

in which final financial accommodations are reached, it would be quite unrealistic to expect a district to be able to build up the complex network of services that is needed to provide a local service without adequate interim funding. Savings by closing large hospitals will not be possible *until* the local services have been developed, and interim funding for a period of, say, three to five years to enable a district to develop local facilities will be needed *before* money can become available by transfer of resources. Failure of interim funding is likely to be a major reason for failure to develop local services. The provision of adequate interim funding needs a clearer statement of policy from the DHSS.

One final area which is not mentioned in the policy paper is the need to develop locally in each district an effective data base. Present statistics are inadequate in content and available too slowly to allow good locally based planning, which must be an integral part of a locally based service. An effective data base can also comprise a computerized service register which is an important tool in the effective management of patients in a district based service. Such services, being usually much more diffuse than a service based on a

large psychiatric hospital, need to have a records system that is capable of keeping in close touch with patients despite a wide range of contact points.

All in all, this policy paper is required reading for all involved in the development and delivery of services to the mentally ill. It should be read in conjunction with Donald Dick's paper, *Components of a Comprehensive Psychiatric Service*. It is brief, to the point and helpful though perhaps over-simplifying the problem in some areas. That is a better fault than making an Everest out of a Ben Nevis.

ACKNOWLEDGEMENT

Parts of this article are based on a paper written for the King's Fund by my colleague, Gillian Lomas.

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Review

Mental Illness in Old Age: Meeting the Challenge (Policy Studies in Ageing: No 1). By Alison Norman. London: Centre for Policy on Ageing. 1982. Pp 135. £5.75.

Positive, purposeful and creative, this is a likeable little book addressing the 'how' to do of things and thus cutting short the heartache that sometimes taints caring texts on old age. Alison Norman's timely review will be welcomed as source material to be used alongside Donald Dick's mobilization of awareness through the efforts of the Health Advisory Service and their publication *The Rising Tide*.

Hitherto media and political interest in confused or depressed old people has been sporadic and often seemed most pleased by sensations: savage neglect, brutal exploitation or harrowed despair. Ms Norman, as a committed outsider, has devoted her considerable energies and talents to travelling, listening and now reporting on the state of play as it is day by day and week by week across this patchwork island. Patchwork it certainly is and is reflected to be. Yet the best counterpanes are worked to an overall design to achieve their best effect.

We have here a wonderful catalogue of individual and group enterprises, actions, views and some things approaching religious conviction. The advantages to be derived from allowing some social workers, nurses and others to specialize in work with mentally ill old people are well argued. They can generate interest and confidence in colleagues who can

turn to them for help, advice and direction without handing over all potential customers. Anxieties that undesirable 'elitism' will be fostered by such specialization and refining of skills is largely misplaced. A gentle, but firm, finger touches on the mixed merits of blurring roles in domiciliary support teams that employ a range of personnel. Common sense allied with the highest professional skills is required to maintain efficient nets of care in the unstructured time and space of 'the community'. The potential of day care, intermittent in-patient care, and the possibility of warmth and interest (even) in long-stay settings or residential alternatives are sympathetically explored. Reading and rereading these passages will stimulate comparison with other local and well-loved enthusiasms. References to easily available articles and documents add to the usefulness of this publication.

The arena has lain all but empty for years. The vigorous babble that now wells up includes much that is good or very good and some that is basically crackpot. It is important that professionals and volunteers are guided away from aberrant courses to speed the psychiatry of old age towards respectability and its proper place in the service and educational fabric of this country. Ms Norman provides many useful hints on design.

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