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THE GOVERNMENT'S RATING REFORM

AND

MATERNITY & CHILD WELFARE

Pamphlet

BY

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THE GOVERNMENT'S RATING REFORM
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MATERNITY AND CHILD WELFARE.

Maternity and Child Welfare is one of the Public Health services affected by the government's proposals. Ever since 1914, it has been financed by the percentage grant system, that is to say, half of the approved expenditure of any local authority or voluntary association, has been met by a government grant. The grant from the Ministry of Health for 1928-29 is £1,052,000, of which, approximately, £217,554 is grant to voluntary associations. This service, although still in its infancy, is growing very rapidly, as is shewn by the increase in government grants—an increase of 36% in the last five years:—

1924-5	...	...	...	£772,684
1925-6	...	...	...	850,173
1926-7	...	...	...	909,644
1927-8	...	...	...	983,031
1928-9	...	...	...	1,052,000

Under the government's proposals, the percentage grant for this and other health services is to be replaced by a block—or fixed—grant. The money hitherto paid in separate grants for maternity and child welfare, treatment of tuberculosis, venereal diseases, welfare of the blind and mental deficiency, is to be put into a pool which will also contain the money to compensate local authorities for loss of rates owing to the derating of industry, certain other government grants and five million pounds of new money. This sum will be re-distributed to local authorities on a somewhat elaborate formula, which aims at securing distribution according to the "needs"

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of each locality. The transition from the present system to the new is to take fifteen years. The scheme is to come into force in 1930, and the grant to each local authority is to be fixed for five years.

Effect of Block Grant.

It is feared that the substitution of a block grant for a percentage grant will have a very serious effect upon an expanding service such as Maternity and Child Welfare. Although much has already been achieved through its operation to reduce the infant death rate to 70 per 1,000 births, much still remains to be done. There are still more babies to be saved, and ante-natal work is only in its infancy. The Maternal Mortality figure which has remained at 3,000 for the last twenty-five years, with all its accompaniments of maternal ill-health, must be seriously tackled. The problem of the health of the pre-school child is practically untouched, and every year 25% of the entrants into our schools are found to have some physical defect. Expansion of the service must necessarily mean more expenditure, but under the new proposals the government grant will be fixed for five years and so any increase will have to come entirely out of the rates. Owing to the derating of industry and agriculture extra cost in the future will fall almost exclusively upon householders and shopkeepers.

It is true that for the first five years the total government grant to each authority will show an increase varying from 1d. in the £ on the rates, to 3s. 6d. (which is reached by Merthyr Tydvil, the worst of the necessitous areas, whose rates are now 27s. 2d.,) but this guarantee of gain only lasts for the first five years. After that, many authorities would have to face a definite loss were it not for another guarantee under the bill that no authority will be worse off than it is at present. This means that although all authorities will have a little extra money

for the first five years, many of them—including industrial towns in Lancashire and Yorkshire—will not have anything extra after this period.

No Security for Increasing Expenditure.

There is no provision in the bill for ensuring that any of the extra money is to be spent on Maternity and Child Welfare, or any of the other public health services, and it is doubtful if this could be made compulsory. At present, government money intended to be spent on specific services is not paid over until an equal amount has been paid from the rates on that service. In future, any authority that chooses to spend the extra government grant on a new Town Hall, improvements to its roads, or in reduction of rates, will presumably be able to do so. Under Clause 86 the Minister will only have power to reduce the grant to any authority if he is satisfied that the council have failed to achieve and maintain a reasonable standard of efficiency with regard to public health services, and that the health of the inhabitants of the area, or some of them, has been or is likely to be thereby endangered. From the promise that has been made by Mr. Baldwin to local authorities that they are to be "*more free, not less free,*" and from what Mr. Chamberlain has also said to them, it is clear that this clause can only be effective in dealing with authorities below the minimum, and that there will be no inducement in the future as there has been in the past for authorities to make a progressive advance.

Position of Voluntary Associations.

At the present time voluntary associations usually receive two grants: one from their local council of an amount not usually fixed on any definite basis; and another direct from the Ministry and equal to 50% of their approved expenditure after deduction of all receipts including the grant from the local council.

Local councils vary in their estimate of the impor-

tance of the work of voluntary associations, and some give generously, others very little, and there are cases too in which associations only receive a grant from the Ministry, as the local council has refused any help. In future there will be only one grant, and that will be paid by the local authority. Every authority will have to submit a scheme to the Minister to provide for the payment annually to voluntary associations of a sum, this sum not being less than that determined by the Minister. This will ensure that any association that now gets a grant direct from the Ministry will continue to receive the same sum, but there is no specific provision for ensuring that the local council will continue to pay its grant. In any case the sum will be fixed on the amount of grant that is being received on the standard year 1928-9, and the only chance that voluntary associations will have of getting an **increase** of grant if their work increases, will depend upon the goodwill of the local council, as anything extra will have to come out of the rates.

New Voluntary Associations.

The foregoing provisions only apply to Associations that were approved by the Minister before April 1st, 1930. Any that are started after that date will have to depend entirely upon getting help from their local councils.

Government Inspection.

Maternity and Child Welfare services throughout the country, and particularly those run by voluntary societies, have benefited greatly by the advice and stimulation that has resulted from the visits of a government inspector. This inspection will now be discontinued as a routine affair, and the local council will be responsible for all supervision. This change is regarded with apprehension in those localities in which the council is not particularly sympathetic towards the work of the voluntary association. Under the

present scheme there is a valuable safeguard in the Ministry's inspection and grant, independent of the local councils' inspection and grant.

Homes for Unmarried Mothers, etc.

Homes for unmarried mothers and their babies, hospitals for infants, etc., serve an area larger than that of one authority. The voluntary societies responsible for these institutions are afraid that the local council of the area in which they are situated will not be anxious to contribute in respect of inmates from another Authority. At present the grant from the Ministry covers these cases. There is no safeguard in the Bill to provide for contributions from other local authorities whose residents may use the Institution or Home. The government express the hope that the local authority responsible for the supervision of the Home will endeavour to secure contributions from other authorities, but there is no reason why, having fixed their own contribution, they should bother any further about the finances of a voluntary institution. If an attempt is made to get contributions there is a great danger that it will be impossible to retain that secrecy with regard to unmarried mothers which is so desirable in these cases.

Value of Percentage Grants.

Sir George Newman, the Chief Medical Officer of the Ministry of Health, in his report for 1927, just published, says :—" There can, I think, be no doubt that the percentage Exchequer grants in aid of health services (Tuberculosis, Maternity and Child Welfare, Welfare of the Blind, Venereal Diseases, Mental Deficiency and the School Medical Service) have been of the highest possible value and incentive during the last fifteen years, (a) in getting special medical services into operation, and (b) in guiding their direction. Those two advantages would not necessarily be lost by a system of quinquennial block grants, though some

definite adjustments of administration will be necessary to secure them." That such a warning should be issued by the man who has been, more than anyone else, in close touch with public health developments during the last fifteen years, is significant, especially when it is remembered that this passage appeared after the government's proposals had been made public.

Annual Saving.

Last year we saved 37,000 babies as compared with the number that would have died if the average death rate of 1900 to 1910 had ruled, at a total expenditure from grants and rates of £1,052,000, i.e. £28 per baby. Was this "extravagance," or wise expenditure? If the former, then let us welcome the block grant, but if the latter then let us press the government to exclude not only Education and the Police but the Maternity and Child Welfare service from the scope of the Bill.

November, 1928.

MANCHESTER :

R. AIKMAN & SON, Printers and Publishers
20, Shudehill.

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Annual Savings

Last year we saved 27,000 babies as compared with the number that would have died if the average death rate of 1909 to 1910 had ruled, at a total expenditure from grants and rates of £1,000,000, i.e. £58 per baby. How much more, or what expenditure? If the government's plan is adopted, but if the government to exclude not the Police but the Maternity and Child Welfare services from the scope of the Bill.

November, 1928.

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