Department, where she met her future husband.

Having obtained the DPM, she and Tony moved to Winchester, where Joan took a part-time staff grade post with the Southampton Psychiatric Service. In 1972, she became a Member of the Royal College of Psychiatrists, but wishing to remain part-time, she continued in a staff grade post, running out-patient and day-patient services.

When the psychiatric services moved from the mental hospital to the city in 1979, Joan became a senior member of the firm dealing with the eastern half of the city. She frequently acted as a parttime locum consultant in a variable and flexible way, making her one of the most valued and discerning members of the Southampton consultant establishment. This unusual career continued without a break until her retirement in 1991, although she did then occasionally return to clinical work in her characteristically helpful way, when she perceived that there were pressures.

Joan's long-standing service in Southampton enabled her to provide continuity of care to a vast number of patients – a virtue which is all too frequently wanting in modern psychiatric practice. Her considerable clinical acumen generated respect from patients and colleagues alike. On many occasions colleagues on her firm would have cause to be grateful for her unusual perspicacity and discernment.

As a colleague she was generous, obliging and unassuming. Outside medicine her interests were wide, including the Welsh language, history, travel, sailing and cooking, to mention only a few.

Joan died on 28 May, 2001, aged 69, following a tragic and short illness, bravely borne.

John Grimshaw



reviews

Getting the Message Across. Review of Research and Theory about Disseminating Information within the NHS

By Claire Palmer and Julie Fenner. London: Gaskell. 1999. 68 pp. £10.00 (pb). ISBN: 1-901242-36-3



Ultimately the success of evidence-based medicine depends not on the number and quality of trials examining clinical effectiveness but on whether or not the evidence from these trials is implemented in everyday clinical practice. This book offers a good review of the growing literature on dissemination and implementation and as such provides a useful summary of the field. Yet in spite of its comprehensiveness the book is deeply mired in many of the contradictions that beset this area.

No doubt, as the authors claim, the book has many potential readers charged

with or involved in dissemination of evidence-based practice. But they will meet the first conundrum in the small warning in the introductory chapter: one must encourage only the dissemination of 'valid and credible' information and 'prevent dissemination of information which has not been properly evaluated'. An obvious point perhaps but like those easy recipes with impossible-to-find ingredients the authors leave unsaid how 'valid and credible' information is to be separated from unevaluated. But more: can we be sure that this book itself falls into the valid category? Well, the review of research evidence quite fairly summarises the existing literature as not having identified successful dissemination strategies. In particular the reader will note that printed materials alone are not of much value, and then perhaps reflect that this book is also 'printed material'

Having summarised a literature that struggles to identify any dissemination strategy that can claim to work (and change clinicians' behaviour), the authors go on to present a chapter on theories why strategies should work (Chapter 3) and a chapter on how these might be put into practice (Chapter 4). But have the proposals in the latter chapter been shown to work? Do they meet the criteria of being 'valid and credible'? Certainly not by the usual criteria of evidence-based medicine that would look for trial evidence, effect sizes and so on. Indeed, the earlier chapter on existing evidence failed to identify proven dissemination

So should you buy a 68-page book that commends dissemination strategies that are unevaluated? Ironically the authors' advice seems to be to save your money.

David Armstrong Reader in Sociology as applied to Medicine, Department of General Practice, King's College London

Finding and Keeping. Review of Recruitment and Retention in the Mental Health Workforce

London: The Sainsbury Centre for Mental Health. 2000. 136 pp. £20.00. ISBN: 1-870-480-46-5

On the day that I read the Sainsbury Centre's report on recruitment and retention, the London *Evening Standard* newspaper contained three separate articles on staff shortages in the NHS. Not that I needed the media to remind me of what has been apparent to mental health workers for several years. As the report confirms, staff vacancies and low morale are contributing to the increasing pressure under which we work.

The report details the staff shortages in various disciplines: 14% of consultant posts are vacant; 85% of trusts have difficulty in recruiting and retaining nursing staff; there are similar problems in social work, psychology and occupational therapy. It then makes recommendations that, at a trust level, are aimed at management and human resources. These recommendations are accompanied by an A to Z of practical points, which range from 'advertising' to 'zero tolerance of violence'

The report highlights the cycle of staffing frustration familiar to those of us who work in an understaffed organisation. Services can be forced into a vicious circle where understaffing or poor retention leads to a heavy workload and low morale for those remaining staff. This results in a further loss of staff and increased recruitment difficulties. The report also reminds readers that the users of such services will suffer. I am sceptical that the practical advice offered is sufficient to address problems in the most severely depleted services. Local initiatives will be ineffective without wider economic and political change.



In concluding this report, the Sainsbury Centre makes nine recommendations on recruiting and retaining staff. Three of these are directed at the Department of Health: the systematic collection of information on staff vacancies, national workforce planning and a review of the impact of pension schemes on staff retention. The report also reminds the Government that the aims of the National Plan and the National Service Framework for Mental Health will not be achieved without adequate numbers of motivated staff. We await the outcome of the work of the Department of Health's Workforce Action Team, and the local implementation teams. Without their success, the Sainsbury Centre's report will be timely and well meaning, but ineffective.

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Points of View: Stories of Psychopathology

By James E. Mitchell. Philadelphia: Brunner-Routledge. 2001. 222 pp. £17.95 (pb). ISBN: 1-58391-005-0

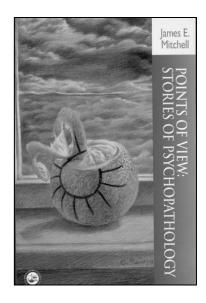
This is an unusual book, primarily written for students but with some appeal for others who would make use of a guide to DSM—IV diagnoses. Its particular claim for attention is that it functions as an aid to learning about diagnosis by the use of well-written and carefully constructed case studies. Unlike most cases studies, these are written in a narrative style, with the people depicted being brought to life by additional touches of detail. For each case study describing the person with the diagnosis, there is a companion story describing the experience or thoughts of

another person in the patient's life, whether a family member, a friend or a mental health professional. We are shown how the individuals think and feel and also how they affect the people around them. There is an emphasis on the difficulties people with the diagnoses are currently experiencing as well as the difficulties this causes in their immediate social environment.

All the major and common psychiatric diagnoses are considered in brief chapters of about 6 or 7 pages (24 chapters in all). Within each chapter the common pattern is: an introduction to the diagnosis; suggestions about key issues to note in the stories; the diagnostic criteria according to DSM-IV; 'stories' from the view point of the patient and another person (although, interestingly, sometimes the story from the perspective of the other person comes first and is considerably longer than that of the patient): a discussion of such issues as the exclusion of other diagnoses or further information on the diagnosis; questions and references.

The result is a well-structured and lively textbook which is most suited to medical students and students of psychiatry. It will doubtless also appeal to students of psychiatric nursing and the other mental health disciplines.

However, there are some limitations to the book — from the perspective of a psychologist who is not satisfied with a view of mental illness constructed entirely within a framework of DSM—IV diagnostic categories. There is no critique of this and relatively little reflection on the difficulties of assigning patients to clear-cut categories. For the most part, the case studies are extremely neat and unquestionably fulfil the diagnostic criteria. This book will not, therefore, help junior mental health professionals think about



the inadequacies of diagnostic constructs or the dimensionality of many of the phenomena described here. The book is also uncompromisingly North American in its perspective; it describes people mostly living small-town American lives, often in the mid-west, operating within a US health care system with its clear and strong emphasis on biological understandings of mental illness and diagnostic tests. Most of the people seem to be white, heterosexual and middle class. Some of the complexities of providing mental health care within a UK multicultural inner-city context seem a million miles away.

Despite theses concerns, for a textbook on DSM-IV diagnoses, this is a readable and humane book and, as such, I recommend it.

Philippa Garety Professor of Clinical Psychology, Department of Academic Clinical Psychology, Guy's, King's and StThomas' School of Medicine, King's College London

forthcoming events

Henderson Hospital is pleased to announce that the 6th Annual Maxwell Jones Lecture will take place on 13 September 2002 at the Royal Institute of British Architects in central London. The Lecturer will be Sandra Bloom, Community Works, Philadelphia, USA, and the Respondent is Valerie Sinason, Director of the Clinic for Dissociative Studies and Consultant Research Psychotherapist, St George's Hospital Medical School, Psychiatry of Disability Department. The first lecture was given 6 years ago to commemorate the 50th anniversary of Henderson Hospital and to provide an opportunity for professionals to further develop understanding of the ideas and practices of therapeutic communities. Admission is free but advance booking is

advisable as places are limited. For further information please contact Sue Garner (tel: 020 8661 1611; fax: 020 8770 3676; e-mail: sgarner@swlstg-tr.nhs.uk).

Power, Public Protection and the Psychological Therapies is the title of a 1-day conference organised by the Prevention of Professional Abuse Network (POPAN). The conference will take place in London on 25 September 2002. Further information can be obtained from POPAN, 1 Wyvil Court, Wyvil Road, London SW8 2TG (tel: 020 7720 1553, e-mail: info@popan.org.uk).

The Association for Professionals in Services for Adolescents (APSA) will be holding their annual conference, **Scared of Me? Working with Violent and** Aggressive Young People, on 26–27 September 2002 at The Institute of Child Health in central London. For further information please contact APSA, 1 Arun House, River Way, Uckfield, East Sussex TN22 1SL (tel: 01825 760 886; fax: 01825 765 517; e-mail: apsa@bhm.co.uk).

Milton Keynes Primary Care Trust would like to announce a 1-day **Conference/ Psychotherapy Workshop** to be held at the Milton Keynes Postgraduate Medical Centre on 4 October 2002. The workshop is aimed at all members of community mental health teams, general practitioners, counsellors, nurses, social workers and all those who wish to improve their skills and effectiveness with clients. For further information please contact Jane Gurnett, Secretary,