

6. Bax Martin CO, Smith DPL, Thomas AP. Health care of physically handicapped young adults. *BMJ* 1988; **296**: 1153-1155.

'Don't get it right, get it written'

Sir,

The increasing prominence of primary care should be reflected in national priorities for research and development. These are now being determined in relation to health need, and there is an opportunity for general practitioners, departments of general practice and primary health care teams to influence the agenda. One way to do this is to undertake and publish accounts of education, development or research projects in primary care.

Lack of confidence may inhibit the inexperienced to get their work published. In 1993 we held discussions with GPs, researchers, educationalists and primary care development workers in our department, regarding what stopped them from getting published. This arose from a realization that the number of publications did not reflect the range or quantity of work undertaken.

Three main areas emerged: personal doubts about the value of their work or writing, time management issues (such as deciding between priorities, finding time to read or write) and lack of supervision and support for writing. When asked what might help, the group discussed the need to be realistic about how much writing was possible, to start small, to develop a 'first draft' culture and for writing to become part of the daily routine.

A strategy was developed to raise the profile of writing, increase expectations and offer support. A writing group was set up to share successes, problems and expertise. 'Writing partners' were arranged for individuals with whom they could agree writing plans, and published material was displayed.

After 2 years, there has been an increase in the number of published articles (although other factors also contribute to this), and writing is now felt to be more of a central activity.

The comment, 'Don't get it right, get it written', coined by one of the group, perhaps reflects the growing enthusiasm for writing. While quality is important, our experience suggests that lack of confidence often prevents good work from being written up. Some are also dissuaded

by the limited scope of some journals which have not adapted to the growing range of projects in primary care. We wonder if others share this experience?

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CORRECTION: Julian Tudor Hart's letter in the August *Journal* ('Healthcare resource groups (HRGs): a casemix currency for GPs') was inadvertently printed with some text missing from the second paragraph. This paragraph should have read:

'We are given two histograms, both without numbers, confidence intervals, time periods, or any way of finding where they come from. The first compares orthopaedic HRGs for two hospitals with national means for length of stay. The second compares acute myocardial infarction rates per 1000 list size, apparently between six general practices. Both would provide a good teaching example of how never to present data to a serious, informed and critical audience.'

We apologize for any confusion this may have caused.



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