

Dominance and dependence are two extremes of roles played by people when they interact, so that some people, depending on their needs, will try to establish more close, affiliative associations than others. Thus, some patients will prefer separate list practices, and some combined list practices. A doctor's leaning to one or the other type of organisation may result from his own attitude to roles in his relationships with patients.

It is the patient's attitude which is the more important, and ideally he should be allowed to find in the group the kind of doctor/relationship which suits him best. In this way, a doctor will tend to attract to himself those patients who will be satisfied with the sort of relationship which he provides, and these are the patients for whom he is most likely to be able to provide the best service.

Although, for the sake of continuity, a patient should be encouraged to remain with the same doctor during any one episode of illness, in my view he should be free to choose to stay with one doctor indefinitely, or to see any other doctor in the group as he wishes. One of the aims of group practice organisation should be to allow the patient to make this choice without bias in favour of one sort of relationship or the other.

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#### REFERENCE

Aylett, M. S. (1976). *Journal of the Royal College of General Practitioners*, 26, 47-52.

### ROYAL AUSTRALIAN COLLEGE OF GENERAL PRACTITIONERS

Sir,

Further to my previous correspondence concerning the statement in the March 1975 issue of your *Journal* about admission to the Royal Australian College of General Practitioners of persons who have passed the examination of your College. I wish to advise that I have had discussion with both the Administrative Secretary, Mr Wood, and the Honorary Secretary of the Board of Censors, Dr Burden of the Royal College of General Practitioners.

It appears that there could have been some misinterpretation of the Royal Australian College of General Practitioners' regulations and that possibly these could have been a little misleading.

However, the situation remains that members of the Royal College of General Practitioners who wish to join the Royal Australian College of General Practitioners must fulfil the following criteria:

- (1) Be a registered medical practitioner,
- (2) Have undergone a rotating residency (internship) of not less than two (2) years in an approved hospital,
- (3) Have undergone at least a further one year's approved training in general practice,

- (4) Have been in general practice not less than five (5) years,
- (5) Be sponsored by two Fellows/Members of the College.

Where an applicant is unable to provide satisfactory sponsors, provision is made for an interview by the Faculty Censors.

Persons who have been in general practice for less than five (5) years may be eligible for admission as Associates.

The Royal Australian College of General Practitioners' examination now leads to Fellowship but the fact of having passed the Royal College of General Practitioners' examination does not confer any automatic privileges and/or exemptions. However, our Censors are examining this situation.

F. M. FARRAR

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### WORKING PARTY ON WOMEN IN PSYCHIATRY

Sir,

I should be grateful if you would allow me through your correspondence columns to inform our readers of the existence of the recently formed Working Party on Women in Psychiatry. This small group is seeking information and contributions from all doctors with an interest in women in psychiatry. A high proportion of psychiatrists are women, but their distribution between the training and career grades shows that a relatively few have been appointed to consultant posts.

The working party will be considering employment opportunities, with particular reference to types of post available and part-time employment, and the availability of training. We shall be looking at the experience required for specialist accreditation at higher professional training level. We particularly wish to look at the experience of women training in personal posts set up under HM(69)6 and hope to set up a register to monitor the eventual outcome.

Many women working in psychiatry are employed as clinical assistants for up to nine sessions weekly, and have considerable experience in the specialty. They are not eligible for the hospital practitioner grade, as this is restricted to principals in general practice. We would welcome the views of these doctors and others on an acceptable service grade contract.

The Working Party hopes to prepare a report for the Education Committee of the Royal College of Psychiatrists by the end of 1976. We should welcome contributions of personal experience and opinions relevant to our task.

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