

with their level of disturbance. The hard to place group scored very highly, while the own home group scored lowly. In between these two were those assigned to the 24-hour staffed hostel and to group homes. The former were more disturbed (on the top four scale) than the latter.

The objection that can be raised is that this association could be spurious, because the ward team decided placement *and* rated the behaviour. However, it should be remembered that the placements were determined some months before the behaviours were rated. The other related factor is that the placements were discussed by a consultant psychiatrist, junior doctor, social worker and nurses. The behaviour rating was performed by nurses alone. Further, because of the time lag, the nursing staff had changed to some extent. Moreover, they performed these ratings 'blind' to the placement decisions made earlier.

Conclusion

The subculture of community carers differs from that of ward nurses. Sometimes the ideology of the former is such that they do not wish to identify problem behaviour. There is need of a simple medium whereby one group can communicate with the other about patients who will become residents. This very simple survey tool, estimating the level of

behavioural disturbance, provides this means of communication.

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Hostages returned from the Gulf

Recent reports show that continuing problems are being experienced by the returned hostages and their families. The Department of Health advised at the time of the hostages return that, apart from those who needed immediate emergency treatment, the initial point of referral ought to be the persons general practitioner. General practitioners in many cases now employ their own staff who are able to offer support and counselling. In some cases the general practitioner may, however, decide that the most appropriate response is referral to the psychiatric service. All local psychiatric services should be able to respond to the needs of people

suffering continuing stress as a result of traumatic experience.

There is a further resource available within the system in the form of a list of psychiatrists with special expertise and experience in this field. The list was circulated to Regional Medical Officers in January, 1991 and those listed are available to offer tertiary level opinions and guidance if necessary. Any psychiatrist who wishes to have a copy of this list should contact the Secretary, Mrs V. Cameron.

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