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QUEEN ANNE'S GATE LONDON SWIH 9AT

27 Sylun 1949

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CONTINGENCY PLANNING IN THE HEALTH SERVICE

As part of the review of our contingency planning against possible industrial action, the Civil Contingencies Unit (C.C.U.) at official level have asked for Ministerial approval and guidance on two matters concerned with the National Health Service.

First, it has been envisaged in outline plans that Service personnel might be used on general duties in the N.H.S. (stokers/mechanics; electricians; in laundries; drivers). But to have plans which can be put into action rapidly and effectively the Services need to know how many, and what kinds of staff are needed where. That requires consultation with the Health Authorities. If the consultation is left until trouble is brewing it has seemed in the past more likely to exacerbate the problems than to help - and so the plan has never been used. Your Department has therefore proposed to C.C.U. that they should consult now - at a time of peace. Even that is likely of course to be represented by the unions as provocative - if, as is almost inevitable, news of the consultations leaks out. The handling of public relations in that event would need careful thought - but it seems to me that we must grasp the nettle now, since we should otherwise have to accept that our plans for using Service personnel in these aspects of the N.H.S. will be seriously defective.

Secondly there is the question of the ambulance service. Plans exist to use Service drivers and attendants to man the N.H.S. ambulances. But the previous Government fought shy of actually taking that step. A lesser "emergency-only" service can be provided without using N.H.S. vehicles, by combining police, voluntary service, and some Service ambulances. This procedure was adopted in some areas last winter. There is no point in our maintaining a paper plan which no-one is willing to implement. So several questions arise. Are we as a Government willing in principle to use troops to drive N.H.S. ambulances in a strike-breaking role? If we are - will the Health Authorities, on whom the management decisions rest - take the same view? Or would they prefer to settle for the "emergency-only" service using non-N.H.S. vehicles? Again consultation with the Health Authorities is needed to find out.

/I shall...

The Rt. Hon. Patrick Jenkin, M.P.

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I shall be reporting to E Committee colleagues during October on the state of contingency planning generally, but meanwhile I accept the view of C.C.U. officials that early Ministerial guidance is needed on these important N.H.S. plans.

Subject to any views which you and our colleagues may have, I would propose to authorise the necessary consultations with Health Authorities. Since it is important that consultations - if they are to occur - should be undertaken as soon as possible, I should be grateful for replies before 3rd October. I am copying this letter to the Prime Minister and members of E Committee, the Secretary of State for Defence, the Secretaries of State for Scotland, Wales and Northern Ireland, the Paymaster General, and Sir John Hunt.

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QUEEN ANNE'S GATE LONDON SWIH GAT

10 October 1979

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Dear Secretary of Plate

CONTINGENCY PLANNING IN THE HEALTH SERVICE

The replies which I have received to my letter of 27 September all indicate that our colleagues are content that consultation should now take place with Health Authorities about contingency planning against possible industrial action in the Health Service. You may take it therefore that you have authority to proceed with these consultations.

In conducting these consultations officials will no doubt take account of the comments which our colleagues have made, particularly as regards the need to keep the consultations confidential and as regards the line to be taken should they leak - ie that the Government has an overriding responsibility to maintain essential services and the consultations are simply part of sensible and routine planning and in no way imply that the Government is expecting disruption in the Health Service. Officials will also need to take account of Francis Pym's comments as regards the way in which the contingency plans for the use of servicemen to drive ambulances are presented to Health Authorities.

I am copying this letter to the Prime Minister and members of E Committee, the Secretaries of State for Defence, Scotland, Wales and Northern Ireland, the Paymaster-General and Sir John Hunt.

Yours surenely
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Approved by the Home Secretary and signed in his absence.

The Rt Hon Patrick Jenkin MP

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Y SWYDDFA GYMREIG

WHITEHALL LONDON SWIA 2ER

Tel. 01-233 3000 (Switsfwrdd) 01-233 6106 (Llinell Union)

Oddi with Ysgrifennydd Gwladol Cymru The Rt Hon Nicholas Edwards MP



WELSH OFFICE

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GWYDYR HOUSE
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Tel. 01-233 3000 (Switchboard) 01-233 6106 (Direct Line)

From The Secretary of State for Wales

CONFIDENTIAL

4 October 1979

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CONTINGENCY PLANNING IN THE HEALTH SERVICE

Thank you for sending me a copy of your letter of 27 September 1979 to Patrick Jenkin.

As you will know, the original initiative for consultations with the Health Authorities came from my Department jointly with the DHSS. Therefore, I need hardly say that I am very much in favour of the course you propose. I recognise that this might result in Union complaints, but if your prediction that they will get to hear of this exercise proves to be correct, I am convinced that we could, and should, present our actions as prudent precautions taken in the interest of patients.

I am copying this letter to the recipients of yours.

/ over

Rt Hon William Whitelaw MP Home Secretary Home Office 50 Queen Anne's Gate LONDON SW1H 9AD

MINISTRY OF DEFENCE WHITEHALL LONDON SWIA 2HB TELEPHONE 01-218 9000 DIRECT DIALLING 01-218 2111/3 CONFIDENTIAL MO 19/1 4th October 1979 Dear Willie Thank you for your letter of 27th September about contingency planning in the Health Service. As far as the plan for replacement of hospital ancillaries is concerned I am prepared to see the suggested consultation with the Health Authorities taking place. I accept that it is only through such consultation that we shall be able to be satisfied that any plans for the use of Servicemen in this field are both realistic and workable. As for consultation on plans for the use of Servicemen to drive either National Health Service ambulances or Service ambulances, I would also be content to see this taking place, provided that it is made clear to the Health authorities that they are not necessarily being given a choice as between the two plans but that rather we are testing the water to see which of the plans would be preferable to the majority of Health Authorities and for what reasons. I believe that we must reserve to central Government any final decision as to which of the two plans we should go for or whether we can live with some combination of both. On this latter point, / you ... The Rt Hon William Whitelaw CH, MC, MP CONFIDENTIAL

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you will not be surprised to hear that I have some reservations about trying to implement two separate plans in various parts of the country to deal with one emergency; but I will reserve any final view on this until we have the outcome of the consultation with the Health Authorities.

I am copying this letter to the copy addressees of yours.

Jano les Jan Lis

Francis Pym

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DEPARTMENT OF HEALTH & SOCIAL SECURITY

Alexander Fleming House, Elephant & Castle, London SEI 6BY

Telephone 01-407 5522

From the Secretary of State for Social Services

The Rt Hon William Whitelaw CH MC MP Secretary of State for the Home Department Home Office 50 Queen Anne's Gate London SW1

3 October 1979

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Dea Cullie,

CONTINGENCY PLANNING IN THE HEALTH SERVICE

Thank you for your letter of 27 September about contingency planning in the NHS.

Of the issues you raise, the first - the review of plans to use Service personnel on general duties in the NHS - seems to me to be clear-cut. Existing plans were drawn up without the benefit of advice from those with operational responsibility for the health service - the health authorities themselves. Without that advice the plans can only be a paper exercise and could not be put into operation without, in all probability, last-minute consultation and consequent change. We simply do not know, for example, the extent to which health authorities think that the tasks earmarked for troops could be performed by volunteers from inside the NHS, outside volunteers (assuming Ministerial approval is forthcoming), supervisors or retired men. Without that knowledge we have had to make inspired guesses which, with the best will in the world, are bound to be wrong in some instances.

I am convinced that early consultation is essential. Whatever the possible consequences of news of these consultations leaking out, they could not possibly be worse than the consequences of trying to consult during or in the run-up to a dispute. We would, of course, do our level best to ensure that the consultations stayed confidential, though this cannot be guaranteed, as your letter recognises.

The second issue is that of the case of Service personnel in the ambulance service. If anything, the need for consultations with the NHS on this issue is even more urgent than on the question of troops for general duties. Already, as health authorities begin to consider ways of cutting out restrictive practices in the ambulance service in line with the recommendations of the Clegg Commission, there are signs of trouble ahead.

But the issue is complex. For my part, I would prefer to see a plan adopted under which Service personnel drove NHS ambulances. In consulting the NHS, I would ask my officials to argue for this plan. But it has to be accepted that if the general view of NHS management, or of a significant proportion of it, is that the plan is unworkable, we would have to make plans for using Service personnel in Service ambulances, as was the case last winter. Depending on the outcome of consulting the NHS we could either adopt on a national basis whichever plan seemed to carry the greatest support in the NHS, or (and I recognise that there may be serious practical difficulties) allow each Ambulance Authority to opt firmly now for one plan or the other. Before reaching decisions on these issues, we need to consult Health Authorities and to do so quickly. I hope, therefore, that colleagues will agree to my officials, in conjunction with MOD, proceeding urgently with these consultations.

Meanwhile, I can assure colleagues that we have already done a great deal of work in overhauling our contingency planning as far as we are able without consulting the NHS. We have also discussed with the NHS the sort of advice and guidance it would be proper and practicable to give NHS management in the event of a major dispute. And we have urged on them the importance of making their own contingency plans to mitigate the worst effects of disputes, whether national or local.

I am copying this letter to the recipients of yours.

SCOTTISH OFFICE
WHITEHALL, LONDON SWIA 2AU

The Rt Hon William Whitelaw CH MC MP Secretary of State for the Home Department Home Office Queen Anne's Gate LONDON SW1H 9AT

Pyla

3 October 1979

CONFIDENTIAL

CONTINGENCY PLANNING IN THE HEALTH SERVICE

Having seen a copy of your letter of 27 September to Patrick Jenkin, my comments on the two points you raise are as follows:

- (1) As regards general duties in the NHS I doubt whether the situation will arise in practice where it would be necessary to contemplate the use of troops. Our experience last winter suggested that volunteers from outwith the NHS was as far as we would have to go and even that as a last resort. Nevertheless I agree that we might at this stage decide formally to seek the views of the Health Authorities on this question.
- (2) On ambulances the position in Scotland is simpler than in the South. Ambulance services throughout Scotland are provided by the Common Services Agency (a statutory body which provides various supporting services in the health field on behalf of the Secretary of State and health bodies). We already know the Agency's view. They are firmly of the view based on experience last winter that in combination with the police (and if necessary volunteers) ambulance services can be maintained at the required minimum level. The use of troops for this purpose in Scotland therefore seems neither necessary nor desirable; but I do not object to the proposed consultations in the South.

I am copying this letter to the recipients of yours.

GEORGE YOUNGER



Treasury Chambers, Parliament Street, SWIP 3AG

Rt Hon William Whitelaw CH MC MP Secretary of State Home Office 50 Queen Anne's Gate LONDON SW1H 9AT Palo

2 October 1979

Dear Willie,

CONTINGENCY PLANNING IN THE HEALTH SERVICE

Thank you for sending me a copy of your letter of 27 September to Patrick Jenkin.

If the Civil Contigencies Unit is to fulfil its role, contingency plans must be keptup to date and reviewed as necessary. This must inevitably involve in many cases consultation with bodies outside Central Government, and I do not think the risk of leakage can outweigh the need for this. It goes without saying that every attempt should be made to avoid leakage. Nevertheless, we must be prepared for it, and it will need careful handling - stressing, I would suggest, the Government's over-riding duty to seek to maintain essential services and the consequent routine nature of the consultations, which do not in any way imply that the Government is expecting disruption in this area.

I am copying this letter to the recipients of yours.

JOHN BIFFEN

Gorb Makingry



PRIVY COUNCIL OFFICE
WHITEHALL, LONDON SWIA 2AT

1 October 1979

The Rt Hon William Whitelaw CH MC MP Home Secretary The Home Office Queen Anne's Gate London SW1H 9AT

R e/w

Dear Willie,

CONTINGENCY PLANNING IN THE HEALTH SERVICE

Thank you for sending me a copy of your letter of 27 September to Patrick Jenkin on Contingency planning in the Health Service. I entirely agree with you that the necessary consultations with the Health Authorities should be carried out, and carried out quickly. Moreover, in addition to the proposals that Service personnel might be used on general duties in the NHS and in the Ambulance Service I should like to suggest that the consultations be extended to include the use of voluntary workers in industrial disputes. There are many, many people who would be only too glad to help out at such a time and we should exploit this to the full.

If our proposals do leak out - as you suspect they might - then I think we should explain what we are doing and why. After all, it is only sensible planning and part of the Government's normal process. It worked in the case of the threatened London underground strike, and I see no reason why we should not use the same tactic again.

I am copying this letter to the Prime Minister and members of the E Committee, the Secretary of State for Defence, the Secretaries of State for Scotland, Wales and Northern Ireland, the Secretary of State for Social Services, and Sir John Hunt.

> Yours ever, Angus

> > ANGUS MAUDE