
This booklet comprises the reply of a MIND Working Party to the DHSS Discussion Paper *A Happier Old Age.* In contrast to the uncertain blandness of the latter it is forthright, provocative and, at times, dogmatic in its recommendations and must certainly liven up the discussion if the new Government decides to continue it.

The format follows the sequence of the DHSS document, though leading off with a fighting introduction and a list of recommendations in which the editorial influence of the MIND Policy Officer seems evident. Leaving these aside for the moment the main text provides a patchwork of information, much of it extremely useful, and opinions on various aspects of the problems and care of old people. Curiously the rise in numbers of the very old is played down, particularly in the Introduction, though the purpose seems to be to counteract any feeling of despair or tendency for planners to think merely of duplicating existing facilities (and particularly institutions).

The need for improvement in our community services is amply catalogued, along with examples of useful initiatives, particularly from the voluntary sector. The lack of early recognition and intervention by our primary medical and social services, and the poverty of their training with the elderly, are deplored. Investment in the supportive family and in voluntary and self-help groups is urged.

Members of the College's Section on the Psychiatry of Old Age will applaud their Secretary's part in arguing the case for the specialized psychiatric services for the elderly (on grounds of organization, rationing of resources, liaison with related services, special skills and lobbying the cause of the elderly). Some might have wished to see more emphasis on the positive scope of such services with the elderly with functional illness, and, by comparison with the sweeping nature of many of the recommendations, the target of one psychogeriatrician per District seem modest. The Working Party had no doubt as to the value of the community psychiatric nurse in this field.

The standards of most of our hospitals and residential care was rightly strongly criticized, though this section could make discouraging reading for those with their sleeves rolled up on those particular shop floors. Though accepting many of the recommendations relating to selection and placement of residents/patients and the need to look for various alternatives to institutional care, I was not convinced that the Working Party had proved the case for their rejection of the specialized (EMI) home for the confused elderly (described as their 'single most important recommendation') and the 'Nursing Home' concept floated by the DHSS. The latter, as developed in Denmark, has many advantages over our own institutions but this clearly has not been examined by the Working Party (though it has by the DHSS). The EMI debate is badly in need of more objectivity, and one senses an incongruity between the evidence presented in the main text and the strong line of rejection taken in the Introduction and the Summary of Recommendations.

It is impossible to do justice to a wide-ranging document such as this (with a list of 69 recommendations alone) in the space allotted to this review. The Working Party is certainly to be congratulated on the breadth and selection of information (allowing for a few areas of doubtful validity) and on their Appendix on examples of good practice (much needed in a field rich in improvisation but weaker on communication). Most people working with the elderly would support most of the recommendations, though recognizing that any Government keen on cash limits would find the full menu heavy going. The strident tone of the recommendations (rather than the main text), which was a bit off-putting at first may, however, help achieve some sort of impact politically. At £1 this booklet is very well worth buying.

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* The College's comments on *A Happier Old Age* were published in the May Bulletin (p 85).