

## *Sir Desmond Pond*

The College now boasts four members on whom the accolade of knighthood has been bestowed. Professor Desmond Pond was so honoured in the recent New Year Honours List.

The citation in *The Times* reads simply: 'President of the Royal College of Psychiatrists'. It is a fair assumption that his presidency of the College was in some measure responsible for the conferment of this high honour and the entire membership is entitled, therefore, not only to rejoice, but to bathe in the reflected glory.

But Sir Desmond has other claims to fame. His distinguished academic career was crowned by his election to the Chair of Psychiatry at the London Hospital in 1966. Such is his fame and prestige that his insatiable zest for foreign travel has been satisfied by the acceptance of invitations from a variety of countries both to lecture and to act in an advisory capacity. Thus, he has visited the USA (where he at one time held a Rockefeller Studentship at Duke University, North Carolina); South Africa; Hong Kong and very recently, mainland China. The paper he read at the last

Quarterly Meeting on his visit to China was an instructive and entertaining tour de force.

His numerous publications reflect his wide interests and include papers and chapters on epidemiology; the psychiatric aspects of epilepsy; brain damage in adults and children; narcolepsy; electroencephalography and social psychiatry.

Before his election to the presidency in 1978 he served the College well as an examiner for the MRCPsych, and as a member of Council and of the Court of Electors. It was during his term of office that he was appointed chairman of the Conference of Presidents of Royal Colleges and Faculties, the first psychiatrist to enjoy the distinction.

Sir Desmond wears his various decorations and chains of office lightly. He is good humoured and has a kindliness and an almost boyish ebullience. In committee he is patient and leads rather than drives, while meetings under his chairmanship are brisk and accompanied by few Homeric nods.

He is in truth a verrey parfit gentil knight.

HENRY R. ROLLIN

## *President's Press*

I must start by saying, 'Thank you' to the many Members and Fellows of the College who have written and spoken such kind words of congratulation. It is of course an honour for psychiatrists as a whole, because so many of you have contributed to raising the status of our specialty, so the Presidential honour shows how widely this is now recognized. My warmest thanks to you all.

As you will have seen from a note in a previous *Bulletin*, I have become Chairman of the Conference of the Medical Royal Colleges and their Faculties in the UK. This grandiose title refers to a committee consisting of the Presidents of the medical Royal Colleges and the variously named Heads of the Faculties. It was formed a few years ago, mainly because the multiplicity of such independent organizations appearing in the last twenty years or so meant that a host of problems common to us lacked a forum in which they could be discussed. When Sir Douglas Black asked me to succeed him in the chair, I assumed that it was a nice gentle job, partly because of the consummate unobtrusive way in which Sir Douglas always conducts his business. Instead, within a few weeks, it turned out to be a very hot seat indeed because of the notorious Panorama programme on brain death. We were involved because the Conference, then chaired by Lord Smith, had been the organization which put forward the original criteria for brain death, so it was we who had to make the main protest to the BBC.

The Conference is a purely consultative and advisory body without formal or executive status, in contrast to the Joint Consultants' Committee. These two bodies also differ

in membership, for example, the Conference has on it the President of the Royal College of General Practitioners, currently Dr John Horder, though he, of course, does not sit on the JCC. We also have, by invitation, some observers from the BMA and JCC. From time to time there has been pressure for us to become a sort of Academy of Medicine, an overlord body concerned with medical education, standards, etc. This issue was raised, for example, by the House of Commons Select Committee on medical education and staffing to which we recently gave evidence. They were concerned about the multiplicity of bodies involved in medical education, such as, the Council for Postgraduate Medical Education (CPME), the Department of Health which provides the training posts, the Royal Colleges which are examining bodies, the Universities which participate in post-graduate education and the General Medical Council which now deals with the registration of specialists as well as the General Register of all doctors. At the present time I don't think there is much drive for such a body, since the various organizations concerned with education have, of course, overlapping membership. Much the same people wear different hats while sitting on different committees. Lastly, bodies like the Royal Colleges and the Universities are understandably jealous of their independence and both would certainly be very wary of any committee on which they sat with equal rights as the representatives of state institutions like the Department of Health.

Amongst numerous matters that have gone through our

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Members have been admitted by examination—a pass rate of 51 per cent. About 100 new Inceptors have been admitted, bringing the total to more than 700.

'The Collegiate Trainees Committee are planning more regional trainees' study days which will have the support of the College, and which it is hoped will encourage more trainees to associate themselves with College activities.

'Council debated the discussion document 'A Diploma in Clinical Psychiatry' which had been widely circulated and published in the *Bulletin* (January 1981). Many reservations were expressed about the wisdom of having an additional diploma, but no final decision has yet been taken.

'Following the Council meeting, Dr Heaton-Ward presented an elegant Badge of Office which is to be worn by the Chairman of the Mental Deficiency Section. The College is most grateful to Dr Heaton-Ward for this generous gift.

'A memorandum entitled 'Medical Manpower in the Psychiatric Specialties' has been approved by Council and will be published in due course.

'The College Research Project on a survey of the use of ECT is nearing completion and it is hoped that the results will be published later this year.

'The reconstituted Nursing Committee had its first meeting under the chairmanship of Dr Seager, and it is intended that a session at one of the Quarterly Meetings will be devoted to consideration of the many problems facing psychiatric nursing. Representations have been made to the new Nursing Boards asking that they should set up committees to deal with psychiatric nursing.

'Council noted that a discussion document on a revised Complaints Procedure had been approved by the Joint Consultants Committee. Council have also debated a discussion document on the possible creation of Regional Mental Health Commissions, which might form part of future Mental Health legislation. There was considerable support for the creation of such Commissions which would be independent of the Health Service but available to advise on and monitor the care of patients detained under the Mental Health Act. Such Commissions might also have functions in respect of informal patients. Discussions are continuing on this topic and will be reported in more detail later.

'The Special Committee on the Bye-laws has begun its task of reviewing these now that the College has been established for 10 years. I would be grateful to receive from members suggestions as to possible areas for amendment.

'The document 'Psychiatric Rehabilitation in the 1980s' has now been sent to members, and it is hoped that this will stimulate the development and improvement of rehabilitation services for psychiatric patients in each district.

'The next Quarterly Meeting will be in Montrose and will be followed by a meeting of the Scottish Division to which all members are invited.

'The Irish Division are holding a joint meeting with the American Psychiatric Association in Dublin in May 1982. Further details will be announced later.

'Thanks are due to Professor Hirsch and to the staff of Charing Cross Hospital for helping with the arrangements for this meeting.'

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hands recently I should like to mention two. The first is one on which our College has played a conspicuous part in recent years, the problem of alcoholism. I am glad to say that the Conference has recently formally agreed to take an initiative with regard to alcohol similar to that which the Royal College of Physicians of London took with regard to tobacco ten years ago, which led to the setting up of ASH. Many distinguished psychiatrists have contributed to our knowledge of alcoholism and to the formation of public and professional opinion about this very serious problem. A great difference between alcohol and tobacco is that the former has had for many years bodies both medical and non-medical concerned with the problem, whereas ASH was virtually the only organization in the field when it was set up. Organizations such as the National Council for Alcoholism, the Medical Council for Alcoholism, not to mention Alcoholics Anonymous and numerous other voluntary agencies, have done much over the years, but the time now seems ripe to take a new medical initiative.

The second issue which has recently occupied a good deal of medical political time is the question of complaints procedures, in which I have been involved as a member of the working party on the subject of the Joint Consultants' Com-

mittee. We put forward some suggestions which I am glad to say have received the assent, even if grudging, of the profession generally. It remains to be seen whether our proposals will be acceptable to Parliament.

As far as psychiatry is concerned, these complaints procedures border on various aspects of change in the new Mental Health Bill which we anticipate will be introduced in the next session of Parliament. The most controversial issues revolve around the question of consent for treatment and the monitoring of psychiatric care generally (*Bulletin*, January p. 9). These are complex issues, and I strongly advise all our members in the United Kingdom to interest themselves in these matters, and should they agree with College policy see that the issues are properly understood by all those with whom they come in contact professionally.

In my daily journeys on the underground I have been depressed by a recent advertisement for nurse recruitment. It shows two charming young ladies earnestly gazing at some latest piece of gadgetry—but where is the patient? Nursing has to do with wet sheets and sore backs and, most important of all, with that tender loving care we all need in the valley of the shadow. No wonder we can't get enough good nurses into psychiatry and mental handicap.

Donald Paul