

presumably with the consent of the G.P.—to the district clinical psychology service or even to the more familiar, hospital-based 'multidisciplinary team'.

Your readers may wonder why Dr Marks and the authors of the Monograph have been so reticent about debating these issues in public. Could it be because the nurses are already arguing to the Whitley Council that 'if they do the work of a psychiatrist they should receive large incomes' (*On Call*, 13 April 1978, page 13)—and they therefore do not wish anyone to think they need to be responsible to anyone? Or have they had difficulty persuading clinical psychologists to supervise treatment programmes for patients they have not seen?

I would not like to rest my case without referring once more to the number of highly intelligent young unemployed psychology graduates in this country. We have recently advertised a post for a research psychologist and received twenty-two applications. More than ten of these have good honours degrees in Psychology, yet have had to work since graduation as barmen, bricklayers and in labouring jobs.

Since Dr Harding saw fit to write—and you, Sir, saw fit to print—reference to my attitude towards midwives, my wife and I wish to inform readers of the *Journal* that we were happy when our last baby was delivered by a midwife. The midwife was, after all, directly responsible to an obstetrician.

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#### A CORRECTION

In the article 'A Controlled Evaluation of the Therapeutic Effectiveness of a Psychiatric Day Centre for Pre-School Children' by S. Wollacott, P. Graham and J. Stevenson (*Journal*, April 1978, 132, 349–55) Table I, first line, the mean age of the community group should be 36.0 months and not 26.0 months.

#### INTER-PROFESSIONAL COOPERATION

DEAR SIR,

Two ideas which could be useful in tackling the problem of institutions which are set up for short-term assessment and become clogged by long-term cases, as clearly presented by Dr Jean Harris in her Paper 'Child Observation and Assessment Centres: Psychiatrists' and Social Workers' Difficulties' (*Journal*, February 1978, 132, 195–9) are: (1) putting more of the total resources (including residential staff) into pre-admission work (Bruggen, Byng-Hall and Pitt-Aitkens, 1973) and (2) doing much of the assessment work in the home (Campbell, 1975).

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#### References

- BRUGGEN, PETER, BYNG-HALL, JOHN & PITT-AITKENS, TOM (1973) The reason for admission as a focus of work for an adolescent unit. *British Journal of Psychiatry*, 122, 319–29.
- CAMPBELL, DAVID (1975) Adolescents in care. *Social Work Today*, 6 (9), 265–9.

#### LIST OF BOOKS SUITABLE FOR A PSYCHIATRIC LIBRARY

DEAR SIR,

Later this year the Library Books Sub-Committee will start compiling a Supplement to the List recently published and welcomes suggestions from members of the College of books that might be included. The titles proposed in the letter from Dr Merritt (*Journal*, May 1978, 132, 527) and his colleagues will, of course, be considered.

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