

It contains some 25 legal inaccuracies which require amendment.

It offers little, if any, practical guidance on the correct steps to be taken in many difficult situations and who is responsible for taking the necessary decisions or devising the requisite procedures.

It ignores whole realms of problems and subjects (mental handicap, relatives, habilitation and rehabilitation etc) or treats them with an unhelpful superficiality.

On 2 November 1987 Lord Colville, Chairman of the Commission, said: "I do not believe that the revised draft Code will assist us or those with whom we are in contact in

relation to a multitude of problems which daily confront patients and professional people in the community and in hospitals or nursing homes, nor the families of mentally disordered people. Our original draft Code was a direct response to requests for such solutions. We now realise that it was too long to be adopted as the Code itself; it contains imperfections; it is now about three years old and needs further thought. We believe, nevertheless, that it contains valuable guidance and therefore propose to revise it and issues it over a period as a handbook which I hope may be given some recognition by the Department, perhaps as a supplement to the Code of Practice."

Assessment of Mentally Handicapped Patients for the Severe Disablement Allowance

The College wrote to the DHSS recently, expressing its concern that medical examiners appointed by the Department are not psychiatrists, and that consequently patients who may be suffering from severely handicapping psychiatric symptoms are deprived of benefit and, in some cases, forced back to work. The College recommended that a psychiatric opinion should be a statutory part of the assessment procedure.

The DHSS has replied as follows:

"Assessment of disability in connection with severe disablement allowance is carried out by the same adjudicating medical practitioners who carry out assessments in connection with industrial injuries disablement benefit and war pensions. Full-time medical officers of the Department carry out a small proportion but the great majority do this on a part-time basis. Most are, or have been, general practitioners but a number come from other disciplines. These doctors do not profess to any specialist expertise in any branch of medicine but they are experienced in making assessments on the scales which we use.

Adjudicating medical practitioners are not compelled

to make their assessments without the benefit of expert assistance. In fact they are encouraged to seek additional information wherever necessary. This may be in the form of factual reports from the general practitioner or a hospital, extracts from hospital casenotes or a report and opinion from a consultant. Anxieties were expressed both before and after the introduction of the allowance that the adjudicating medical practitioners would and did make assessments in cases of mental illness without sufficient information. We accept that these fears were justified in some cases and some months ago we arranged that in all claims where a psychiatric symptom was mentioned and where the claimant had been attending hospital, either as an in-patient or out-patient, the documents would be studied initially by a full-time Medical Officer of the Department. This Medical Officer is able to arrange for whatever additional information he considers necessary to be obtained before the claimant is examined by an Adjudicating Medical Practitioner. In fact in a small number of cases this information proves so useful that 80% disablement can be awarded without any further examination."

Special Interest Groups

In June 1987 Council approved the establishment of 'Special Interest Groups'.

Procedure for establishing a Special Interest Group:

- (1) Any Member wishing to establish a Special Interest Group shall write to the Registrar with relevant details.
- (2) The Registrar shall forward the application to Council.
- (3) If Council approves the principal of establishing such a Special Interest Group then it will direct the Registrar to place a notice in the *Bulletin*, or its equivalent, asking Members of the College to write in support of such a Group and expressing willingness to participate in its activities.
- (4) If more than 50 Members reply to this notice, then Council shall formally approve the establishment of the Special Interest Group.
- (5) The administrative support provided will be similar to

that enjoyed by College Divisions. It should be noted therefore, that the College will maintain the list of members, prepare and distribute notice of meetings but will not provide staff to attend meetings, organise conferences etc.

In accordance with this procedure, Council has approved the establishment of a Special Interest Group of Computers in Psychiatry and a Special Interest Group on the History of Psychiatry. Members are invited to write in support of these Groups and express willingness to participate in their activities. Members should write to Mrs Jean Wales at the College. If 50 members reply to this notice for each Group, then Council shall formally approve the establishment of these Special Interest Groups.

PROFESSOR R. G. PRIEST
Registrar