

Managing Health '93

NAHAT Conference, Bournemouth 16-18th June. Enid Segall reports.

For the fourth year in succession the BHA had an information stand at the annual conference of the National Association of Health Authorities and Trusts (NAHAT). This enables us to reach representatives of the Health Service at manager level and continue our campaign for more homoeopathy in the NHS.

NAHAT recently conducted a survey on complementary therapies in the NHS which showed that in general purchasers had a positive attitude to complementary therapies with more than 70% of FHSAs and GPFHs and 65% of DHAs indicated that they were in favour of some or all complementary therapies being available on the NHS. Homoeopathy was among those viewed more favourably. However, when it came to the factors on decision making on complementary therapies, lack of information on effectiveness topped the list of all three groupings. The report concludes that complementary therapy organisations could usefully disseminate information which clarifies their individual roles, their membership and their relationship with other organisations and institutes. This the BHA does daily by its very existence, let alone its regular attendance at the NAHAT Conference and other similar events.

This year our stand was beautifully positioned right outside the entrance to the main lecture hall which meant that every delegate passed us several times on each of the three days. On the last day the main speaker was the Secretary of State for Health, the Rt. Hon. Virginia Bottomley. She came to the stand, shook my hand and said "Oh, you're here as well! You've got a lot of people lobbying for you these days". She took my reply that we were determined to wear her down in good stead!

Looking at her speech from a homoeopathic standpoint she said much that could be interpreted in our favour. Here are some extracts:

"What is important is that the NHS does have a clear mission or purpose. And management structures must support the fulfillment of that purpose with clarity and force. Our key objectives must be:

- to provide a health service for everybody, on the basis of clinical need, regardless of ability to pay;
- for the NHS to lead the drive for improvement in the health of the nation;
- to secure continuous improvements in the quality of patient care;
- to ensure that treatment and care is targeted to meet local needs;
- and to use the available resources as efficiently as possible to meet the rising demands and expectations of the public."

She went on to say

"Last week I outlined my framework for quality with six key elements.

- more attention has to be paid to the real needs of patients
- purchasing has to be made more effective. In developing their policies, purchasers must reach out to better services for their populations for the future, not seek simply to replicate the past
- and providers need to sign up to more "hard" quality criteria
- accompanied by better translation of research findings into clinical practice
- the delivery of more effective clinical practice through the contracting process and audit

-- and greater partnership between managers and health professionals

Our aim then is to put the patient first and to use quality as our benchmark of success, extending the Patient's Charter into Primary Care, and setting challenging targets for outpatient waiting times.

The structure and ethos of any organisation must serve its goals. For the NHS this means an organisation which motivates its staff to give high quality care to those who need it. I have no doubt about the commitment and skills of our staff. But we must be sure that our systems properly support them in their mission. We must back up their desire to be problem solving, innovative, quick to adapt, skilful at all levels and in all roles.

Through decentralisation, through ownership, through improvement, we have taken vital steps towards reinforcing and harnessing that motivation. We are nurturing and encouraging the entrepreneurial spirit. But it needs our protection still. Too often I meet innovators in the health service who say to me *we hear what you say about Trust freedoms, or the value of pioneering fundholders, or about partnership with the private sector, but down the line the system is still choking our good ideas off. There still seem to be more reasons put forward why we should not do something than why we should.*

In an organisation as large as the NHS, some things will inevitably go wrong. For financial matters we then turn to the Audit Commission. But on our key business - the treatment and care of patients - the patient is the best-qualified auditor. *The Citizen's Charter and subsequently the Patient's Charter have put the patients first.* It was no accident that the Patient's Charter included a right of response when a patient makes a complaint. It formalised what good local health services were already doing: a prompt and thorough reply from the chief executive or unit general manager. Many units have used the new right as a springboard for improving the handling of complaints and I expect this to continue.

What should we expect from an effective complaints procedure?

- it should satisfy the patient
- it should help managers to improve the service
- it should ensure fair treatment for staff; and
- it should help to avoid litigation wherever possible.

On the whole, the NHS has stopped seeing patient complaints as threatening and a reason to react defensively. But an open approach among staff is not always evident and the patients feel the system is stacked against them. *The health service should actively encourage people, staff and patients to express their views forthrightly. Managers should regard these views as a valuable tool. Far sighted managers can use complaints to review services and improve performance.* But the Health Service Commissioner reports that some NHS attitudes to patient complaints need to be improved."

Undoubtedly, pressure for **MORE HOMOEOPATHY IN THE NHS** is growing and Health Service managers are beginning to listen. The NAHAT survey and now the new BMA report all go towards strengthening our hand. There remains, of course, the fact that more doctors have to come forward for training in homoeopathy in response to this change of attitude.

Our grateful thanks to Mrs. Phyllis Williams for helping on the stand each day.

48th Congress of The Liga Medicorum Homoeopathica Internationalis Vienna April 24-28 1993

by ENID SEGALL

To be in Vienna feels rather like being in a permanent operetta as all the buildings look like a Lehar stage set. Just walking from the hotel to the conference venue Palais Ferstel was pure joy. There was a business-like atmosphere yet the Viennese obviously enjoy life. There was none of the grim faced dedicated efficiency of the Germans. The area was pedestrianised and the many cafes had people sitting outside enjoying the sunshine along with their gigantic ice creams or cream cakes with coffee and still more cream.

Palais Ferstel was originally the grand home of the Austro-Hungarian Bank which is now converted into a shopping arcade with facilities for conferences and meetings. It has beautifully carved and inlaid woodwork, sweeping staircases, arched windows and many glittering chandeliers. The BHA book stand was well situated opposite the entrance to the exhibition area and everyone attending the congress had to pass us on the way to lectures. As usual we acted as an information point for the British Homoeopathic Journal and The Faculty of Homoeopathy.

Book sales are always brisk at such an event. We shared the cost of the stand with Beaconsfield Publishers whose books we sell and their Director, John Churchill was present to help and do business on his own behalf. Of special interest were the new titles 'Typology in Homoeopathy' by Léon Vannier, MD and 'The World Travellers' Manual of Homoeopathy' by Dr. Colin Lessell as well as our own publication 'Homoeopathy for Midwives (and Pregnant Women)' by Dr. Peter Webb.

International events provide the opportunity for the exchange of news and views and once again there was participation from doctors from countries previously denied such an exchange, namely Hungary, Romania, Russia and what was Czechoslovakia. Naturally Austria and Germany were

well represented with over 100 delegates each. It seems that homoeopathy is well accepted in Austria and is integrated into medical care. For example, Dr. Willinger who works at a psychiatric hospital on the outskirts of Vienna told me that patients are assessed on admission according to a protocol agreed by all the doctors at the hospital and those deemed suitable candidates get homoeopathic treatment.

The day before the Liga meeting began, CIPH (Comite International des Pharmaciens Homoeopathes) held its Annual General Meeting which I attended on behalf of our Chairman. There was a strong contingent from the British Homoeopathic Manufacturers Association present as well as the main French and German manufacturers. Others came from as far afield as Israel, Brazil and Greece, Italy and Holland. Tony Pinkus of Ainsworth's was elected Treasurer of CIPH which means that the British point of view will be put regularly to the fore again.

At the close of the LMHI Congress there was a splendid dinner dance held at the Vienna Town Hall which is huge and impressive. As it happens a Great Uncle of mine worked there and I had visions of him scuttling up and down the long corridors. To serve a buffet meal to such a large number of people leads to difficulties, not least because people on homoeopathic medicine have extraordinarily good appetites! The British Ambassador and his wife were the guests of the British contingent and they were fully informed about homoeopathy by the end of the evening. The entertainment was provided by Dr. Masi-Elizalde of Argentina dancing the tango with an elegantly dressed lady with style and grace while everyone cheered and clapped. Two Dutch doctors then sang the following words to the tune of the Beatles' song 'Yesterday' which was very courageous of them when you think that English is not their mother tongue.

"Globuli, give me again some globuli because the pain came back to me so bad, I'm suffering, you see.

Globuli, give me again some globuli as Hahnemann said it should be to cure me quick and constantly.

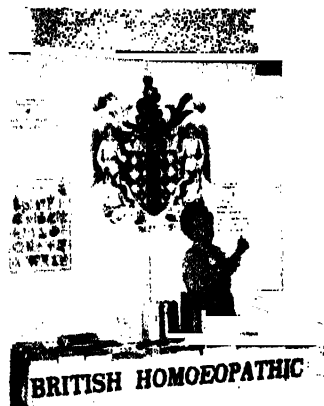
There is something wrong and I don't know how to say, But a Homoeopathic consultation may save the day.

Globuli, give me again some globuli I need again my remedy so check it in your repert'ry to find the drug that matches me.

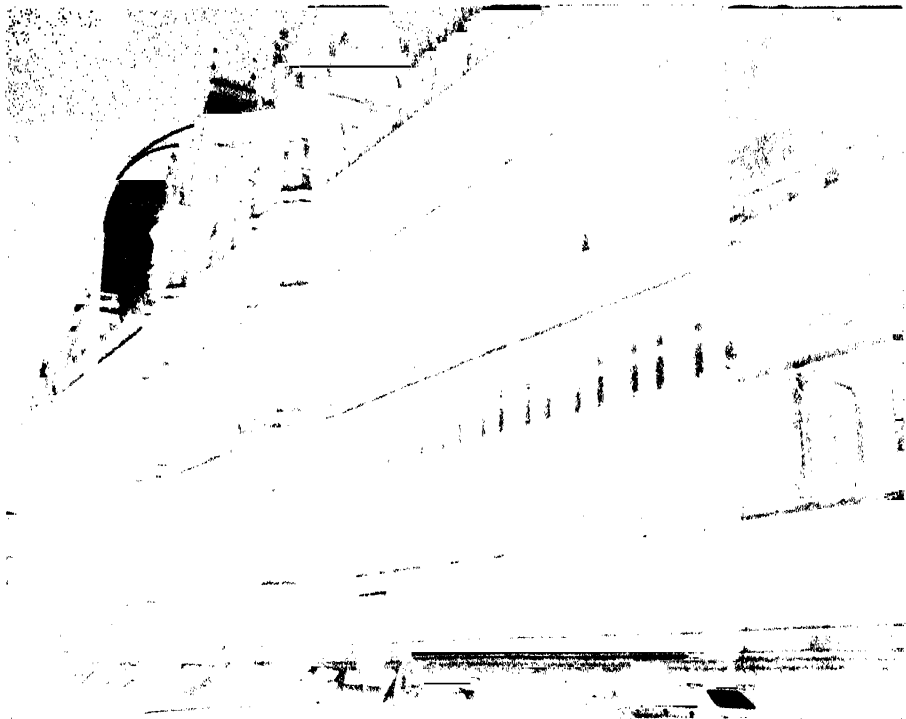
Globuli, I don't need any globuli I'm feeling happy and of pain I'm free oh Doc, thank you for curing me thank you and thank Homoeopathy".

It was a memorable evening and being at the 48th Congress will remain a very happy memory.

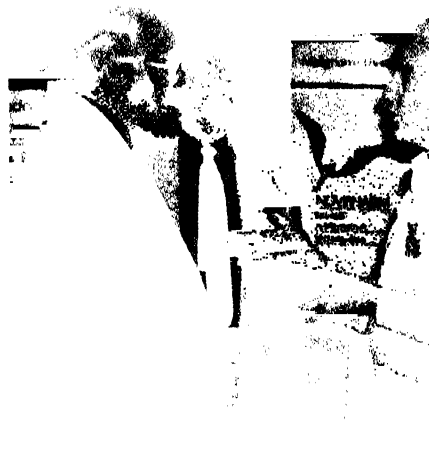
The 49th Congress will be held in India in October, '94. Drs. Chand (Father and Son) did a wonderful PR job publishing the event, distributing information leaflets, each with a peacock feather. (The peacock is the national bird of India). Mine glints in the sun as I write this, wafting in the breeze — beckoning me to Indiaaaaah!



The Gen. Sec. in action at the LMHI Congress in Vienna



Vienna Town Hall - Scene of the last night's celebration.



Dr. David Ratsey,
President of The Faculty of Homoeopathy,
discussing a knotty problem with
Drs. Barry Rose and David Spence.

Book Review

"Homoeopathy for the Third Age"

by DOCTOR KEITH SOUTER

Published by the C.W. Daniel Company Limited,

ISBN 0 85207 268 6. pp 225.

S.B. £9.95; £11.25 with p. & p.

This publication by a practising G.P and homoeopathic physician, part-time university tutor and medical journalist, is a very straight forward practical, professional work.

Well suited for use by the older members of society, the senior citizens, it is nevertheless good family reading.

Divided into three parts; part one Homoeopathy and the Third Age covers the nature of homoeopathic treatment, with a useful section on constitutional types and the special individual nature of homoeopathic management of disorders.

Part two, General Problems of the Third Age runs from chapter six to chapter sixteen embracing the blessing of sleep; arthritis and rheumatism, the chest and waterworks to mention a few.

All chapters are set out in sensible brevity, with important emphasis in mind. Frequently exhortations are made to refer problem matters for medical assessment, and on no account to abandon regular medication without the physician's approval.

Part three details the method of taking the medicines, has a materia medica of 57 medicines and a therapeutic index. The materia medica highlights the constitutional remedies.

The concise clear style of the materia medica is designed to lend to ease of remedy selection, and the therapeutic index is confined to important leading conditions likely to occur, and capable of being dealt with.



A section on the Bach Flower remedies is unusual, but certainly finds a place in such work although not strictly following the more complete homoeopathic symptom plan. Many families and senior citizens will find this work of value, and will find it a good buy at £9.95.

J.B.L.A. May, 1993.

New Threat to The Homoeopathic Hospital, Bristol

IRRESPONSIBLE MISUSE OF A VALUABLE ASSET

The Hospital is beautifully and substantially built, standing in its own gardens and grounds. The Foundation Stone was laid in 1921 by the then Prince of Wales — later briefly Edward VIII. It is designed so that all the wards face south over the gardens, and has approximately 100 beds. The Hospital was given to Bristolians by the Wills Family in memory of one of their sons killed in the First World War and so, in a sense, is a War Memorial Hospital.

It was built with the specific intention that it should provide medical homoeopathy in addition to other conventional medical or surgical services. The Hospital has served Bristolians well and is much loved.

It is one of the last three Homoeopathic Hospitals in England — the others being in London and a small hospital in Tunbridge Wells. Approximately seven years ago it was closed, ostensibly for refurbishment (only the Out-Patients Department remaining in the Hospital). The homoeopathic physicians were given repeated written assurances that homoeopathic services would be fully restored. As time went on it became apparent that the Health Authority was unable or unwilling to honour its commitment.

Health Authority Plans

It is now proposed to remove homoeopathy from the Hospital altogether and put the busy Out-Patient Department in an annexe in the grounds of the Hospital. The Hospital is going to be turned into offices. This was done without any consultation with the homoeopathic physicians or the Bristol Medical Homoeopathic Group.

The first news of the plan was printed inconspicuously in a local newspaper.

For the last few years a group of dedicated professional people have been devising ways of saving the Hospital and using it, as was intended, for treating patients. They are at present formulating plans which are at an advanced stage and which will provide income for the National Health Service. They are briefly as follows:

- ★ To reestablish homoeopathy in the Hospital for In-Patients and Out-Patients, and to expand our Out-Patient Department so that we can cut down on the very long waiting lists.
- ★ The restored beds would be shared with General Practitioners (a large practice has bought the building immediately opposite the Hospital). The Hospital would be an excellent Community General Practitioner Hospital.
- ★ To establish clinics for qualified doctors specialising in complementary therapies — acupuncture, osteopathy, etc. — so that the Hospital would become a “Centre of Excellence” for complementary medicine in the South West. (Complementary medicine is the fastest growing section of the National Health Service).
- ★ To use that part of the Hospital not required for homoeopathy as a superior private nursing home for which there is an evident and growing need.

- ★ To establish a Health Shop in the Hospital and a Pharmacy with a postal service.

Far from costing money, these plans would generate money for the National Health Service.

Medical Homoeopathy

Medical homoeopathy is enjoying greater popularity now than at any time in its history. There is a great and growing demand for this speciality for which the Hospital was built, and increasing numbers of qualified doctors to provide it.

About 3,000 patients from the South West of England and elsewhere are seen at the Hospital each year. Homoeopathic medicines cost pennies rather than pounds, and large sums of money might be saved for the National Health Service by encouraging this most cost-effective therapy.

Our waiting lists (of National Health patients referred by doctors) are 10/11 months long; we urgently need to expand in order to reduce them.

We have the signatures of 500 General Practitioners from the South West of England supporting Homoeopathy, and deploring the possibility of its being removed from it (in addition to some thousands of patient's signatures).

Postgraduate courses in homoeopathy are among the most popular in the country, and many doctors look to Bristol as a centre of education. We need to expand educational initiatives to meet the demand, and this can only be done from the Hospital.

The British Medical Association's report on complementary medicine — in which homoeopathy probably leads the field (a recent survey found that 70% of General Practitioners had referred patients to homoeopaths) — has stated that complementary medicine has an important and growing role in patient care.

It is surprising that the Health Authority does not seem to appreciate, as do other Health Authorities, that the provision of medical homoeopathy is — because of its growing popularity, cost-effectiveness and non-toxicity — an asset that should be encouraged for the benefit of the community.

Patients

The most important consideration is the patients' health and wellbeing.

Patients come from great distances to our Hospital. Many have also been to a number of specialist clinics. We have demonstrated that our results are very good.

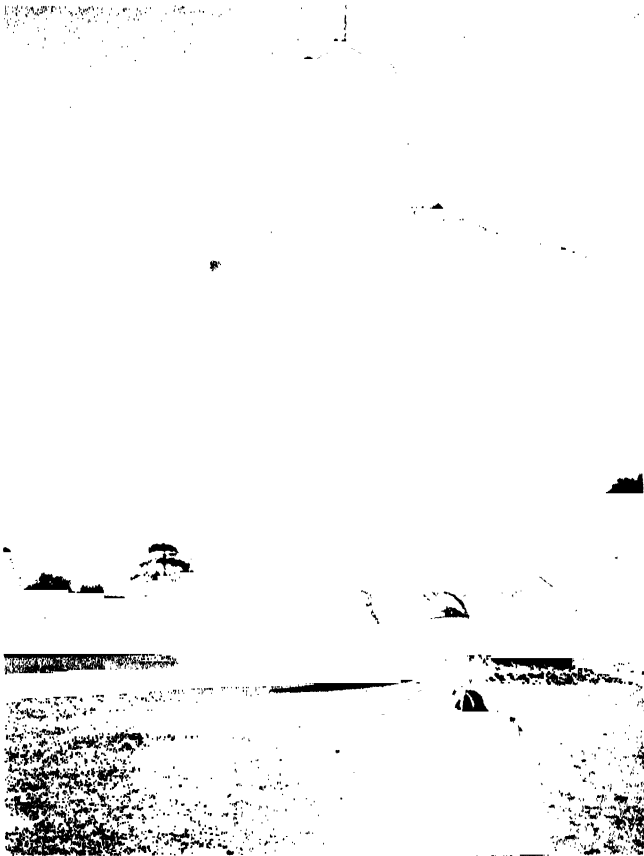
If we have to contract our services, patients will be greatly disadvantaged and many will be forced to go to the private sector or to seek help from non-medically qualified homoeopaths (some of whom might constitute a danger to their health and possibly even to their life). We consider the health of our patients is more important than offices.

Finally, this short-sighted and disgraceful misuse of a valuable and much needed asset is irresponsible, and will adversely affect a large number of patients now and in the future.

Please add your weight to the protest by writing to:

Mr. G. H. Johnson, Bristol & District Health Authority, 10 Deghton Street, Bristol, BS2 8EE.

Summer Days Out



The late Dr. Margery Blackie at Hedingham Castle.

There is now a permanent display on the life of Dr. Margery Blackie at HEDINGHAM CASTLE, Castle Hedingham, Halstead, Essex. It has a superb Norman keep and is where Dr. Blackie lived and wrote her best seller 'The Patient, not the Cure'.



At a lunch to mark one year of operation of the BHA Sponsored Sidmouth Homoeopathic Clinic our President John Ainsworth and his wife Peggy were presented with gifts of appreciation on behalf of the Sidmouth Homoeopathic Group by young Kirsty Johnstone. Pictured on the left: Mrs Lucinda Ward, Chairman of the Group and Volunteer Appointments Secretary at the Clinic.

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