# Future family docs will be mainly in private practice

The Report of the Committee of Inquiry into a National Health Insurance System seems to me to be working against itself.

It has the stated intention of encouraging general practitioners to join the public service within the district health model. It says: "It is intended that conditions of service should be substantially improved."

At the same time they say: " The details of the actual responsibilities and relationships between PHC nurses and medical practitioners will be determined at district and institutional level." This avoids making a decision about one of the most crucial elements within the PHC and District Health System. The one thing they are very clear about is that: "PHC Nurses are envisaged as the front line providers of clinical PHC services within public facilities, with referral to medical and to other allied health personnel, as appropriate."

A further provision is for, "health care teams, involving a range of personnel, including medical practitioners, PHCNs and allied health personnel", to become accredited providers to a registered patient group and compete for contracts from the District Health Authority..

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It seems that the public service model de-emphasises the team. The doctor is consulted when needed and sees patients on referral only. There is no mention of a team approach in which both doctors and nurses, and other health workers can function to their full potential in clinical matters, planning and management. Surely, self respecting family physicians will opt to compete for accredited provider contracts rather than work as marginalised people in the public sector. Offering higher salaries and better perks alone, will not sustain highly trained and motivated people to persevere in a public service career. All of us want some job satisfaction as well.

I sincerely hope that my interpretation of the Report is wrong, but that is how I read the words, the formulations and emphases of the authors.

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