

sometimes instructive, but the premises at Belgrave Square filled me with dismay.

Previously I had only visited the College as a member of the Editorial Committee or some other group function and had enjoyed talking with others over a light lunch served in the Warren Suite. However, I found that no such facilities existed for the routine visitor and I had to go out to find a sandwich in an overcrowded pub or café; even the nearest of these was some distance and, in pouring rain, I decided to endure the hunger pangs until I returned to the relative hospitality of British Rail at 6.0 pm. On one occasion I had the pleasure to meet a visitor who had just arrived from Singapore; he had many questions about psychiatry in Britain, as I did about psychiatry in Singapore, so we wrapped ourselves in waterproofs and found our way to the pub where there was nowhere to sit down.

Although I enjoyed the work and found congenial company with the staff in the office, I found 17 Belgrave Square to be a lifeless, unsociable institution; the only 'facility' being an automat dispensing undrinkable coffee in the attic (actually just outside the Journal office); few people found their way to it. Surely something could be done about this? Room could perhaps be found for a catering company to set up a small self-financing cafeteria where people could meet and talk and get to know each other; I would also propose a sort of senior common room where visitors could be taken to enjoy a good cup of coffee and perhaps meet other office holders of the College.

R. P. SNAITH

*University of Leeds  
15 Hyde Terrace, Leeds*

### ***Improving management skills and the management process***

DEAR SIR

As anticipated, the Griffiths Report<sup>1</sup> has recommended that clinicians should be involved more closely in the management process. It has also suggested that there should be a review of how far management training of different staff groups, including clinicians, meets the needs of the service.

Some years ago, Peter Hill and I initiated courses in basic management skills for senior trainees in psychiatry (*Bulletin*, July 1981, 5, 123). The response to these has been overwhelming and we have extended them to other doctors and to longer courses. However, there are still insufficient *appropriate* basic management courses to provide training in the types of skills that the Griffiths Report recommends.

There appears to be little discussion, let alone consensus, about who should provide the training. It is doubtful whether organizations like the King's Fund will expand their already

full programme. Some Regions have grasped the nettle and are organizing courses for clinicians, usually at newly appointed consultant level. Others are less interested, the Regional Training Officer not having clinician management training as part of his brief. Enquirers at such Regions are advised to attend courses at national training centres or those run by independent management consultants. Some of these courses are excellent, but in addition to being expensive, others may not tackle problems of relevance to clinicians or to local issues. Many are aimed at instilling a lot of facts, but provide very little in the way of skills training. I suspect that there are many doctors around the country who have had bad experiences of management courses and who have spread the word amongst their colleagues.

It is therefore important that doctors become more involved in the development of courses in management skills. I have received enquiries from one University Department and several individuals about establishing courses, local enquiries having drawn blanks. There is now a small network of individuals able to provide short basic courses in management skills, and I would be interested to hear from anyone who would like to run a local course, or who would like to know more about established courses. An estimate of the demand for this training and examples of difficulties experienced in obtaining it, would be helpful when negotiating for funds, and planning future courses.

Perhaps it is now time that the College started to pay more attention to this aspect of training—all consultants are going to have to be 'managers'. It might well be an appropriate area of training in which the College itself might become involved.

HELENA WATERS

*8 Freeland Place  
Bristol*

#### REFERENCE

<sup>1</sup>GRIFFITHS, R. (1983) *NHS Management Enquiry*. Department of Health and Social Security.

### ***'Mental Handicap Services—The Future'***

DEAR SIR

I would like to convey to you my personal appreciation of this document (*Bulletin*, July 1983, 7, 131–4) which, in my opinion, is one of the most progressive on mental handicap that has been published by the College. The principles and general philosophy are in keeping with modern thinking on the subject, and it is indeed a pleasure to welcome these proposals for future services for the mentally handicapped.

G. B. SIMON

*Lea Castle Hospital  
Wolverley, Nr Kidderminster  
Worcs.*