

Re-establishing personal bonds and understandings in NHS Care: letter to Secretary of State for Health 9/10/13

Dear Jeremy Hunt I am a veteran inner London single-handed GP with a working lifetime's interest in humanistic aspects of healthcare, its bonds and milieux.

I listened to your Conference speech last week and was heartened by some of your messages. Previous Health Secretaries have management-spoke almost entirely of strategies, goals and targets, new regulations and control and monitoring systems. But you, refreshingly, have expanded the language and thus the perspective. You talk of the culture of values, the nature of the personal bonds and attitudes, and how these constitute the personal care that so often lies behind and beyond generic treatments.

In the early 1970s I had several thoughtful and compassionate mentors who modelled and encouraged imaginative and person-centred care. As a young practitioner I was led to see how overly bio-mechanistic healthcare encounters impoverished both human understanding and therapeutic opportunities. My interest and concerns about this led to my long train of qualitative research and writing.

What I did not foresee in my early career was how much worse the human disconnections would become: I had not predicted the impact, for example, of computers, informatics or systems management. The benefits these bring are early, evident and alluring; the human price is more subtle and delayed.

In your speech you anchored your human-scale concern to practical proposals. One of these is of particular interest to me: your wish to restore and revitalise personal investment and continuity of care by reinstating GP Personal Lists for the elderly. I think this is salutary and pragmatic: a good foundation-stone. But I would like to see this re-found foundation widened to all age groups who have chronic, complex or protean difficulties – for it is this large healthcare territory that must have personal bonds and understandings to make therapeutic effects likely.

The current NHS has become better at technology-based treatments where cure is likely, but worse at humanity-based care where cure is unlikely or impossible. The former may parallel the optimism of youth; the latter is the fate of age. Care and cure often require different kinds of heart and mind-sets: this often requires a flexible, delicate weave – and this becomes impossible with systems that are over-systematised and over-prescriptive. I have explored and written about these problems for several decades. If you are interested I have attached a small sample of articles, with some brief notes of guidance at the end of this letter.

In your speech you described how much you had learned from your brief work engagements on the frontline of the NHS. Here is an invitation for a similar and deepening experience: come to my small inner-city General Practice and see my attempts at long-term, personal continuity of healthcare and the adversaries I have in institutions, politics and culture.

Meanwhile, thank you again for your humane and humanising contributions and plans: I hope you hold office long enough for them to grow securing roots. Yours sincerely Dr David Zigmond GP, Bermondsey, London

Attachments

- *Continuity of Care: of course, but whose? A sleight of slogans* How important is personal continuity of care, but how easily it is sacrificed to institutional expedience.
- *The Psychoecology of Gladys Parlett* Often unspoken yet important needs are best encountered by imaginative practitioners in small-scale centres. This was written in the 1980s and was more prophetic than intended: I was not yet explicit about the probable demise of small, personal GP surgeries and the consequences of this.
- *Physis: a thirty-nine (39) year delayed follow up correspondence with Sally* A very long-term retrospective correspondence about the importance of personal understandings and bonds in helping others heal and grow.

- *All is Therapy; All is Diagnosis. Unmapped and perishing latitudes of healthcare*
A sixty year spanned portrait of the changes and losses of personal ethos
in Medical Practice.

David Zigmond

**Interested? Many articles exploring similar themes are available
via <http://davidzigmond.org.uk>**

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