

notably for his dogged but always cheerful determination in overcoming the handicap of tuberculosis and consequent radical surgery. In 1933, in the middle of his student life, he had a complete left thoracoplasty followed by other operations. After three years in Switzerland he resumed his medical studies to graduate MB, ChB, BAO with honours in 1939 with first prize in surgery and jointly the Adelaide Hospital Hudson prize.

He rose in standing in the province from Medical Officer in Purdysburn Hospital in 1939 to become a torch bearer and spokesman for psychiatry. Despite increasing administrative work he maintained his teaching and examining interests, witness to which are the many consultant psychiatrists whom he examined for membership of the Royal College of Physicians of Ireland, having himself become a member in 1942 and fellow in 1948. He was an active member of many committees and chairman of not a few, including the Irish branch of the Royal Medico-Psychological Association. His practice of psychiatry showed his eclectic approach to the subject. Charlie was an inspiration to all. He, and we, his many friends left behind, found great pleasure that his son, Arthur, followed in his father's footsteps to become a consultant psychiatrist in north-east England.

W. A. G. MACC

ROBERT WYNDHAM TIBBETTS, formerly Consultant Psychiatrist, United Birmingham Hospitals (Central Birmingham Health District), Birmingham, West Midlands.

Dr R. W. Tibbetts, known to all his friends and colleagues as Peter, died in the Queen Elizabeth Hospital, Birmingham, on 26 May 1984 at the age of 69.

He was born on 12 December 1914 at Old Hill, Staffordshire, the son of a general practitioner. After attending Bromsgrove School he went up to Christ Church, Oxford, to undergo his preclinical training, where he obtained 2nd Class Honours in Physiology. He returned to Birmingham for his clinical years, graduating in Medicine from Oxford in 1939; then, following a house physician's appointment, obtained a post in neuropsychiatry at Bromsgrove EMS Hospital.

He joined the RAMC in 1941 and in due course served for two years with the Chindits in Burma. He was promoted major and mentioned in despatches. Returning to civil life in 1946 he underwent postgraduate training in psychiatry, firstly as a registrar at the Maudsley Hospital, then as first assistant in the Psychiatric Department at St George's Hospital with Professor Desmond Curran. After holding two appointments as Assistant Psychiatrist (SAMO) at Wimbledon Hospital and at Graylingwell, he was appointed Consultant Psychiatrist to the United Birmingham Hospitals, which position he held until his retirement in 1978. He was also Consultant Psychiatrist to the Midland Centre for Neurosurgery, the Birmingham Medical Institute for the Blind and for many years undertook a weekly session at the Birmingham Children's Hospital. He was a senior clinical lecturer in the Birmingham University Department of Psychiatry and a most valued member of its teaching staff. He was also an examiner for the MRCPsych.

Although his published research output was not large—he was too busy in many other ways for that—he made interesting and sensible contributions to the literature on anorexia nervosa, the placebo response and on his investigations into the aetiology of awkward and disabling neuromuscular disorders such as spasmodic torticollis and writer's cramp. However, it will be as a teacher and a clinician that Peter will best be remembered by his friends, colleagues and students alike. Indeed, when it was his turn to undertake a case presentation this was an occasion not to be missed. These presentations were characterized not only by thoroughness and skill but also by a touch of panache, never overdone, but betraying perhaps his genuine love of the theatre. Thus if, as usual, they happened to entertain as well as to inform, this could be regarded as a bonus which, like a good illustration, serves to emphasize the message which it is intended to convey. He also retained a remarkable 'Professor Higgins-like' talent for identifying, from the manner in which they spoke, where his patients were born and brought up, being often able to narrow this down to a very small area of the Black Country or elsewhere, a feat which never ceased to impress his audience.

As a clinician he was the undoubted possessor of the most important qualities of a good physician: clinical acumen, an enquiring mind, patience, humanity and, above all, great sympathy with his patients and their problems. As a sure-handed diagnostician his opinion was widely sought and justifiably so. If challenged in his judgement—and this was a rare event—it took a very closely reasoned argument to make him change his mind, although this could never be attributed to innate inflexibility, for he was ever ready to hear and consider other opinions.

Apart from his professional qualities, Peter was a good and loyal friend with a keen sense of humour. He was also a most convivial host so that an evening in the company of he and his wife at their lovely home in Elmley Castle was a pleasure not to be denied. He took a great interest in the village and in its church and was for many years President of the local cricket club. He was a great gardener so that his herbaceous border at the right time of year became a magnificent display. He was also a keen forester and owned a sizeable stretch of woodland not many miles from his home.

WHT

Peter Tibbetts was my colleague and friend for 25 years. During that time he worked like a Trojan helping to build a psychiatric department in the Birmingham Teaching Hospitals.

After war service in the RAMC, he specialized in psychiatry at St George's Hospital, London, and was appointed Consultant Psychiatrist to the United Birmingham Hospitals. With very limited resources and without the cachet of an 'academic unit' the department developed and attracted some of the finest recruits to psychiatry in the land and from elsewhere. There are now many distinguished psychiatrists all over the world who will grieve over his passing and reflect with nostalgic pleasure over their association with him.

He loved teaching and was very good at it. His wit, humour

and faculty for mimicry made him a most attractive lecturer. His interest in Deliberate Disability and in involuntary movements earned him an international reputation which he could have exploited more fully but he felt his main function was the promotion of others rather than himself. MS

The deaths of the following were also reported:

JAMES STEWART BLAND, Consultant Psychiatrist, 2540 Sinclair

Road, Victoria, British Columbia, Canada.

EVELYN MARIA HAMILL, Consultant Psychiatrist, Stobhill General Hospital, Glasgow, Scotland.

JOAN IRENE HUDSON, retired, formerly Consultant Psychiatrist, Coney Hill Hospital, Gloucester.

DAVID OWEN LLOYD, Consultant Psychiatrist, North Wales Hospital, Clwyd, Wales.

MAURICE LOUIS PLOYE, Senior Registrar, St Bartholomew's Hospital, London.

The College

Approval of Medical Practitioners under Section 12 of the Mental Health Act 1983

The following guidelines have been approved by Council.

A. Doctors approved under Section 28 of the Mental Health Act 1959

It was considered that practitioners approved under the Mental Health Act 1959 were likely to be reapproved under Section 12 of the Mental Health Act 1983 when the Act came into effect on 30 September 1983. At the expiration of five years from the time of their original approval under Section 28, the same criteria should apply as in B below. Approval Panels should consider whether in fact the Approved Doctor had used his approval during the previous five years and those who had rarely or never been asked to do so should not continue to be approved. Some doctors are rarely asked but value approval as a form of additional qualification.

B. New Approvals under Section 12 of the Mental Health Act 1983

When Approval Panels are considering adding new names to the Approval List, that is to say people who have not previously been approved, it is recommended that the College's recently amended criteria should apply. Approved

doctors should hold the Membership of the College or have equivalent qualification or experience.

C. Method of Approval

Approval under Section 12 of the Mental Health Act 1983 is granted by the Secretary of State but in practice is delegated to Regional Health Authorities. It is suggested that there should be consistency throughout the Regions and it is essential that approval should be given by a small regional panel which should include the College's Regional Adviser or his Deputy, one or two representatives from the Regional Psychiatric Advisory Committee and a representative from the local academic department.

D. Training

Some consideration was given to further training of Approved Doctors in diagnosis and treatment and in the new Mental Health Act and it was understood that this is to be discussed with the Department. It is considered that a refresher course should be made available on a regional basis as a minimum requirement for those who are to be reapproved under the Act, but additional education and training will be desirable.

Amendments to the 'JCHPT Handbook'

Members' attention is drawn to the following amendments to the *JCHPT Handbook, 1983*:

Section 12—Research

Additional sentence to third paragraph:

Experience in full-time research would be recognized for periods up to two years, provided that there were four sessions per week of clinical work of whatever nature. It would be open to research workers to request that their programmes be assessed individually to establish the appropriate period of recognition for higher training, taking into account all the factors involved.

Section 14—Part-Time Training

Additional sentence to second paragraph:

It is expected that training will be undertaken within an approved higher training scheme.

Section 19—Posts Outside the NHS

Additional sentence to second paragraph:

People occupying similar posts for the same period of time will be recognized for higher training.

Appendix G—Appointment of Consultant Locums

Revised item (1) (b):

Senior registrars on secondment from a post approved for higher training after not less than two years of higher training for whom only three months' locum consultant experience is recognized for the purpose of Higher Training.