

suffer hardship or difficulty, but we have an extremely strong commission with very good members, and they do not have to be paid a fee for their work.

**Mr. Proctor:** Will my right hon. and learned Friend take this opportunity to congratulate the chairman and members of the Mental Health Act Commission on their work, because the commission has been going only a short time but has become a responsible body in this area?

**Mr. Clarke:** I shall pass on my hon. Friend's congratulations to Lord Colville and his colleagues.

#### Hospital Wards, South Manchester

3. **Mr. Alfred Morris** asked the Secretary of State for Social Services if he will take action to avert the closure of up to eight hospital wards in south Manchester.

**The Parliamentary Under-Secretary of State for Health and Social Security (Mr. John Patten):** If any such proposals come to us, under well-established procedures, Ministers will decide on their merits.

**Mr. Morris:** Is the Minister aware of the district administrator's statement that his health authority has done everything that it can to balance its budget by efficiency savings and by reducing equipment, maintenance and building programmes, but that it may still have to close a maternity ward, a children's surgical ward, a chest ward, a chest clinic and even a cancer ward at Christie hospital at weekends? Is it not clear, as the community health council insists, that patient care is now at risk in south Manchester? In view of the Government's oft-repeated assurances that they will protect patient care, will the Minister now act urgently to correct the underfunding of this health authority?

**Mr. Patten:** I have been following events in south Manchester with care. What the right hon. Gentleman seems to have forgotten is the increased resources that have been put into south Manchester over the past two years — an additional £5 million of capital and an additional £1.2 million of revenue for cardiology and renal services. More patients are being treated in south Manchester than ever before. There is no truth in the assertion that patients are suffering there. No final decisions have been made about any of the wards to which the right hon. Gentleman referred, and, if they are made, Ministers will consider them carefully, as they always do, in the best interests of patients.

**Mr. Mark Carlisle:** As someone who was a patient in the Wythenshawe hospital for several weeks in the middle of last year, I should like to ask my hon. Friend whether he is aware of the tremendous reputation and expertise of the chest unit at Wythenshawe hospital? Does he accept that if the service is to be severely reduced, that is bound to have an adverse effect on the facilities available not only in the district but throughout the region?

**Mr. Patten:** It is very good of my right hon. and learned Friend to pay that compliment to those who looked after him in that hospital. Of course, we are aware of its high reputation. No recommendations about its future, or the future of any of the wards, have yet been referred to Ministers for decision. Should that happen, we shall of course consider most carefully any suggestions that have been made by the local health authority.

**Mr. Tony Lloyd:** Is the Minister aware that the community services in south Manchester and the surrounding districts are already grossly overstrained and that it is almost inescapable that some cuts will have to be made because, as my right hon. Friend the Member for Manchester, Wythenshawe (Mr. Morris) said, the district has not been able to balance its books without making cuts? If ward closures take place, it will inevitably mean that the community services, which are already overstrained, will fail in their primary target of serving patient needs.

**Mr. Patten:** I appreciate the hon. Gentleman's concern for those in the area, but he is speculating about what might happen should decisions be taken at some time in the future. The district health authority must face its present problems of overspending, and face them hard. While saying that, I applaud the approach of the district health authority in looking first to the needs of patients and not to the funding of empty or unnecessary beds, particularly with the changes in the pattern of medical care, when many people wish to go home at weekends and even more people wish to have day surgery rather than to stay in hospital for many days unnecessarily.

#### NHS (Government Support)

4. **Mr. Sumberg** asked the Secretary of State for Social Services if he will make a statement on the level of Government support for the National Health Service in the next financial year.

**Mr. Fowler:** As I recently announced, the Government plan to spend next year a total of £17 billion on the National Health Service in Great Britain. This represents an increase of £700 million on the anticipated expenditure for 1984-85 and is £200 million more than that previously announced in the 1984 expenditure White Paper. The funds allocated to health authorities will be increased by 1 per cent. over and above what would be required merely to keep pace with the forecast rate of inflation. These figures demonstrate the reality of the Government's continuing commitment to the Health Service.

**Mr. Sumberg:** I thank my right hon. Friend for that reply. Is he aware that there is increasing public concern that the NHS does not have sufficient funds and resources to combat and publicise the danger of patients contracting AIDS as a result of blood transfusions? If that is so, will he assure the House that sufficient funds and resources will be made available to the NHS?

**Mr. Fowler:** Yes, I think that I can give that assurance. The Government are taking a number of actions. We are seeking to become self-sufficient in Factor 8 so that imports are no longer required. I very much hope that that will be done by 1986. My right hon. and learned Friend the Minister for Health has issued leaflets. Perhaps, most important of all, we are seeking ways to test blood donations. No screening test has yet been developed, but a pilot trial will be started in London in the next few weeks.

**Mr. Willie W. Hamilton:** However much the Minister may seek to mislead the House and the country with statistics, does he agree that his statistics presume a pay increase of only 3 per cent. for nurses and ancillary staff? Does he admit, therefore, that, despite all the