

## MENTAL DEFICIENCY SECTION

A meeting, called by the President, took place recently between the College, represented by Drs J. Jancar and W. R. McKibben, the National Development Group (Prof P. Mittler and Dr G. Simon) and the DHSS (Dr R. Wilkins), for the purpose of considering the state of the mental handicap services. Discussions ranged around the role of the consultant in mental handicap, improved Department communication, the shortage of manpower and poor recruitment to the specialty resulting in a deteriorating service. Some suggestions were made to arrest this deterioration immediately and to improve the situation in the future. These suggestions were later considered by the Executive Committee of the Mental Deficiency Section, who have made the following recommendations.\*

### General

The role of the consultant in mental handicap should be as defined as in the College document 'Mental Handicap' (*Bulletin*, April 1978, p 56), and there should be good communication between the consultant and others, as well as between the College and the DHSS. Consultation between the Development Team and the Mental Deficiency Section on appointment of DT members could be beneficial.

### Shortage of manpower and poor recruitment to the specialty

#### 1. Short-term solutions

##### (a) *Medical Assistants*

Some medical assistants may be suitable for appointment as consultants. Medical assistants in post should not be upgraded, but should not be excluded from applying for advertised consultant posts or locum posts.

##### (b) *Joint Appointments*

Joint appointments in mental handicap/child psychiatry—mental handicap/general psychiatry—mental handicap/paediatrics might be made where suitable to a particular Area if it had not been possible to recruit a whole-time consultant. Such an appointment should be made as an interim solution only, and the largest component of the joint appointment should be mental handicap.

##### (c) *Inducements*

The following are understood to be acceptable to the DHSS and are welcomed by the College:

i Arising out of the revised consultant contract, whole-time and part-time consultants may be con-

tracted for not more than one extra session, to be offered at the discretion of the Authority; this would be available only in exceptional circumstances and on a temporary basis. The part-time consultant may also take on extra paid sessions permanently up to a total of nine.

ii If an Authority advertises a post twice and it remains unfilled for a year at least, the Authority may offer the post at the maximum of the consultant scale. The other consultants whose principal commitment is in the same hospital and specialty will also receive the maximum of the scale when an appointment is made.

iii If an Advisory Appointments Committee is satisfied that a particular candidate is suitable for a post but would benefit from further training before taking up his duties, it may recommend a proleptic appointment with a period of training.

#### (d) *Short-Term Appointments*

There may be some early retiring or locum consultants who would be interested in receiving a short (six month) training in mental handicap to take up temporary consultant posts as a holding measure. Such short-term appointments could be made on the following basis:

The advertisement and job description and the contract should be specifically worded indicating the limitations of the post. There should be previous discussion with the College Regional Adviser. The Advisory Appointment Committee should ensure the candidate is of a high calibre. The six month training would be a specially prepared, intensive and high-powered course.

#### 2. Long-term solutions

Good services in the mental handicap specialty depend on the following improvements:

- (a) Appropriate training starting at undergraduate level.
- (b) Each trainee in general psychiatric training should complete six months in mental handicap as part of the rotational scheme.
- (c) Trainees to be given projects and be more actively involved.
- (d) Academic Chairs and Senior Lectureships to be increased.
- (e) The number of registrars and senior registrars posts to be increased as previously recommended by the College.

\*Approved by the Executive and Finance Committee of Council.