

The major objective of a Panel is to provide equipment for the special requirements of handicapped individuals. It thus supplements the work of Departments of Social Services which, by and large, have to use standard equipment available from commercial suppliers. At the meeting in Torquay the Devon county authority gave full support and will co-operate in setting up the Panel.

The Panel will consist largely of engineers of various kinds but will have help from therapists and members of the medical profession. It would be all too easy for an engineer acting alone to provide a device which, though perhaps satisfactory in the short term, could do positive physical harm to a handicapped person in the longer term. As a minimum, our engineer handling a case will co-operate with the therapist and doctors concerned.

There is little formality in the organisation of a Panel. It consists largely of individual volunteers, often supported by the organisations with which they work—the support offered by technical colleges and industry at the meeting was truly impressive. A committee, largely formed at the meeting will set up a register of resources in the area and a network of communication which will find volunteers for individual cases. It will also look after its own finances.

All the effort and much of the raw material will be cost free. Sometimes, however, special components cannot be 'found' and have to be bought. The Committee will seek means for covering the costs involved, including recompense for travelling expenses of volunteers.

REMAP has been working on Teesside for ten years, and the local authority submits its unusual cases to the Panel there as a matter of routine. Since the drive to make the movement truly national started about two years ago, Panels have been formed in:

Buxton and District	Sheffield and District
Clwyd	SE Wales
Cheshire	Teesside
N London	Tyneside
SW London	W Cumberland

The meeting in Torquay was closely followed by agreement to form further Panels covering the counties of Cornwall and Ayrshire.

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ENVIRONMENTAL HEALTH SERVICE

Sir,
I have just been reading the excellent article on *The case for a national environmental health service* (February 1973). I found the article most interesting and I have certainly learned considerably from it.

One point however concerns me. I notice you make no mention of occupational health. As a considerable part of the community spend a large proportion of their waking life in the working environment where they are subject to 'environmental' conditions I would have thought that occupational health would be a significant and major part of any national environmental health service.

I realise that it is difficult when a report of a paper is presented in a journal to cover all the points mentioned in a lecture.

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REFERENCE

Grob, P. R. (1973). *Journal of the Royal College of General Practitioners*, 23, 119-122.

JAMES MACKENZIE LECTURE

Sir,
I have read and reread Dr John Stevens' James Mackenzie Lecture, *Brief encounter*, published in your January *Journal*.

Thank you for the publication of what is undoubtedly the most brilliant and lucid exposition to date of personal physician responsibility in family-centered continuing medical care.

The humanity and intelligence of the author is reflected in each line. The requirement of the full measure of psycho-social and medical skills necessary for competence as a primary physician stands reaffirmed.

I believe this fervent and articulate work is an important milestone in the continuing development and definition of family practice.

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REFERENCE

Stevens, J. (1974). *Journal of the Royal College of General Practitioners*, 24, 5-22.