal quality but an increased participation in the general framework of the National Health Service. As has already been pointed out, to some extent the Ministry already recognizes this by paying added remuneration to general practitioners undertaking specialized work in the form of obstetrics or clinical assistantships in hospitals, and it is only on the expansion of this recognition that this scheme, in the main, depends.

Finally, it is suggested that the College of General Practitioners would be the best body to undertake the efficient execution of this scheme in conjunction with the Ministry of Health.

Acton.

DAVID S. ROSENBERG.

### Trends in the Mental Health Services

Sir,

I was very interested to read the Gale Memorial Lecture by Dr Curnow on the changed Mental Health Services but I feel that the