

ROYAL COLLEGE OF PHYSICIANS OF  
LONDON :

THE ACTION OF THE COLLEGE IN RELATION TO  
THE NATIONAL INSURANCE BILL.

AN extraordinary Comitia was held on May 25th, Sir THOMAS BARLOW, Bart., K.C.V.O., the President, being in the chair.

The position of the College in relation to the new National Insurance Bill was considered. The PRESIDENT said : Within a day or two of the publication of the National Insurance Bill the importance of considering the bearing of the medical portions of the Bill on the relation of the public to our profession, and especially on the interests of our own Licentiates, was represented to me by several Fellows of the College. Accordingly, with the approval of the Censors Board, I decided at the earliest possible date to summon the Comitia for special consideration of this subject. With the general objects of the Bill I imagine that we should warmly sympathise, and trust that with such safeguards as further consideration may determine many, at all events, of its provisions might become operative. But the medical sections of the Bill are so far-reaching, and its scope is so momentous, that I believe that this College will earnestly beg of the Government that adequate time may be given first for us to learn what the provisions of the Bill really mean, and secondly, to consider fairly what will be the immediate results on the work and the living wage of our Licentiates, and what may be the not very remote effects on our hospital administration and on the practice of medicine generally. Beyond making an emphatic protest against undue precipitancy in coming to a legislative decision about so vital a question I do not propose to offer dogmatic opinions of my own to this College to-day. But it is only proper that I should indicate to you some of the more important issues which it is desirable that you should consider. It may seem somewhat fundamental, but it appears to me first that we are justified in asking whether it is imperative that medical benefits should be a necessary portion of this Bill for State insurance, or whether it would be a wiser policy to let the community deal with its medical needs for itself in accordance with local requirements. But assuming that medical benefits are to form an integral portion of this Bill I will ask whether the previous experiences of doctors with many friendly societies is such as to give confidence in the arrangements for medical remuneration being adjusted by friendly societies. There seems to be a strong and widely felt preference that the general basis of medical payments should be settled by the local health committees, and that medical men should be directly appointed on these committees as well as on the Central Insurance Commission or as a separate medical advisory committee to assist the Central Insurance Commission. In regard to remuneration it seems to be taken for granted that capitation grants are the only possible mode of payment, but I submit that the other method, that of payment for separate attendances, deserves to be fairly weighed. In the National Deposit Friendly Society with certain safeguards it has worked well. So far as I have seen in the Bill there does not appear any provision for dealing with and remunerating attendance on epidemics, or for other exceptional strain, or for night work or mileage in rural districts. We should look with favour on the proposal to separate whenever feasible the payment for medical advice from that for drugs and appliances. If a capitation fee is adhered to, I believe we should all consider 6s. a year per head an extremely inadequate total payment for medical advice, drugs, and appliances. I think we should all desire to stipulate for the free and independent choice of the doctor by each insured person in order to secure the proper confidence between doctor and patient.

There is also the important question of the wage limit and of those persons who, with an income of above £160 per year, might voluntarily place themselves under the same terms with respect to medical benefits. It seems incontrovertible that the enactment of the clauses which refer to the voluntary class would practically wipe out a considerable amount of the private practice of many country and small town practitioners; in fact, the wives and children would constitute in many districts the only private patients left.

These are the more important questions which affect the status of our Licentiates, and I may sum them up by the contention that if this Bill is to accomplish the beneficent objects which are sought it is imperative that our brethren should enter upon their work freed from any sense of rankling injustice and with a definite assurance that they do not stand to lose under these profoundly changed conditions.

We are bound, however, to look further, and ask what will be the effect of this measure on our out-patient departments, on the conditions of admission to our hospital wards, and on the clinical education of our medical students. The very important section of the Bill relating to the provision of sanatoria for cases of consumption has been scarcely noticed by our brethren in consequence of the absorbing character of the problems to which I have referred, but I must trespass on your time for a few minutes by reading a letter which I have received from Sir Richard Powell on this matter.

MY DEAR PRESIDENT,—I am very sorry that it is impossible for me to be present at the College on Thursday as I should have liked to say a word on the subject of the Invalid Insurance Bill now before Parliament, especially on that part relating to tuberculosis.

1. It seems to me desirable that the College should insist upon the importance of sanatorium conditions for the treatment of the disease and should at the same time point out that sanatoria are not necessarily costly erections of bricks and mortar; but the institution in well-selected sites on open spaces of arrangements—whether in open rooms, tents or otherwise—hygienically adapted for the reception of consumptive patients.

2. It is important to impress upon the authorities the necessity of thorough medical supervision of these institutions, but it seems to me undesirable to have medical officers who are specialists in the sense of being exclusively occupied in the treatment of tuberculosis.

3. There should, of course, be some few central institutions where special research is carried on, if already existing special hospitals are not sufficient. But the point that should be kept in view is the diffusion of latest knowledge amongst the profession at large.

4. For every group of villages there should, I think, be a sanatorium (1) under the medical care of a selected local practitioner; (2) generally supervised by the health officer who would be in touch with bacteriology and with notification of cases; (3) financed, &c., by county council with advisory committee of which (1) and (2) would be members.

5. Of course, for large towns and cities modified arrangements on a corresponding scale would be required.

The above are the points I would urge were I able to be present, and I am glad that the College is taking the matter into consideration, for I feel that the public and the profession are in much need of some clear leading on many points, and I hope a committee may be appointed to draw up some report upon it.

Believe me, yours very truly,

(Signed) R. DOUGLAS POWELL.

Now I will ask the Fellows of the College to express their views on this subject, and it is open to any Fellow to submit resolutions if he should think fit, but I strongly suggest that in any case we should appoint a committee *ad hoc* which should obtain as complete information as possible, not only from official sources, but especially from our Licentiates, on the probable working of the different clauses, and that this committee should report to us in due course recommending what step, if any, the College should take.

A prolonged discussion then took place, in which the following Fellows took part:—Sir WILLIAM S. CHURCH, Dr. F. DE HAVILLAND HALL, Dr. W. EWART, Dr. LAURISTON E. SHAW, Dr. W. P. HERRINGHAM, Dr. J. A. HERON, Dr. F. J. SMITH, Dr. R. O. MOON, Dr. S. H. HABERSON, Dr. SIDNEY PHILLIPS, Dr. NORMAN MOORE, Dr. O. J. KAUFFMANN, Dr. FREDERICK TAYLOR, Dr. DAWSON WILLIAMS, Dr. E. I. SPRIGGS, Dr. DONALD HOOD, and Dr. W. HUNTER.

The following resolutions were passed:—

1. Proposed by Dr. HERRINGHAM, seconded by Dr. F. J. POYNTON:—

That this College, while sympathising with the objects of the Insurance Bill, desires, in the interest both of the medical profession and of the public, to express its earnest hope that no further progress be made with the provisions of the Bill relating to medical benefit and sick insurance until ample opportunity has been given to the various bodies representing the medical profession to consider the Bill and to represent their views officially to the Government and to the country at large.

2. Proposed by Sir WILLIAM CHURCH, seconded by the Fourth Censor (Dr. D. B. LEES):—

That the President be requested to convey to the Chancellor of the Exchequer the opinion of the College that time should be afforded for further consideration of the portions of the Bill affecting the medical profession.

3. Proposed by Dr. NORMAN MOORE, seconded by Dr. HERON:—

That the President be desired to appoint a committee to consider the clauses of the Insurance Bill which may affect the Licentiates of the College and the medical profession generally, and the establishment or administration of hospitals and sanatoria for tuberculosis.

The President then dissolved the Comitia.