

has been to our mutual benefit. We learned a great deal about the district and were able to inform general practitioners not only about our service but also about our profession since almost none had dealt with clinical psychologists in the past. Many were reassured to know about our accredited post-graduate professional training and how we differ from other professional or lay persons who offer therapy. We were able to present succinctly the case that clinical psychologists are the best suited to administer, evaluate, and develop psychological therapies (Liddell, 1977).

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References

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- Trethowan, W. H. (1977). *The Role of Psychologists in the Health Services*. London: HMSO.

A4 RECORDS

Sir,
Dr Bowen is quite correct—A4 records are forced back into one of the antiquated envelopes when patients transfer from one practice to another, and if they then transfer back to a practice using A4s, the notes are then re-converted.

It would be much better if the full A4 records were sent untouched to the new general practitioner. He would then have the option of converting them or using the A4, and he would already have been paid for this work owing to the way general practitioner expenses are reimbursed.

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PAYING FOR IMPROVED STANDARDS

Sir,
You published an article from Drs Miles and Rowley (January *Journal*, p. 40) discussing high pay for high turnover in a new city practice. A case of equal strength can be made out for high pay for high turnover in inner city areas, where the shifting immigrant population, students, and hospital workers all contribute to a high workload.

However, what really interested me was the possibility of a change in attitude on the part of the Editor and the College to fair remuneration for work done. Hitherto, all the Royal Colleges have studiously avoided soiling their white kid gloves by not involving themselves in questions of pay, leaving discussion of 'filthy lucre' to the British Medical Association. Thus the Colleges are always the blue-eyed boys, whilst BMA committee men are continually at loggerheads with officialdom over remuneration.

For 25 years, I have struggled manfully to maintain or even improve my standards in general practice, goaded ever onwards and upwards by my

academic colleagues. I can cope with this—I am used to 'em. I am fortunate enough to work in an almost ideal situation, but ordinary general practitioners repeatedly ask me: "Who will pay for the increased work involved in raising standards?" The NHS pays for ordinary care for ordinary illness, not for exotic care for limited numbers.

Is the College now willing to involve itself in these problems?

Professor Metcalfe has, I believe, submitted a paper which will soon be published, showing statistically the increasing burden now falling on general practitioners involved in looking after an ageing population. His paper and that of your aforementioned contributors raised my hopes that the College is not too pious to look at these questions. As a fellow of the College and an active BMA member, I am personally very much involved in these matters.

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ASTON INDEX

Sir,
Following the appearance of my article on looking after children with learning problems (November *Journal*, p. 647) a great many readers have asked for information about the Aston Index. It can be obtained from Learning Development Aids, Aware House, Duke Street, Wisbech, Cambridgeshire. It costs approximately £15.

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BOOK REVIEWS

THE DIVISION IN BRITISH MEDICINE

A History of the Separation of General Practice from Hospital Care 1911 to 1968

Frank Honigsbaum

London: Kogan Page (1979)

445 pages. Price £12.50
(£6.95 paperback)

American commentators have a distinguished record in analysing the

British medical profession. Rosemary Stevens's *Medical Practice in Modern England*, for example, is a classic of its kind and illuminates many of the great historical trends in British medicine.

Now another American commentator, Mr Frank Honigsbaum, who was a member of Barbara Castle's working party on primary medical care, has written a lengthy study of general practice since 1911, concentrating on the relationship between generalists and specialists.

The book is arranged in eight sections

and deals first with the period 1911 to 1919 and the impact of the Lloyd George 1911-1912 Act on British general practice. The analyses are interesting and the detailed comments and pressures in relation to the formulation of the Ministry of Health in 1919 are important. However, by the time Mr Honigsbaum reaches the formation of the British National Health Service in 1948 it is clear that he has based his thesis on the premise as expressed by Dr Cox: "Every doctor will tell you that the doctor who has the luck to be on the