

NATIONAL HEALTH SERVICE ACT, 1946.

Central Health Services Council

Report of the Central Health Services  
Council for the Year Ending December  
31, 1950, preceded by a Statement  
made by the Minister of Health

NATIONAL HEALTH SERVICE ACT, 1946

**CENTRAL HEALTH SERVICES  
COUNCIL**

Report of the Central Health Services  
Council for the year ending December  
31, 1950, preceded by a Statement made  
by the Minister of Health

*Required by Section 2 (5) of the National Health  
Service Act, 1946, to be laid before Parliament*

*Ordered by The House of Commons to be Printed  
30th April 1951*

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## Statement by the Minister of Health

The Central Health Services Council is constituted by section 2 (1) of the National Health Service Act, 1946, and is required by section 2 (5) to make an annual report to the Minister of Health on its proceedings. That report is also to cover the proceedings of the Standing Advisory Committees constituted under section 2 (3) of the Act. The report is to be laid before Parliament with such comments as the Minister thinks fit.

This is the second report to be submitted. It covers the calendar year 1950. In this period the National Health Service was starting to settle down and the number of major problems was somewhat less than in the initial 18 months which were dealt with in the Council's previous report. Nevertheless, as will be seen from the report itself, there is still a wide range of matters on which I am glad to be able to seek the advice of the Council and the Standing Advisory Committees and on which the Council and the Committees have submitted advice to me. I welcome this opportunity of publicly thanking the members for all the work they have done.

The reports of the Standing Tuberculosis and Standing Nursing Advisory Committees, dealt with in Part I of this report, have played an essential part in preparing the way for the drive to get more hospital beds opened for tuberculosis patients, which was one of the major developments in the Health Service during 1950. Those recommendations of the Standing Tuberculosis Advisory Committee which could be put into effect at once within the limitations imposed by present resources were sent to Regional Hospital Boards and local health authorities. The most important of these was the need to set aside suitably segregated beds for tuberculous cases in general and isolation hospitals. A substantial increase of beds has been achieved already and a further considerable addition is in sight. A start has been made in London in working out schemes on the lines proposed by the Standing Nursing Advisory Committee for the secondment of student nurses to sanatoria.

The Council's other main contribution to the development of the hospital service during the year was its report on hospital administration in which it dealt with the constitution and power of the Regional Hospital Boards and their relations with each other and with the Ministry. My predecessor accepted many of the recommendations, which also appear in Part I of this report, and action has already been taken on them. An important one, relating to the standing orders of hospital authorities, is under consideration. I also accept the Council's view that control should be exercised over the administrative and clerical staffing of hospital authorities, but because of the urgency of the need to secure economies I have decided to go, in some respects, even further than the Council recommends. Individual establishments, including the number of officers required in each grade, are being worked out for each of the hospital authorities following visits by small teams of selected experts, associated, where the staff of a Management Committee is being reviewed, with representatives of the Regional Board. Once the establishment is fixed, authority will be required before appointments in excess of it are made. Similarly, other teams are visiting hospitals to review medical, nursing and domestic staffs in consultation with the hospital authorities themselves.

Towards the end of the year my predecessor felt that the time had come for the Council to follow up its wide-ranging study of the hospital service by undertaking a review of the structure of general practice. He therefore asked the Council to advise him whether the existing arrangements for

engaging in general practice under the National Health Service were such as to enable general practitioners to provide the best possible standard of service. The Council accepted the remit and has, as recounted in this report, set up a special Committee which is now at work.

This was not by any means the only activity of the Council during the year in connection with the general practitioner service, for it has continued its close watch on prescribing. The recommendations of the Joint Committee of the Council and the Scottish Council on Prescribing on Form E.C.10 (para. 19) have been accepted. The report was published and sent to all doctors with a letter asking for their assistance in avoiding unnecessary expense on drugs. One of the recommendations in the report was that it was undesirable that medicinal preparations advertised direct to the public should be prescribable. A list of such preparations was prepared and sent to doctors, who were asked not to prescribe the preparations unless it was clear that there was some special justification for doing so in an individual case. The advice in the Second Report of the Joint Sub-Committee on the Definition of Drugs (para. 18) has also been accepted. This report, and the first report—which dealt with the classification of borderline substances as foods or drugs (previous report, para. 19)—have been published and sent to doctors for their guidance. The English and Scottish Councils have continued to work together on these questions of prescribing and the advice given in the various reports has been accepted by the Secretary of State for Scotland.

Part II of the report contains in full the Council's report on the lines on which Health Centres should be developed. I cannot allow the opportunity to pass without expressing my indebtedness to the Council, and to its Health Centres Committee, for the extensive and detailed study which they made of this subject. I am considering the conclusions and recommendations and I propose to have this part of the Council's report sent to all local health authorities.

Most of the detailed recommendations made by the Standing Advisory Committees and listed in Part III of the report have been accepted and many of them have already been acted upon.

HILARY MARQUAND.

April, 1951.

PORTLAND PLACE,

LONDON, W.1.

March, 1951.

SIR,

**CENTRAL HEALTH SERVICES COUNCIL**

I have the honour to present our report for the year ending 31st December, 1950.

This report, as required by section 2 (5) of the National Health Service Act, 1946, covers not only our own proceedings but those of the Standing Advisory Committees. In Part I we deal with the principal subjects of general interest with which we have been concerned. In Part II we reproduce in full our report on Health Centres. In Part III we give an account of the work of the Standing Advisory Committees insofar as that is not covered in Part I.

The report does not include an account of the constitution of the Council nor of the Standing Advisory Committees. This will be found in our previous report for the period ending December, 1949.\*

I am, Sir,

Your obedient Servant,

FRED MESSER,  
Chairman of the Council.

To the Right Honourable HILARY MARQUAND, M.P.  
Minister of Health.

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\* Report of the Central Health Services Council for the period ending December 31st, 1949, preceded by a statement made by the Minister of Health, London, H.M.S.O. One shilling.

**MEMBERS OF CENTRAL HEALTH SERVICES COUNCIL AS AT  
31st DECEMBER, 1950**

*Ex-officio (6 members)*

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Sir CECIL WAKELEY, K.B.E., C.B., F.R.S.Ed., D.Sc., F.R.C.S., F.A.C.S., F.R.A.C.S.	President of the Royal College of Surgeons of England.
Professor HILDA NORA LLOYD, B.Sc., M.B., Ch.B., F.R.C.S., F.R.C.O.G.	President of the Royal College of Obstetricians and Gynaecologists.
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Professor DAVID CAMPBELL, M.C., M.D.	President of the General Medical Council.
Sir ALLEN DALEY, M.D., F.R.C.P., D.P.H.	Chairman of the Council of the Society of Medical Officers of Health.

*Medical Practitioners (15 members)*

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\* Dr. Brain succeeded Lord Moran, M.C., M.D., F.R.C.P., as President of the College and *ex-officio* member of the Council in 1950.

† Professor Cruickshank succeeded Professor William George Barnard, F.R.C.P., M.R.C.S., in April, 1950, as a member of the Council.

‡ Sir Stewart Duke-Elder succeeded Aleck William Bourne, Esq., M.A., F.R.C.S., F.R.C.O.G., as a member of the Council in March, 1950.

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JOSEPH LAUER, Esq., L.D.S.R.C.S. ... ..	31.3.53

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CLIFFORD FRANK COMER, Esq. ... ..	31.3.52

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*Certified Midwife (1 member)*

Miss NORA BRYAN DEANE, M.B.E., S.R.N., S.C.M. ... ..	31.3.51
--	---------

*‡Registered Pharmacists (2 members)*

Alderman WILLIAM JOHN TRISTRAM, J.P., M.P.S. ... ..	31.3.52
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\* Mr. Stancliffe succeeded Sidney Clayton Fryers, Esq., C.B.E., F.H.A., as a member of the Council in March, 1950.

† Professor Bradlaw succeeded Harry Thomas Roper-Hall, Esq., M.D.S., M.B., Ch.B., M.R.C.S., L.R.C.P., F.D.S.R.C.S., as a member of the Council in March, 1950.

‡ Richard Henry Henriksen, Esq., A.R.I.C., M.P.S., resigned in October, 1950. At 31st December, 1950, there was a vacancy on the Council.

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## APPENDIX I

MEMBERS OF STANDING ADVISORY COMMITTEES AND COMMITTEES OF THE COUNCIL  
AS AT 31ST DECEMBER, 1950

### STANDING MEDICAL ADVISORY COMMITTEE

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Professor Sir HENRY COHEN ( <i>Chairman</i> ) ... ..	31.3.52
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E. A. GREGG, Esq. ... ..	Whilst Chairman of the Council of the British Medical Association.
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H. JOULES, Esq. ... ..	31.3.51
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W. N. PICKLES, Esq. ... ..	31.3.51
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Professor Sir JAMES SPENCE ... ..	31.3.52
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WILLIAM GILCHRIST PATTERSON, Esq., M.D., M.R.C.P., D.P.H. ... ..	31.3.52

At 31.12.50 there was one vacancy on the Committee.

\* Dr. Brain succeeded Lorn Moran as President of the Royal College of Physicians in April, 1950.

† Professor Cruickshank succeeded Professor Barnard as a member of the Committee in April, 1950.

‡ Sir Stewart Duke-Elder succeeded Mr. Aleck Bourne as a member of the Committee in April, 1950.

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(a) *Members appointed by the Minister after consultation with the Council*

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(b) *Members appointed after consultation with representative organisations*

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Professor EDWARD JOHNSON WAYNE, M.D., Ph.D., F.R.C.P.	31.3.53

R. H. HENRIKSEN, Esq., served on the Committee as Vice-Chairman till October, 1950, when he resigned from the Council and the Committee. At 31.12.50, there was a vacancy on this Committee.

## STANDING OPHTHALMIC ADVISORY

*Period of Office Until*

(a) <i>Members appointed by the Minister after consultation with the Council</i>	
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Sir STEWART DUKE-ELDER ... ..	31.3.53
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ALBERT EDWARD TURVILLE, Esq., F.B.O.A., F.S.A.O., D.Orth.	31.3.52
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OSCAR WILLIAMS, Esq., M.B., B.S., M.R.C.S., L.R.C.P. ...	31.3.53
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Miss N. B. DEANE ... ..	31.3.51
The Hon. ARTHUR HOWARD ... ..	31.3.53
H. JOULES, Esq.* ... ..	31.3.51
Miss E. J. MERRY ... ..	31.3.52
F. S. STANCLIFFE, Esq.† ... ..	31.3.53
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Miss BEATRIX JULIA WALL, S.R.N., R.M.N. ... ..	31.3.53

\* Dr. Joules succeeded Mr. Clayton Fryers as a member of this Committee in March, 1950.

† Mr. Stancliffe succeeded Alderman Bradbeer as a member of this Committee in March, 1950.

‡ Appointed to a vacancy in April, 1950.

## STANDING MATERNITY AND MIDWIFERY ADVISORY COMMITTEE

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Professor Sir JAMES SPENCE ... ..	31.3.52
Mrs. D. THURTLÉ ... ..	31.3.53
C. W. WALKER, Esq. ... ..	31.3.53
Alderman W. E. YORKE ... ..	31.3.51

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Miss JEAN McIVER MACKINTOSH, M.D., D.P.H., D.P.A. ...	31.3.53
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## APPENDIX II

### SCHEDULE OF ADVICE TO THE MINISTER GIVEN BY THE COUNCIL AND STANDING ADVISORY COMMITTEES FOR THE YEAR ENDING 31ST DECEMBER, 1950

<i>Date</i>	<i>Advice given by</i>	<i>Advice</i>
19. 1.50	Dental S.A.C. ... ..	Oral Hygienists: A statement should be issued to the professional press about the experiment in the training of oral hygienists. See para. 151.
8. 2.50	Tuberculosis S.A.C. ... ..	Organisation of the Tuberculosis services: see paras. 1-8.
21. 2.50	Mental Health S.A.C. ... ..	Links with mental health work in the fighting services: see para. 169.
3. 3.50	Pharmaceutical S.A.C. ... ..	} Definition of Drugs: see para. 18.
14. 3.50	Medical S.A.C. ... ..	
10. 5.50	Council ... ..	Prescribing: see para. 19.
13. 6.50	Council on report of its Hospital Administration Committee.	Hospital Administration: see para. 15
13. 6.50	Council on report of its Health Centres Committee.	Health Centres in New Towns and on New Housing Estates: see para. 25.
13. 6.50	Council on report of its Cancer and Radiotherapy S.A.C.	Cancer Publicity: see para. 174.
15. 6.50	Dental S.A.C. ... ..	Conditions with respect to materials. The use of translucent silicate cements in fillings in anterior teeth and in cavities in first and second pre-molars not involving the occlusal surface should be allowed under the National Health Service.
15. 6.50	Dental S.A.C. ... ..	Drugs prescribable by Dentists: Mistura Magnesium Sulphatis Alba N.F. should be prescribable by dentists under the National Health Service.
22. 9.50	Mental Health S.A.C. ... ..	Supply of nurses in Mental Hospitals and Mental Deficiency Institutions: see para. 166.
22. 9.50	Mental Health S.A.C. ... ..	Psychiatric in-patient units in connection with Teaching Hospitals: see para. 167.
18.10.50	Council ... ..	Secondment of Nurses by Teaching Hospitals to T.B. Sanatoria: see paras. 9-11.
18.10.50	Council on report of Nursing and Maternity and Midwifery S.A.C.'s.	Status of head midwife of the maternity department of a general hospital. See para. 164.
16.11.50	Dental S.A.C. ... ..	Drugs prescribable by Dentists: Mouth washes containing morphine salts should not be prescribable by dentists under the National Health Service.
16.11.50	Dental S.A.C. ... ..	Oral hygienists: see para. 151.
27.11.50	Pharmaceutical S.A.C. ... ..	Shortage of qualified pharmacists: see para. 155.
12.12.50	Medical S.A.C. ... ..	Use of heroin: see para. 147.
12.12.50	Council on report of Nursing S.A.C.	Nursing Techniques: see para. 159.
12.12.50	Council on final report of its Health Centres Committee.	Health Centres: to be developed along the lines indicated in the Committee's final report: see Part II.

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