

In the section on conclusions, it is suggested that methods used in this survey and the types of indicators described could be extended to many other facets of the Health Service, including almost everything from paediatrics to Accident and Emergency facilities by way of maternity services and facilities for HIV positive individuals.

In my opinion, the National Consumer Council has done an excellent job and provided a very good instrument which must be read and consumed by the providers of services, particularly their managers and political masters. In the past, the discovery of need has too often led to experiments to prove the need had faded away, inadequate provision or a simple disregard for what people wanted. It is right and proper that the Health Service is efficient and cost effective but meeting the needs of our customers can be expensive and the concept of cost effectiveness can be taken and perverted to mean that certain things are not provided because they are costly and their efficacy is difficult to prove.

I hope that the National Consumer Council, or others, take up the idea of extending the work described to every other facet of the Health Service. I also hope that, with a faltering heart, the administration and management of the Health Service also takes seriously the findings of this report and the future hoped for reports.

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Psychiatric Service to Adult Mentally Retarded and Developmentally Disabled Persons.

American Psychiatric Association Task Force,
Report 30, 1400 K Street, NW, Washington
DC 20005. 1991. Pp. 29.

This is the last report in a monograph series published by the American Psychiatric Association, of a task force on Psychiatric Services for Adults with Mental Handicaps, set up in June 1988. The membership of the task force was chaired by Dr Ludwick Szymanski of the Children's Hospital, Boston, and included other prominent members such as Professor Frank Menalascino of the University of Nebraska.

The report comprises the following sections: Background, The Need for Psychiatric Services, Current Patterns of Care (Availability and Gaps), Training

Psychiatrists, Successful Models of Service, Future Roles of the APA, and Recommendations for Specific Actions.

The publication of this report confirms the importance the American Psychiatric Association gives to the problem of psychiatric services for people with mental handicaps in the United States.

Attention is drawn to a mail survey conducted by the task force in all states, which showed that psychiatric services were overwhelmingly provided by fee-paying consultants (80%) while only 6% were employed as psychiatrists and 8% had no available psychiatric services at all. Virtually all states (96%) said that they had difficulties in recruiting psychiatrists, mainly because of lack of specialist psychiatric training in mental handicap and lack of funding, including poor third party reimbursements.

Even more significant and troubling were the comments that psychiatrists were not interested in mental handicap because there is neither training in the American medical schools nor in psychiatric residencies. Psychiatrists also believed that psychiatric treatments in mental handicap (43%) were not applicable except medication, and they were not able to work with people having non-verbal communication.

The report concludes by recommending ways in which the APA and psychiatrists can improve the provision of services to people with mental handicaps, including: changing attitudes, adapting to the needs of the field (eclecticity and inter-disciplinary collaboration), generic and specialist professional involvement and expertise, considering a spectrum of possible service models and funding arrangements, and finally, by the APA providing leadership to the psychiatric profession in setting standards of practice as well as promoting training, research, professional liaison and advocacy.

The report also highlights the great concern of the administrators to be able to recruit properly trained psychiatrists which is regarded as a necessary component for improving the quality of service and rightly emphasises the need for including specialist training in the curriculum of residency programmes.

This is an important publication for higher specialist training which will also be of interest to service planners and providers for people with mental handicap, and psychiatrists.

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