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Association of Community Health Councils for England and Wales

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Is there anybody there?

This could well have been the theme song for the meeting for ACHCEW's Standing Committee on the 13th March which was told of the resounding silence of DHSS ministers on points raised by the Association. Members will receive full details in the Minutes and appended Secretary's Report. The financially induced infrequency of meetings compounded the problem of responding to the range and importance of topical issues.

The rapid growth in the provision of private nursing and residential care which, in some respects, lie beyond the formal remit of CHCs has induced considerable concern among members and, in some cases, an inventive approach to creating informal links with proprietors. Standards, conditions, advertising and CHC access will be an AGM workshop topic.

The Kings Fund Conference for FPCs and CHCs which took place on the 19th February was successful and oversubscribed. A report will be issued to all who applied to attend and the Conference itself urged that similar meetings be conducted locally and in the regions.

ACHCEW will continue to work with the National Council for Voluntary Organisations in submitting views to the DHSS and its Working Party on joint planning. MP Michael McNair-Wilson's Patients Charter has excited so much attention, critical and otherwise, among CHCs that the Standing Committee decided to attempt an alternative draft for discussion at the AGM. Co-ordinator: Mrs. Wyn Pockett of Hounslow and Spelthorne CHC.

It seems likely that the DHSS, in the foreseeable future, will conduct a major review of the CHC role and structure. Initiatives have been taken by the South West Region Secretaries and by Paddington and North Kensington CHC. ACHCEW would like to be kept informed of similar initiatives so that a co-ordinated CHC view can be collated and presented.

ACHCEW's letter to the Secretary of State expressing disappointment with the reference to CHCs in the Health Service Annual Report failed to elicit any response.

The limited listing of minor medicines has inspired a debate in which CHCs have not been invited to participate but have done so with considerable credit. The standard DHSS letter in reply which had been received by the Association and many members was remarkable only for its bland failure to answer any of the specific points made. Consumer representatives were not consulted about the new system or contents of the list but it was agreed that ACHCEW should continue to press for a role in the review of the list and any new products and in any local appeals system which may emerge. CHCs are asked to monitor and report on the operation of the new system.

Michael McNair-Wilson's 'Hospital Complaints Procedure' Bill is likely to be enacted and CHCs will expect to be consulted about the consequential arrangements and to be allocated an explicit role in them.

Recognising the valuable training work of the Society of CHC Secretaries and the fact that some RHAs are prepared to meet expenses, the Standing Committee noted that the NHS Training Authority would be prepared to discuss the provision of more training opportunities for staff and members of CHCs and asked members to submit proposals.

The HEC, in consultation with the Pharmaceutical Society of Great Britain and ACHCEW, is gathering information on what is already being done in terms of materials and activity, within the terms of a recommendation made by the Royal College of GPs that these organisations should explore ways of educating the public to make the best use of health service resources and so free GPs from the burdens imposed by trivial and self-limiting illness and expand their services, to include anticipatory care. CHCs are asked to provide the HEC, via ACHCEW, with information about their achievements and experience in these respects.

The news given by Health Minister Kenneth Clarke to the House of Commons on the 11th of February that, to accommodate the new status of FPCs, CHC regulations were being up-dated and consolidated, with an additional provision for dismissal for misconduct of CHC members, came as something of a surprise as, yet again, ACHCEW had not been told in advance or consulted. A vigorous correspondence with the DHSS ensued and we were, on one occasion, consulted for 10 minutes over the telephone on the dismissal procedure. Members will have received health circular HC (85)11 and the Statutory Instrument 1985 No. 304 - The Community Health Councils' Regulations 1985. As a further revision seems likely, it would again seem appropriate not only to comment on the details in these documents but to make more searching proposals for useful change. While it is gratifying that RHAs should "seek the view of the CHC on the fitness of a

member alleged to have committed misconduct" and "give full weight to the views expressed by the appointing body and CHC"; when they find someone guilty the limited involvement of CHCs, the vague and untried definitions of misconduct and the lack, in natural justice, of any right of appeal, can only give rise to apprehension. Just to make sure that there is no discrimination, ACHCEW will be looking at comparative provisions to deal with misconducting members of DHAs and RHAs.

The ACHCEW general leaflet, 'Your Community Health Council in Action' was a sell-out and has been reprinted. This may suggest that more leaflets and posters aimed at the general public for use by CHCs could and should be produced nationally. In certain cases financial help may be available through such bodies as the NEC. The Standing Committee appealed for suggestions and drafts.

The Chairman reported to the Standing Committee that most of the £27,500 offered by the DHSS to meet deficits incurred during the current and previous financial years had been used up and a final payment of £7,500 was still awaited. At the end of March ACHCEW becomes totally dependent on the relatively unpredictable subscription income from members. 179 CHCs have paid their membership subscription in full during the current year but the number for 1985/86 and the income they will produce will not be known until April or May. Meanwhile, negotiations for a DHSS grant, conditional on changes in the accounting system which was devised and is audited annually by the DHSS itself, continue until the dawn of the new financial year. As a certain amount of stress and uncertainty is involved, we are grateful to the CHCs which are renewing their membership with enthusiasm and optimism and somewhat at a loss in answering those who want assurances they they will get, to steal a phrase, "value for money". We would if we could co-opt Professor Joad to the Standing Committee...

While pointed questions about increases in prescription charges, in advance of the announcement, went unanswered in the usual fashion, requests for evidence, comments and nominations to various august bodies continue to arrive. In the time available we were too late to suggest members for The Dental Estimates Board, but we still have time, just, to make suggestions for the Data Protection Tribunal and The Mental Health Commission. If CHC members have suggestions let us know and we can supply you with more details.

NEWS

The Gillick Decision

When a private citizen feels strongly about a moral or social issue and manages to change public policy, with or without support, through the Courts, the quality of our legal and parliamentary system is enhanced. However, he or she does not have to be right. Such legal decisions, perhaps taken without weighing up the social consequences, can and should be contested through appeal or, if necessary, changes in the legislation. We do not know how CHCs are reacting to the Gillick decision which prevents under 16 year old girls and boys from seeking medical advice or treatment in matters relating to contraception, and may even have wider consequences, but there seems little doubt that they will have to consider the issue. Darlington CHC has responded to a suggestion that it should seek comments from GPs about the feelings of a parent who is prepared, in advance, to give the family doctor the written

However, Health Circular HC(84)34 issued by the DHSS states:

"The decision has the effect that, in general, a doctor or other professional providing advice on contraception or a doctor prescribing contraceptives or providing advice or treatment for abortion to a young person under 16 without parental consent or that of the Court is not lawful. It makes an exception for cases of emergency. There is to be an appeal to the House of Lords but, meanwhile, the existing guidance is suspended."

Many of those responsible for advising young people are already becoming aware of human tragedies which are occurring in this period of uncertainty. Avoiding breaches of confidentiality or risk to vulnerable people, the health and social consequences must be made more widely known through the media.

The legal, social and civil liberty issues associated with the case are comprehensively dealt with in a briefing issued by the Children's Legal Centre, entitled "Young Peoples' Rights and the Gillick case", price £1.00 including postage and obtainable from the CLC, 20 Compton Terrace, London N1 2UN. Bulk rates are available on request.

Multiple Sclerosis Telephone Counselling Service

Dr. Grahame Cooper would like to draw attention to the above service which is run under the auspices of the Multiple Sclerosis Society. It offers a listening ear, help and information to all with MS and is run by MS people for MS people and is manned by trained counsellors. The Midlands number is 021-476-4229 which can be called at any time to obtain the telephone number of the counsellor on duty. The service is free and confidential. Similar services are available in London (01) 568-225, Glasgow (041) 637-2262 and Northern Ireland 0247-63378.

Care of the Dying

There was a one day conference on the subject organised by NAHA and the Kings Fund Centre on January 24. It was attended by an invited audience of 70 people from both the NHS and private sector. It came to the conclusion that the very success of the hospice movement had brought about problems which are now becoming acute, not the least of which is that of hospices being so randomly distributed. Also the difficulty of both raising funds and covering costs was proving a very serious problem. NAHA and the DHSS are planning a larger conference in the autumn to bring the need for collaboration between health authorities and hospices in providing care for the terminally ill to a wider audience. A full report of this conference will be published shortly.

Abuses in Private Practice in the NHS

Shadow Social Services spokesman, Michael Meacher, has detailed alleged abuses of the system by consultants with private practices. The allegations listed included Darlington, where 27 key forms indicating fees owed to the NHS were destroyed; Wakefield, where forms were manufactured to conceal evidence of treating private patients; Kirkcaldy, where a private patient was brought from Madeira to be treated in a NHS hospital; Milton Keynes, where NHS facilities out of hours for private practice were used without being recorded; Derby, where NHS laboratory facilities were used for testing hundreds of animal specimens for local vets without the DHA knowing and with some of them given

preference over tests for patients; and Merthyr Tydfil, where NHS patients were told they would have to become private patients if they wanted hospital treatments. It is believed, says Mr. Meacher, that NHS waiting lists were kept deliberately long to encourage patients to go private.

Replying to this attack, Health Minister Kenneth Clarke said the Government was adamant that private medical practice in the NHS should be conducted according to the rules and the DHSS were determined to stamp out abuse. "But it is ridiculous to suggest that more than a small minority of the medical profession has failed to account properly for their private practice at NHS hospitals." He described Mr. Meacher's allegations as "wild" but said the DHSS would be reviewing the evidence. (Circ. No. 85/57)

Fluoridation of Water - The Knox Report

As the mammoth filibuster during the Third Reading of the Government's Fluoridation of Water Bill showed, it is a subject on which passions run very high. There is no overall ACHCEW view on fluoridation. However, the Government has now issued the Knox Report which, says the DHSS, clears fluoride of possible health hazards, in particular regarding cancer. The report's conclusion are mainly arrived at by rubbing out all the American research into the subject and it is especially critical of the reports by Yiamouyiannis and Burk which, says Knox, is based on wrongly weighted sets of controls. Yet it appears from the Committee stage of the Bill that in fact the DHSS had finally agreed, on investigation, that these studies had been properly undertaken. Those who want to know more about the anti fluoridation information should contact the National Pure Water Association, Southern Ash, Gilberts Lane, Whixall, Whitchurch, Salop. The Knox Report giving the DHSS line is available from HMSO, price £6.50. The Fluoridation Society Ltd., is the other major source of information, 64 Wimpole Street, London W.1.

Advocacy for Non-English Speaking Women in Hackney

The Kings Fund Centre has published a report of a conference it organised with City & Hackney CHC on a remarkable project which could open the way to a better deal for many groups of patients and to the clarification and strengthening of the CHCs advocacy role. The project was funded by Inner City Partnership money to provide a health advocacy and advisory service for non-English speaking women in Hackney during pregnancy, childbirth and after. It aimed to improve access to health services, to help women understand the choices open to them, to advise the health authority on policy and practice and to encourage health service staff in providing a service to a high risk group. The five part-time workers were able to help Turkish, Urdu, Gujarati and Bengali speaking women but, by engaging in advice giving and advocacy, they were able to move far beyond the interpreter function. The project has been going for four years but, not only will it be extended for a further five, but plans are afoot, if the money can be found, to develop a similar project for work with children. "An Experiment in Advocacy - the Hackney Multi-Ethnic Women's Health Project" edited by Jocelyn Cornwall and Pat Gordon, published by the Kings Fund Centre, ref. KFC 84237, price £1.50.

City & Hackney CHC has also published an excellent free leaflet, "Multi Ethnic Women's Health Project - Health Advocacy for Non-English Speaking Women".

College of Health

The College's magazine, "Self Health" has launched a number of campaigning initiatives of direct concern to CHCs: following the publication of the College's 'Guide to Hospital Waiting Lists', members of the public who have been pressurised by their consultants to avoid delay by going private have been asked to supply evidence; pressure is being brought on the Ministry of Agriculture to resist the efforts of the food industry to "fudge the proposed labelling of the fat content in food"; the Government is asked to launch a nationwide 'Inner City Mother and Baby Project' to reduce the mortality risk among babies born in areas of social deprivation. For more details contact the College of Health and subscribe to "Self Health" for £10. p.a. 18 Victoria Park Square, Bethnal Green, London E2 9PF.

Lead-Free Paint

CLEAR - The Campaign for Lead-free Air, 2 Northdown Street, London N1 9BG, has asked for help from CHCs:

"Lead in paint currently constitutes a major contribution to childrens overall body burden. The Royal Commission on Environmental Pollution (RCEP)'s Ninth Report of April 1983 recommended that:

"The maximum permitted concentration of lead in paint for household use should be progressively reduced to a level comparable to that applied in the USA (600ppm), and in the meantime all paint containing more lead than this should carry a warning label".

After 18 months of discussions with the Government, the Paintmakers Association has responded to the RCEP by proposing a voluntary agreement whereby lead will no longer be deliberately added to gloss paints. CLEAR are concerned that (1) it is only a "voluntary agreement"; (2) it does not apply to the whole industry nor to imports; (3) it does not come fully into force for another 3 years; and (4) there are no provisions for proper labelling.

Consequently CLEAR will endeavour to inform the public of the dangers of leaded paint, especially for children. The "CLEAR Best Buys" list will be nationally publicised and distributed, with a national lead-free paint day on April 27th."

Leaflets for mass distribution can be obtained from CLEAR.

AROUND THE CHCs

Rochdale CHC has made the following pertinent comments to the Metropolitan Borough Council:

X "The Rochdale Community Health Council have considered the proposals which have been put forward for your consideration to place a charge on clients who need home care and home help services. Because of the effect which such charges will undoubtedly have upon the health of the people of Rochdale, the Council would urge you to withdraw any proposals to introduce such charge.

Particularly damaging will be the proposal to introduce a charge on the hospital-based home care service.

"This would incur considerable extra costs on the Health Authority and would also lead to longer waiting lists - thus affecting other patients, many of whom will consequently make extra and costly demands on Social Services support.

The hospital-based home care service deals with a case load of approximately 160 at any time, although this is likely to increase. A charge of £1.50 per week on such patients will therefore bring in only £12,500 minus administrative overheads. If the imposition of such a charge results in only forty extra patients staying in bed one extra day, then there will undoubtedly be a net loss to the public purse, albeit via a different department.

The imposition of patient charges on the hospital-based home care scheme is a charge on some of the poorest and weakest members of society quite contrary to the basic principles of the National Health Service. Unlike the situation with regard to prescription charges, there appears to be no extra assistance from the DHSS to add to basic supplementary benefit or pension for these patients, the majority of whom are elderly.

The home care system was set up under joint funding between the health service and the local authority. It was a free service, in sympathy with the first moves towards providing 'care in the community' rather than care in hospitals and other institutions.

It is not the business of the Community Health Council to comment upon the government's policy of charging Rochdale penalties for overspending. It is however the CHC's concern, which we hope that you will share, that the effects of these penalties are shouldered fairly by the community of Rochdale and not disproportionately by the frail and the elderly."

West Birmingham CHC's newsletter, Spotlight on Health, is now so successful that it has reached its seventh edition. Value for money, is the key to the whole exercise, says Secretary Martyn Smith. On the production side there are considerable economies in printing a long run - for example for 75,000 copies the cost of each issue is £9 per thousand, shorter runs being more expensive. The price is also kept low because the Secretary is able to do his own design, artwork and can supply camera-ready copy. Members assisted at first with distribution but this was not found practicable because in an inner city area it took some 400 person hours or more to deliver each edition. So the distribution work is now contracted out commercially and costs £14.80 per thousand plus VAT. Delivery is monitored in several ways - the contractor supplies the lists of streets delivered, the CHC plots the places from which responses come and there is a monthly contact with some 400 recipients of CHC papers and these people are asked to report if they do not receive their regular copy of Spotlight through their door. Each edition costs approximately £2,000 printed and distributed.

Subjects covered in recent editions of Spotlight are eye tests at home, prescriptions for students, the health shop, hospital waiting lists, hearing aids, equipment wanted and much more. The aim is to keep the average family informed about what is going on in the NHS, what services are available locally, what they should expect and to help them to press for an appropriate service geared to community needs.

North Devon CHC has written to its MP, Tony Speller, about the most recent report of the Health Service Commissioner. Several issues were raised which might be of interest to other CHCs.

- 1) The HSC's reports frequently contain recommendations on procedures and improvements in service delivery with relevance to RHAs and DHAs other than those against which complaints have been made. Could the review procedures not be modified or extended to include a report back by the authorities to the Minister on changes in procedures and improvements in service as a result of each annual report? This would ensure the authorities learned from the errors of others and took steps to prevent similar occurrences in their own areas. North Devon CHC gives two examples of this - one, a long wait for an orthopaedic operation, the second a complaint about an 18-month wait for a hearing aid. The CHC confirms the Commissioner's remarks that the principal motive for complaint is confirmation that it was justified and that procedures should be changed to avoid others suffering similarly.
- 2) The CHC would also like to see the Commissioner's brief extended to include matters concerning clinical judgements by GPs as these make up a large proportion of all complaints and such an involvement would act as a safety net. Currently the only last resort action which can be taken is to go to court which is hardly satisfactory. As the office of the HSC is now ten years old it would seem time to review both its scope and activities. (See comment from South Gwent CHC below).

Somerset CHC has sounded the alarm when they discovered that 10% of deaths in the Sedgemoor area were attributable to smoking. They want more curbs on advertising.

Kidderminster CHC has produced a paper for submission to its DHA on the subject of the herbicide 245T and its associated hazards. The main thrust of CHC action at the moment is to try and stop it being used in school and college grounds. The CHC will be reporting on the attitude of the DHA to the paper and in the meantime anybody interested can obtain a copy from Kidderminster.

Wandsworth CHC has called on Health Authorities to provide more information on AIDS, to press the Government to make fund available for research and to encourage lesbians to donate blood in accordance with the medical view that they carry the least risk of infection.

East Hertfordshire CHC reports that two nurses, trained in Macmillan techniques, are employed by the Health Authority in their district. They are funded by the Macmillan Nursing Service but the Authority has agreed to take responsibility for their salaries after three years. A third nurse is to be recruited. As they cannot prescribe, their services are dependent on the co-operation of GPs. Although there is no hospice in the district, admissions are not a problem.

South Cumbria CHC writes regarding Disposal of Unwanted Medicines: "This CHC is keenly supporting a suggestion by Kendal & District Home Safety Committee that the expiry date of medicines be printed on containers handed by chemists to the patient.

This would warn people that all tablets and medicines have a limited life and should not be hoarded indefinitely."

West Birmingham CHC comments on the DHSS response to the 1984 AGM Resolution on Independent Legal Advice for CHCs:

"It concedes the key point that there can be occasions when it is appropriate for a Council to receive independent legal advice. It would be the duty of the RHA to meet the cost.

It is now open to any CHC to cite the authority of this letter in support of the principle when making a case for such independent advice.

The letter is of no help in suggesting to CHCs when such advice might be reasonable. This CHC, in promoting the motion at the AGM, had in mind circumstances where the RHA's legal advisor had advised a health authority with which the CHC was in dispute. It is unprofessional for a solicitor to act for both parties to a dispute.

In the event of an RHA unreasonably failing to meet a CHC's need for independent legal advice, this letter indicates that the CHC has cause to expect the support of the DHSS in the dispute. But, again, there is no guidance in the letter as to what be reasonable.

ACHCEW could usefully collect examples and precedents of such decisions as a service to CHCs. If it appears to the officers that an adverse trend of interpretations is emerging, they should report to the Standing Committee with a view to further discussion with the Department.

On the associated matter of closures, which is a key example of the kind of issue where there might be dispute, we find the content quite helpful.

There is a growing volume of guidance and precedent in this field and it would again be useful to draw together a body of authoritative rulings, and key examples of instances when CHC representations that consultation has been inadequate have been upheld."

Bristol CHC writes regarding Geriatric Wards to Private Nursing Homes:

"Could you seek from others CHCs, information about experience of pressure on families to remove patients from geriatric wards into private nursing homes?

We have become aware from a number of enquiries over the past few months that medical and social work staff are making "very strong suggestions" to some relatives that the NHS can no longer accommodate their relatives for whom private nursing homes are regarded as the 'appropriate' place. In several instances the relatives have interpreted this as a quite specific warning that unless they make some such arrangement the old person will be discharged home, even where it is fully accepted that the level of care needed could not be provided there.

We are having some difficulty in obtaining concrete evidence that the form of words used at the hospital is as imperative as its interpretation by the anxious relatives, but we are getting very near to it.

There are a number of issues involved:

(a) There is enormous pressure on geriatric beds, and therefore on blocked acute beds, which is making doctors desperate to discharge patients for whom they feel there is little more that can be offered in justification of their occupancy of an expensive NHS place.

(b) In this District it is part of the Strategic Plan to reduce the estimated geriatric bed requirement to take account of the increasing provision in the private sector.

(c) Assumptions are being made about the DHSS paying the nursing home fees, which in many cases are false when there are family resources which have to be used up first under the 'means test' principle.

We are in the position of advising relatives who feel themselves to be under this pressure to "dig their toes in" and refuse to be intimidated into the private sector against their wishes. In one instance already we have advised a wife to give notice to a nursing home that she can no longer afford the fees for her husband's care (rather than sell her house) and to force the health authority to take him back into hospital (where he was much happier), in the knowledge that by so doing we are going to put pressure on the beds which will deny access to them for other patients, perhaps who need them more by any medical criteria.

One answer is obviously for the Health Authorities to contract out care to the private sector, paying the fees from their own funds and not involving the DHSS benefits scheme at all. This, of course, could have the added advantage from our point of view of allowing access to those nursing homes. Has any District adopted this as a standard policy?"

X Weston CHC has been campaigning for a "Walk-in" clinic to link up with two private treatment centres for drug abuse run by the Weston Counselling Service. However, the CHC's hopes have been dashed by the Health Authority which has failed to acknowledge the severity of the problem and put up the money required.

West Berkshire CHC. The National Council for Carers and their Elderly Dependents has raised with West Berkshire CHC the need to make GPs more aware of the need to make sure that elderly and handicapped people are informed about the services and financial help available to them. More care in the community will mean that more frail, disabled or mentally infirm elderly people will be looked after by relatives in their homes. The CHC's experience is that many carers are unaware of the assistance available. They may not know that their dependent relative may qualify for 'Attendance Allowance' which will enable them to pay for some outside help or adapt the house.

CHC Surveys and Publications

✓ Women Waiting is a comprehensive survey of the ante natal services in West Birmingham by West Birmingham CHC. 150 women were interviewed, all attending the Dudley Road Hospital which serves an inner city population. 62% of the births at the DRH in 1982 were to women from the ethnic minorities. This must be one of the most comprehensive surveys on the subject carried out and would be of interest to many other CHCs. It is available from: West Birmingham CHC, 2nd Floor, Ringway House, 45 Bull Street, Birmingham B4 6AF. Price £2. West Birmingham has also undertaken a panel survey on GP services for elderly people.

✓ Tameside CHC has undertaken a survey on the psychiatric services available to the elderly, mentally ill or handicapped within its area. It looked at details of the existing provision, the need for development and concludes that, while it is obviously right that patients should be cared for outside the old style large institutions, it is no use unless sufficient resources are made available and unless there is co-operation between the various services involved in such care.

✓ Airedale CHC surveyed Accident and Emergency Procedures and Health Problems Arising in Children Attending School.

✓ Greenwich CHC surveyed local residents about how they felt about the proposed closure of their local hospital, St. Nicholas's in Plumstead. Not surprisingly eight out of ten were against it....

NEWS FROM THE DHSS

AIDS. The DHSS stresses it is taking all practical steps to prevent the spread of the disease in the present state of knowledge and it has set up an Expert Advisory Group under the chairmanship of Dr. M.E. Abrams. The Group has advised against making AIDS a notifiable disease. Central to DHSS strategy are a number of public health measures aimed at health professionals and "at risk" groups and guidelines have been distributed to all RHAs. Special measures are being taken to deal with blood products and screening blood donations. Imported heat treated factor VIII for haemophiliacs is already available for prescription on a "named patient" basis.

The DHSS also draws attention to the leaflet on AIDS prepared for the National Blood Transfusion Service which is available on a limited basis, two copies of which should have reached your CHC. Aids Circular ref. numbers 85/36, 85/24 and 85/21.

There is also a Regional Advisory Group on AIDS set up by the West Midlands RHA details of which can be obtained from Arthur Thomson House, 146 Hagley Road, Birmingham B16 9PA.

On 21st March Kenneth Clarke said: "The Public Health (Infectious Diseases) Regulations 1985 have laid today and will come into effect tomorrow. These Regulations will make the disease subject to certain provisions of the 1984 Act which already operate in respect of other infectious diseases. They are intended for use in very exceptional circumstances only. They will allow for medical examination, removal to hospital and detention there of patients in a dangerously infectious state and will be used if ever the necessity should arise. The Regulations will also allow restrictions to be placed on the handling of bodies of AIDS sufferers.

"I am satisfied that the authorities do not require any further new legal powers at the moment to protect the general public against the spread of the disease. We will however keep the legal position under review."

Waiting Lists

Health Minister Kenneth Clarke has complained to the BMA saying it has made too many misleading statements on the subject. He was particularly annoyed that a BMA Press statement of 8 February had said that the time patients had to wait for a hospital out-patient appointment had increased by 20% between 1983 and 1984 when "the IACC analysis indicated that, if any overall figure could have been calculated, it would have been much lower." Noting that districts providing "exceptionally poor" or "very poor" service had been identified and details passed on to the DHSS which, said the BMA "ought to look into it", the Minister says that in agreeing to allow the DHSS statisticians to look at the raw data of the BMA survey, it had been assumed that the information given to the BMA by the District Administrators had been on the understanding that the BMA would not identify any particularly bad district. Is the BMA asking the DHSS to break this confidentiality, asks the Minister? He continues "the raw data which you collected are of such a quality that no reliable figures on the size of any increases or decreases in waiting times could be obtained from them, however they were analysed."

Circular 85/51

HANSARD REPORTING SERVICE

For the last few issues we have attempted to report Parliament through Hansard because important information from this source does not always appear in the Press and many CHCs do not have access to Hansard. However, the research involved is too time-consuming to be sustained. We now have access to MIND's weekly reporting service and we understand from South Birmingham CHC that it benefits from a Health Authority Hansard and Press cutting service. It is intended to cut down the space given to Hansard in future issues and to make use of the MIND service. CHCs are advised to try to obtain from their RHA or DHA the services now available to South Birmingham. If you have problems, let us know.

COMING EVENTS

"New Initiatives to Enable Elderly People to Remain at Home" - a one day seminar in Bristol on 26th June 1985. Fee £28. Organised by the Institute of Social Welfare, 239 Weston Road, Stafford ST16 3SL.

"Adverse Drug Reactions". A new advertising campaign aimed at encouraging more doctors to report adverse drug reactions has started. The campaign is being launched by the Committee on Safety of Medicines and the Association of British Pharmaceutical Industries in the medical press and seeks doctors' co-operation in notifying the CSM of suspected adverse reactions to medicinal products through the well-established "yellow card" system.
Committee on Safety of Medicines, Market Towers, 1 Nine Elms Lane, London SW8 5NQ.

National Glaucoma Action Week, 21st - 27th April. Organised by the International Glaucoma Association with the help and support of the Pharmaceutical Industry. For further information, send a large s.a.e. to: International Glaucoma Association, Kings College Hospital, London SE5 9RS.

British Holistic Medical Association is holding a one day conference on 13th April. The theme of the conference will be "STRESS - BREAKDOWN OR BREAKTHROUGH?" and will take place at Imperial College in South Kensington, London. Cost: £10. for non-members. Further information from, The British Holistic Medical Association, 179 Gloucester Place, London NW1 6DX (Tel: (01) 262 5299).

"POVERTY - a Crisis for Babies". Conference on 19th April organised by Maternity Alliance at the Royal College of Obstetricians & Gynaecologists, 27 Sussex Place, London NW1. To discuss the link between poverty and maternal and infant health. Further details from: The Maternity Alliance 59/61 Camden High Street, London NW1 7JL.

National Conference on Schizophrenia - 25th October, 1985 organised by the National Schizophrenia Fellowship, 78/79 Victoria Road, Surbiton, Surrey KT6 4NS.

72nd Annual Study Day and Conference on Maternal & Child Welfare will be held at the Westminster Cathedral Conference Centre, London on 26th June '85. Details from: National Association for Maternal & Child Welfare, 1 South Audley St. London W1.

The Greater London Association of CHCs is holding a morning seminar at the Kings Fund, 23rd May, on "CHCs, General Managers and Local Accountability - The Shape of Things to Come".

A report on a one-day Workshop for CHC members on the same topic, which was run by Jack Hallas and Dr. W.D. Dolton at the Manchester Business School, is available from ACHCEW.

cont/

COMING EVENTS (continued)

Hospital Caterers Association - National Study Day - Cook Chill '85, Novotel, London - Tuesday 23rd April, 1985.

Application form and programme can be obtained from: Hon. National Secretary Hospital Caterers Association, 43 Royston Road, Penge, London SE20 7QW.

Living with Disability "EXPO 85" Bournemouth. Exhibition and living with disability week on 10th, 11th and 12th September at The New Bournemouth International Centre.

Further details from: Bob Hepple, Exhibition Organiser, The Firs, Trinity Road, Bournemouth, Dorset BH1 1QJ. (Tel: 0202 295777/8).

"Mental Health 2000". Conference organised by MIND/WFMH at Brighton Conference Centre, Sussex on 14 - 19 July 1985.

Details from: Congress Secretariat, Conference Associates MIND, 34 Stanford Road London W8 5PZ. (Tel: 01-222 9493).

INFORMATION WANTED

VOCAL - Voluntary Organisations Communication & Language, South Western Hospital, St. Peter's Office, Landor Road, London SW9 9NU, is a growing but new charity which would like evidence from CHCs if speech handicapped people are not receiving the treatment or support they need. Specifically: 1) Do you know of speech handicapped people who have not been assessed by speech therapists? 2) If children are receiving speech therapy at school, do they get enough sessions? Have there been cuts in the number of sessions or have the children been put into groups rather than receiving individual treatment. 3) Do CHCs know of sufferers from progressive diseases such as multiple sclerosis motor neurone disease and Parkinsons disease who are not receiving advice on aids from which they could benefit.

Patients Satisfaction Surveys

The Acute Care Working Party of Southmead CHC is going to survey an out-patients department and follow this up with in-patients. Details of patient satisfaction surveys known to ACHCEW have been sent but Southmead would like to know more details on, 1) block appointment bookings or booking systems geared to the work of individual clinics, 2) the length of time patients spend waiting in out-patient departments, 3) co-ordination between departments, 4) information given to patients, 5) privacy and 6) car parking/public transport problems.

On in-patient surveys it is interested to know what patients think of medical, nursing and other professional services, food and mealtimes, visiting arrangements, noise levels, privacy, information provision and involvement in decision-making.

A further survey on discharge arrangements for elderly patients is being considered and the experience of using questionnaires or interviews by other CHCs would be useful.

cont/

INFORMATION WANTED (continued)

Blackburn, Hyndburn & Ribble Valley CHC is considering holding a one-day seminar on Drug Abuse and Glue Sniffing and seeks information, advice and reports from other CHCs which have discussed these issues.

CHEST CLINICS

South Manchester CHC ask if other CHCs have any experience in problems with the joint provision of open access chest clinic in city centres.

The Manchester CHCs are presently being faced with a proposal for the decentralisation of their out-patients chest clinics in the city centre and they would be pleased to hear from any CHC which has experience of a city centre chest service, with information on the number of Districts and Consultants using the service and comments on its value. In addition, if anyone is familiar with such a decentralisation exercise they would be delighted to hear if a district service has any merits or faults?

Calderdale CHC has a query. It would like information from other CHCs which relates to problems it has been having with its DMT. The CHC has a newly formed Complaints Committee which aims to look in detail at complaints and their handling by the DHA with a view to offering constructive comments or asking for reviews of policy or procedures.

This has been met with great anxiety by the DMT although the CHC wrote to them and to DHA members explaining the Committee's purpose stressing that the CHC was not out to "create headlines" but was merely trying to fulfil its role properly as patient's friend. Have other CHCs encountered this attitude? Calderdale also contacted its local FPC and found the reaction there to be most encouraging. The letter was discussed at the January meeting of the FPC and it was agreed that any complainant will be advised by the FPC to contact the CHC for advice and support. This has not been done automatically in the past.

PUBLICATIONS:

The Child Growth Foundation, 2 Mayfield Avenue, Chiswick, London W4, has produced a Guide and would like to make itself known to CHCs. It is interested in organ donorship as "the pituitary gland is the provider of the only form of treatment for the disability 'Growth Hormone Deficiency'."

The Disability Alliance's "Disability Rights Handbook for 1985" edited by Sally Robertson, has just been published. It is available, post free, price £2.20 from the Disability Alliance ERA, 25 Denmark Street, London WC2H 8NJ.

Explaining Cataracts. 20,000 mainly elderly people have cataract operations each year. Age Concern, in co-operation with BBC's "In Touch" programme, has published a useful guide. "In Touch with Cataracts" from the Marketing Department (PR 13) Age Concern England, 60 Pitcairn Road, Mitcham, Surrey CR4 3LL. Price: £1.00 inc. p & p.

West Berkshire CHC has produced a booklet on Help for the Mentally Handicapped in the county, which is extremely wide ranging and informative in its scope.

Child Sex Abuse

This seems to have become topical of late. Preventing Child Sex Abuse is a special booklet published by the Child Assault Prevention Programme and the Bedford Square Press. It is a practical guide to talking with children by Michele Elliott.

It is available from bookshops price £1.95 or from Macdonald Distribution Services, Estover Road, Plymouth PL6 7PZ, price £2.20.

"Are you Pregnant?" is a new leaflet in five Asian languages which explains ante natal care procedures and gives advice on healthy eating and how to look after yourself during pregnancy. It is available in Hindi, Urdu, Bengali, Punjabi and Gujarati and can be ordered through the Health Education Council, code no. CW28 with a note of the appropriate language. A commercial on "book early for pregnancy" is being broadcast on the Asian programmes of LBC, Beacon, BRMB, Mercia Sound, Pennine Radio and Leicester Sound.

Health Resources Centre

The Health Education Council's Centre at 78 New Oxford Street, London WC1 seems insufficiently well known. It provides a wide range of resources free for both specialist and general use and includes a library and individual advice centre. There are books, pamphlets, audio visual and other multi media materials on a very wide range of subjects so it is worth calling in if you are in the area. Local education units can take orders but do not always carry the range of materials available. ACHCEW has stocks of the HEC's 'Publications Catalogue' and the March 1985 price list.

Single Parent Funerals

The Family Service Units draw attention to an anomaly saying that despite repeated requests for review, the DHSS continues to defend a regulation which openly discriminates against single parent families claiming supplementary benefit for funeral expenses. The result is that single parents who die may leave their orphans to the stark reality of a pauper's grave. FSU Briefing No. 2 Unmarked Graves tells the story of one such family and is available from FSU, 207 Old Marylebone Road, London NW1 free.

The Mental Health Film Council provides a wide range of films, news and comments on mental health and mental handicap. Anyone interested in a full list and details of distribution should contact the Council, 22 Harley Street, London W.1.

Maternity Care

Maternity Care in Action is the third and final report of the government's Maternity Services Advisory Committee. It deals with the Care of Mother and Baby. The report provides detailed advice on post natal care for mother and child. It is available from Alexander Fleming House, Elephant & Castle, London SE1 6BY price 95p.

Taking Care of the Future - The Needs and Rights of Mothers and Babies is an examination of the development of provision for maternity and asks if present policies represent an appropriate investment in the adults of the future. Available from PS1, 1/2 Castle Lane, London SW1E 6DR. Price £4.50.

Cleanair - Campaign for Smoke Free Environment

Cleanair is a new voluntary organisation engaged in drawing public attention to smoking and its effects on health. It aims to create a smoke free society for all to share and enjoy. It has produced a set of A4 posters, some polite, some humorous. A copy of one will be sent free on request. Large S.A.E. please to Cleanair, 33 Stillness Road, London SE23 1NG.

The College of Health Guide to Hospital Waiting Lists. This is a waiting list directory published by the College but the scheme may be torpedoed by new economies being introduced by NHS administrators. By using the directory some patients were able to shorten the time spent on waiting lists by asking for referral to hospitals outside their districts. Within months patients were reporting they had either had operations in another hospital or been reassessed and given priority locally. But now apparently there is to be a crack down and measures to stop this practice might well be in the pipeline. In the meantime the directory is very useful. The College does not suggest that the best way out is through private insurance. Available from: College of Health, 18 Victoria Park Square, London E2 9PF. Price £2.50 to non members, £1 to members.

Women and the Health Service is a major report by the Women's National Commission, a government advisory committee. It makes proposals on health issues of greatest relevance to women and draws on the results of a specially commissioned national survey of 6000 women's health care preferences. Issues covered range from screening for cervical cancer, pro-pregnancy and ante-natal care, PMT, mixed wards, and how women want their health care improved. It is rather sad though that, while a number of women's organisations were involved, from the Conservative Women's National Committee to the Scottish Union of Carpet Workers, CHCs were not although we have done so much on all these issues. Among the 84 proposals made in the report are the need for an NHA pre-pregnancy counselling service, that cytostest smears be available to all women aged twenty or over every five years and that a more comprehensive support and counselling service is needed for parents whose baby is stillborn or dies soon after birth. Copies available free from: Jane McGowan at the Cabinet Office, Whitehall, London SW1.

Housing for People with Disabilities actually brings you the good news for it is a study of good practice in four London Boroughs. The councils concerned are Camden, Islington, Harrow and Wandsworth. The survey highlights two main areas of inefficiency in many boroughs: one is the lack of liaison and communication between social services, housing departments and organisations representing the disabled, and the other is badly recorded and incomplete information about their needs. The report shows how both these areas can be made efficient by the relatively simple means followed by the four boroughs and deals particularly with the best methods of communication to insure information is collected and passed on. The report is available from the Greater London Association for Disabled People, 1 Thorpe Close, London W10 5XL. Price £2. inc. p & p.

Taking the Message is the title of a report on Health Visitors and the Bengali Community in Tower Hamlets and is produced jointly by Tower Hamlets CHC and the Association for Racial Justice. It highlights the very real difficulties of providing for a large ethnic minority in the climate of today's restricted budgets and gives priority to the need for expenditure on interpreters and to recruit and train more Bengali Health Visitors. The report is available from the CHC in limited numbers.

What Every Parent Should Know About Drugs is the name of the pamphlet available from the DHSS. As CHCs will be aware, it has been critically received and it is difficult to see quite what the point of the exercise is as so little extra money is to be made available for treating those who seek help. One complaint is that the publicity material is all far too vague and does not stress the horrors of drug abuse sufficiently. But the emphasis is primarily on seeking adequate treatment. The £3M the DHSS has set aside for the next three years is not considered adequate by those who have to deal with the problem. The leaflets are obtainable from the DHSS Store, Health Publications Unit, No. 2 Site, Manchester Road, Heywood, Lancs.

A far better leaflet is Some facts about AIDS which the Health Education Council has produced on behalf of the DHSS. It is simple and well designed. It explains what AIDS is, how it can be caught, its symptoms and what to do if you are worried. It stresses that for non homosexuals or non drug addicts it is extremely difficult to contract. Categories at risk include haemophiliacs, people from Haiti and from certain African countries and women who have had bisexual partners. The leaflet is available free from the Health Education Council, 78 New Oxford Street, London WC1A 1AH, or through Special Clinics and from the health education units of local DHAs.

Beating Heart Disease is a paper also produced by the Health Education Council explaining that 80,000 people under the age of 75 die annually and Britain is near the top of the international table - it is a massively bigger problem than AIDS. The paper suggests ways of helping prevent heart disease - stopping smoking, eating sensibly, taking exercise regularly, learning to relax and other such sensible measures. Copies of the paper are available from the Health Education Council.

The Report of the Health Service Commissioner for 1983/1984. It seems the office of the Commissioner is now well aware that the large majority of those who seek an investigation into their grievances are denied even the limited satisfaction of knowing that an Ombudsman has considered their complaints because they do not fall within the terms of his jurisdiction. The Commissioner feels that this is right and is best left to NHS managers with the Ombudsman only as a final safety net. CHCs may not agree. The report is available from HMSO. Price £4.70p.

The price of Home Life: A code of practice for residential care was increased on 18th February to £3.00 per copy (plus 10% p. & p. up to a maximum of £4.00). The code of practice is now in its third printing, and the price increase has been necessitated by increased production costs. Orders should be sent, with payment, to Bailey Bros, & Swinfen Ltd., Warner House Folkestone, Kent. CT19 6PH. The Centre for Policy on Ageing, publishers of the code of practice, said they were overwhelmed with the response to the code, of which 32,000 copies are already in circulation.

The Association for Stammerers, c/o The Finsbury Centre, Pine Street, London EC1R 0JH, aims to put sufferers in touch with speech therapists, to reduce the feeling of isolation, to publish information and to encourage the formation of speech therapy groups. It publishes leaflets and a poster which includes the intriguing text "In order to control HIS stammer DEMOSTHENES filled his mouth with pebbles and became the greatest orator of his time!" Copies from AFS.

Directory for Disabled People Fourth Edition. A Handbook of Information and Opportunities for Disabled and Handicapped People, compiled by Ann Darnbrough and Derek Kinrade. Published by Woodhead-Faulkner of Cambridge in association with RADAR. Price £11.50. plus £1.60 p & p. Orders from Woodhead-Faulkner (Publishers) Ltd., Fitzwilliam House, 32 Trumpington Street, Cambridge CB2 1QY.

A Tax On Your Teeth - A Briefing about the future availability of NHS dental services. Published by: British Dental Association, 64 Wimpole Street, London W1M 8AL.

MIND's Special Report, Major Transquillisers - the price of tranquillity

Fact

Major tranquillisers are the single most important and effective treatment for serious mental disorders such as schizophrenia.

Fact

Many people with serious mental disorders are able to lead a worthwhile life in the community thanks to major tranquillisers.

Fact

Major tranquillisers benefit hundreds of thousands of people by controlling distressing and sometimes dangerous symptoms of mental disorder.

Fact

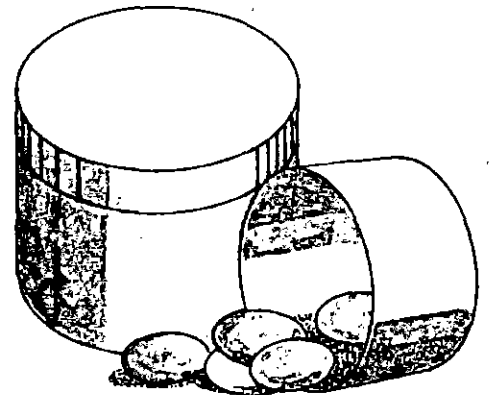
For many people there is no alternative means of treatment to control the symptoms of serious mental disorder.

Fact

Major tranquillisers often cause unpleasant and upsetting side-effects. Long-term use may damage the central nervous system.

Fact

All treatments have advantages and disadvantages. For many people with serious mental disorders, any problems caused by the side-effects of major tranquillisers are outweighed by the good they do.



NHS GENERAL MANAGEMENT: IMPLEMENTATION. Issues on Authority and Unit General Management. A booklet issued by the Institute of Health Services Management provides a useful framework of general principles and a check list for unit managers. There is a section on Consumer Relations - and not a single word about CHCs.

The Chairman, Victor Paige CBE, has agreed "to meet a representative group of CHC Secretaries and possibly members as well" following a request from ACHCEW.

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BOOKS RECEIVED:

The Deaf Can Speak by Pauline Shaw. The author's daughter was born profoundly deaf and the book is about her development and education with the second half devoted to the methods used.

Published by Faber & Faber. Price £3.95.

Caring - Experiences of Looking after Disabled Relatives by Anna Briggs and Judith Oliver. A practical book based on personal experiences.

Published by Routledge & Kegan Paul. Price £5.95.

Clients Rights the Report of an NCVO Working Party.

Published by Bedford Square Press. Price £3.95.

The Change Your Metabolism Diet by Dr. Peter M. Miller.

Published by Panther Books. Price £1.95.

South Gwent CHC Secretary writes:

X
Complaints involving clinical judgement: I note the comments of the High Wycombe CHC. My own experience - having helped 8 complainants through the system - is that the new system is working extremely well in Wales. I have been allowed to accompany complainants when they are interviewed by the second opinions and to participate in the discussion. Whilst the "second opinions" inevitably do not always uphold each complaint 100%, they have always satisfied the complainants that they have dealt with the case impartially and satisfactorily.

There is a slight but important difference between the procedure in Wales and that obtaining in England and this may account for its success in Wales compared to the apparent shortcomings in England. We have no Regional Officer in Wales. His role in the complaints procedure is undertaken by two Medical Officers for Complaints appointed by the Secretary of State for Wales specifically and solely to undertake this task. There are two of them - one is a recently retired consultant physician and the other a recently retired Administrative Medical Officer from the Welsh Office. They are far more impartial than is possible for a Regional Medical Officer in England as they have no line management responsibility for the service provided. They presumably are also able to devote more time to attending to complaints concerning clinical judgement as they have no other NHS responsibilities.

I have never been satisfied with investigations carried out by the Ombudsman's office concerning matters not involving clinical judgement and I would be very loath indeed to see his remit extended to encompass clinical judgement. In my view it would be far more sensible for English CHCs to campaign for the appointment of specific Medical Officers for Complaints - preferably by the DHSS rather than the Regional Health Authorities - similar to the position which we have in Wales.

cont/

Private nursing homes: South Gwent CHC feels that we certainly have some responsibility to monitor private nursing homes especially where the residents are maintained largely at State expense through DHSS payments. We would participate in any pressure on the Government to give us a right to visit such establishments.

However, we decided some months ago to ask private nursing homes - and indeed some residential homes - in our locality if they would be prepared for our members to visit them and speak to the residents. One nursing home has refused to extend an invitation and one residential home has ignored our letters. Three nursing homes and three residential homes were however willing to invite us and representatives of the CHC have visited each of these six homes. Whatever our individual views on the principles involved in providing State support for residents in such homes, the representatives who visited them were full of praise for the physical environment and the care and attention provided for the residents by the staff. The standard of service appeared at least to compare favourably with that in geriatric hospitals or Social Service Part III accommodation. One is left wondering, of course, what level of accommodation and service obtains in those homes which have not seen fit to invite us to visit them.

DHSS Circulars have been published on the following subjects:

Statutory Instruments 1985 No. 305. The Joint Consultative Committees Order 1985 HN(85)18. Health Service Development. Prevention of Drug Misuse: Leaflets for Parents. 27 February 1985.

HN(85)5. Health Service Development. Drug Misuse: Central Funding Initiative
February 1985.

Statutory Instruments. 1985 No. 304. The Community Health Councils Regulations 1985. (H85/1393).

HC(85)11. Health Service Development. Community Health Councils. March 1985.

DA(85)5. Steering Group on Health Services Information: Supplement to First and Fourth Reports. Information about Maternity Services. 14 March 1985.

HC(84)34. Health Services Management. Family Planning and Abortion Services for Young People. 21 December 1984.

HC(85)1. Advisory Committee on Dangerous Pathogens (ACDP): Interim Guidelines on AIDS. January 1985.

HN(85)3. Health Services Management. Management Budgeting. January 1985.

HC(85)5. Health Services Development. Resource Assumptions & Planning Guidelines
January 1985.

HC(85)6. Health Services Management. Management of NHS Trust Funds. February 1985.

HN(85)1. Health Services Management. Building Guidance. February 1985.

HC(FP)(85)9. Limiting the Range of Drugs Prescribable Under the NHS - Arrangements for Family Practitioner Services. March 1985.

HC(FP)(85)5. The Family Practitioner Committees (Establishment) Order 1985. March '85.

HN(85)6. Health Notice. Road Traffic Act Charges. March 1985.

HN(FP)(85)2. Health Notice. Family Practitioner Services. Pharmaceutical Services.

Amendments to Drug Tariff 1984. Feb. '85

HN(FP)(85)7. " " " " " " " " " " March '85.

HN(FP)(85)12 " " " " " " " " March '85.

DTA/4. National Health Service England & Wales. Amendments to Drug Tariff 1984.

DTA/2.	"	"	"	"	"	Amendments to Drug Tariff 1984. 1/2/85.
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DTA/3 " " " " " Amendments to Drug Tariff 1984. 1/3/85.

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DHSS Circulars (continued):

- HC(FP)(85)3. The Family Practitioner Committees (Membership and Procedure) Regulations 1985. March 1985.
- HC(85)9. Health Circular. 1. Consultant & General Practitioners in General Management.
2. Unit Medical Representatives with General Management Duties. March 1985.
- Statutory Instruments. 1985 No. 39. The Family Practitioner Committees (Consequential Modifications) Order 1985.
- Statutory Instruments. 1985 No. 213. The Family Practitioner Committees (Membership and Procedure) Regulations 1985.
- DA/(85)4. Maternity Services Advisory Committee. Report on Care of the Mother and Baby. 28 February 1985.
- HC/(FP)(85)8. FPC Representation on JCCs and Consolidation of the JCC Orders. March 1985.
- HN(FP)(85)10. Health Notice. Charge to Patients for Dental Treatment and Appliances. March 1985.
- HC(85)17. Health Circular. The Public Health (Infectious Diseases) Regulations 1985. March 1985.
- HN/(FP)(85)9. Health Notice. Charges for Drugs & Appliances, & Wigs & Fabric Supports. March 1985.

Cervical Smear Tests

CHCs will all be aware of Oxfordshire CHCs remarkable breakthrough in drawing attention to defects in their local reporting and recall systems. The CHC had been involved in the Health Authorities working party and had been dealing with two particular cases since June 1984. The results of a study in Nottingham published in the BMJ, in October 1984, had shown that less than 3 in 5 women with adverse reports had been followed up. The CHC's action has lead to an unprecedented awareness of the problem and many CHCs will be pressing their Health Authorities for details of their reporting and recall systems for a wider range of tests.

Limited List Appeals

The DHSS has agreed to meet ACHCEW and the Patients' Association to discuss their views on the need to establish an Appeals system.

Transfer of Medical Records

The Society of FPCs has reviewed arrangements. Its report indicates that criticisms made of the current system are justified. On average 85 working days are needed to complete the transfer of records between the different FPC areas. The Council of the Society has supported proposals contained in the report to eliminate delays and consultation is to take place with the DHSS, the profession and ACHCEW.

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CHC DIRECTORY: CHANGES/CORRECTIONS

- Page 5: East Yorkshire CHC. Telephone number is Hull (0482) 867695.
- Page 5: North East Yorkshire CHC. Delete 'Freepost'.
- Page 5: Harrogate CHC. New address: Claremont House, Victoria Avenue, Harrogate, HG1 5QQ. Telephone number: Harrogate (0423) 525302.
- Page 5: Huddersfield CHC. Secretary: Miss C F Slevin.
- Page 6: Rotherham CHC. Telephone number: 0709 379381.
- Page 7: Huntingdon CHC. Secretary: Ms Mary Gatehouse.
- Page 7: Norwich CHC. New Telephone number: Norwich (0603) 624610.
- Page 7: West Norfolk & Wisbech CHC. New Telephone number: King's Lynn 775616.
- Page 9: Redbridge CHC. Address: Fourth Floor, Ilford Lane Chambers, Ilford Lane, Ilford, Essex, IG1 2QS. Telephone number: 01 553 5577.
Secretary: Pauline Burke.
- Page 12: Swindon & District CHC. Secretary: Mr A F Winchcombe.
- Page 14: Southmead CHC. Please note change of surname of Secretary: Susanne James.
- Page 14: Cornwall CHC is moving to temporary office accommodation at Penrice Hospital, St Austell. Temporary Telephone number: St Austell 74181 ext.32.
24 hour answering service on St Austell 850891. (9 am - 1 pm)
- Page 15: Solihull CHC. New address: 142 Lode Lane, Solihull, West Midlands, B91 2HP. Telephone number remains the same.
- Page 16: Liverpool Central & Southern CHC. Secretary: Margaret Thomson.
- Page 18: Rhymney Valley CHC. New address: Pierhead Buildings, Bedwlyn Road, Ystrad Mynach, Hengoed, Mid Glam. Telephone number remains the same.
- The address and telephone number of the Liaison Committee for CHCs in North West Thames Region is 119 Uxbridge Road, Hanwell, London W7 3ST. Contact: Alison Browne. Telephone number: 01 579 9320.

APOLOGIES:

CHCs which followed up the reference to the DHSS letter concerning amendment regulations to general ophthalmic services (CHN No. 3. page 12) got little joy when they contacted the DHSS on (01) 703-6380, extension 3429. The extension was a typing error and should have read 3249. Inundated by such calls, the beleaguered recipient could have, with a moment's research, redirected them. Copies of the original DHSS letter are available if anyone requires them.

In Community Health News No. 2. December 1984 on page 4 a quotation about patients getting overlooked because of cuts, privatisation and the introduction of General Managers was wrongly attributed to Durham CHC. Very sorry. We haven't managed to locate the source but perhaps the guilty party would own up?

This issue of CHN No. 4 covers 2 months - hence its length. Our reporter, Judith Cook, is busy with two books and horrific deadlines. Some of her copy mysteriously failed to arrive when the parcel she sent from Penzance came apart in the post and arrived at ACHCEW in bits and pieces. Sorry to those who wanted something shorter. We do agree with them. Please select what is useful to your members and let us know what you do not like.

xxxxxxx