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organisation of services, and the system of appraisal and accreditation in addiction psychiatry.

The document discusses the prevalence of substance misuse and dependence (addiction), implications for psychiatry and training of specialist addiction psychiatrists. It then discusses specific roles in relation to clinical work, facilitation and liaison, training and education, planning, service development, prevention and policy and, finally, the contribution to research and audit.

The full report is available from the College's Book Sales Office, tel: 020 7235 2351 ext. 146.

### **The Role and Contribution of the Consultant Psychiatrist in Psychotherapy in the NHS**

Council Report CR98  
£5.00. 20 pp.

This position statement has been prepared by the College's Psychotherapy Faculty in order to inform and advise the Department of Health about the specific role and contribution of medically qualified psychotherapists. The key points set out in the statement are summarised below.

The National Service Framework for Mental Health places psychological

therapies at the heart of a modern health service. The National Plan is committed to workforce expansion and training.

Consultant psychiatrists in psychotherapy play a pivotal role in both training and delivery of psychological therapies. Their distinctive contribution includes:

- training junior psychiatrists, medical students and other health care professionals in communication skills, supportive psychotherapy and specific psychological techniques of proven effectiveness;
- the capacity to assess and treat complex and severe cases;
- the capacity to combine pharmacotherapy with psychotherapy;
- supervising and supporting psychotherapeutic work in primary care, community mental health teams (CMHTs) and acute in-patient units;
- acting as product champion for psychological therapies among doctors, psychiatrists and the mental health workforce as a whole;
- providing a specific service for people suffering from severe personality disorders and other complex diagnostic groups;
- taking responsible medical officer responsibility for complex cases, participating in 'on-call' rotas and other aspects of the work of the consultant psychiatrist.

They have a 6-year medical training: a 3-year general psychiatric training which includes a mandatory psychotherapy component, and a further 3-year specialist registrar training in psychotherapy. The latter programme equips them with a broad range of expert psychotherapy skills in at least three modalities, and enables them to assess and offer appropriate treatment to complex cases.

Psychological therapies are evidence-based treatments, best organised in a 'tiered' fashion, with simple time-limited treatments delivered in primary care, more difficult cases treated and held in CMHTs and complex cases referred for specialist therapies.

Consultant psychiatrists in psychotherapy work as part of a multi-disciplinary psychological therapies team alongside psychologists, nurses, counsellors, occupational therapists, social workers and 'lay' psychotherapists.

They are few in number and unevenly distributed. Users and carers consistently call for more 'talking treatments'. 'Postcode' variation in provision of psychological therapies is the norm. A drive led by the Department of Health to create more consultant psychiatrists in psychotherapy posts will help overcome these gaps and inequalities in provision.

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## obituaries

### **John Dennis Orme**

Former Consultant Child and Family Psychiatrist, Barnsley District General Hospital

John Orme died on the 7 January 2002 at the age of 81. A Londoner, he was educated at Highgate School and then went to St Bartholomew's Hospital where he qualified in 1944. Following a very short experience as a casualty officer, he entered the RNVR and spent most of the next 2 years in the Far East. After leaving the Royal Navy, John worked as a general practitioner before becoming medical officer in Bristol mental hospitals, gaining the DPM and MA in Child Psychology during his appointment. John went to Northampton as a senior registrar and subsequently became Consultant Child and Adolescent Psychiatrist in the West Riding and Sheffield in 1956. His responsibilities gradually became concentrated in Barnsley, where he was instrumental in establishing the Pinder Oaks Child Psychiatric Centre. John was elected FRCPSych in 1974 and retired in 1981.

John was always much respected by his colleagues and never shunned work in the interest of his patients and their families. He was reserved both in his manner and towards the several novel systems that arose and declined over a quarter of a century. John had the unfashionable but therapeutic knack of helping families to believe that they had achieved successful change by their own efforts.

John is survived by his wife Diana and their two children.

**R. A. Bugler**

### **Elizabeth Joan Harbott**

Former Associate Specialist, Department of Psychiatry, Royal South Hants Hospital, Hampshire

Elizabeth Joan Harbott qualified at the Welsh National School of Medicine in 1957. A post in medicine in Swansea was followed by a period in the Professorial Department of Obstetrics in Cardiff, where she obtained the Diploma in

Obstetrics and Gynaecology. After a short period in general practice, she returned to hospital medicine as a junior house medical officer, before moving to the George Washington Memorial University Hospital in Washington DC as an internal medicine fellow.

On returning to the UK she became a psychiatric trainee, first at Brookwood Hospital and subsequently at St Luke's branch of the Middlesex Psychiatric

