

7. Funding and sessional commitment to training will need to be supported at local level. This is not the responsibility of the Royal College of Psychiatrists.

*Revised and Approved by the
Court of Electors
27 February 1996*

Letter to the Secretary of State

The President sent this letter to the Secretary of State during the Winter Meeting of the College in January 1996. Since then we have been encouraged by the Secretary of State's speech to the House of Commons on 20 February, 1996 which addressed some of these issues.

Dear Mr Dorrell: Concern in the Royal College of Psychiatrists with regard to the implementation of Care in the Community has reached unprecedented levels.

You will be aware that the College has consistently supported the Policy, but has regularly communicated concerns to officials and ministers in recent years. For example I wrote to your predecessor two years ago suggesting that no further in-patient psychiatric beds should be closed until additional community facilities were in place.

The problems that there are in delivering a safe psychiatric service in many parts of the country are well known to you, and also that we are far from being able to provide a service of any quality in most places.

As you consider the responses of Commissioners to Mr Malone's letter to them of last August asking about their progress in meeting the ministerial priority for the service, I thought

that I should let you know that I am facing mounting pressure to put a very critical motion of the lack of improvement which has been achieved to the College's annual meeting in July which would inevitably become public.

I think it would be more constructive and in the interest of patients if we could collaborate even more actively with your officials during the next few months to try and produce solutions to some of the problems. In our view one of the continuing impediments to change is the apparent lack of knowledge of a number of Chief Executives of the different elements required for a safe and comprehensive psychiatric service.

We are already working together on the serious deficiencies in psychiatric staffing and on defining the 'seriously mentally ill' and have recently reached agreement on improving the training of those doctors who admit patients to hospital under the Mental Health Act.

I look forward to hearing from you in the near future. Perhaps we could have a meeting to discuss the situation.

FIONA CALDICOTT

Psychiatric reports for the Parole Board

Introduction from the President

Dr John Reed from the Department of Health wrote to the President in July 1995 following a meeting he had had with the Parole Board. The Parole Board has expressed concern to Dr Reed about the quality and usefulness of some of the reports that they receive written by psychiatrists.

The Courts, from time to time, have expressed a similar concern. It is important to note, of course, that reports for Parole Boards are not the same as reports for the Courts, although both will include mental state at the time of offence. The College has received comments that instructions received from the Parole Boards are often not very clear and we shall be relaying these criticisms to the Parole Board. It must be said, however, that the