Psychiatric bed provision

DEAR SIRS

With reference to the letter from Dr Beedie in the July issue of the *Bulletin* expressing concern about rigid bed norms for acute psychiatric bed provision, new guidelines to be issued by the DHSS at the end of this year will give districts flexibility in deciding the level of in-patient facilities.

Hospital Building Note, 35, to be published in December, replaces the 1973 edition. It states "The number of beds required will need to be established by each Health Authority."

The note gives more freedom to individual districts. A minimum of two wards for acute psychiatric patients is recommended with a maximum of 25 and a minimum of ten beds on each. Bed numbers should increase, it states, in units of five. This incremental approach, it says "enables a Health Authority to provide accommodation in the context of its philosophy of care and consequent requirements for accommodation."

A covering note to the HBN says that Health Authorities can: "provide accommodation according to their own philosophies of care."

It recognises that there are "big differences between districts in the amount and type of accommodation required." It continues "The Note reflects the need for a wide range of sizes and mixes of in-patient, day patient and out-patient hospital accommodation."

PAT KRETT

42 Kings Road St Albans, Herts

Family therapy

DEAR SIRS

Dr Hardwick's article 'Occupational Agoraphobia' (*Bulletin*, July, 11, 230–231) is undoubtedly written somewhat tongue in cheek.

However, what I find very interesting is that the two case examples given concern psychiatrists practising family therapy. Having passed through this phase of development myself, I can recognise the position which many practitioners of family therapy adopt, namely a stance which is essentially critical and damning to the family.

A genuine recognition of one's patients' humanity leads to enjoyable accidental social contacts. "Training" is not necessary.

T. J. DYER

Child Guidance Clinic Shotton, Deeside, Clwyd

'Better Luck Next Time'

DEAR SIRS

How could you let Dr Margerison's interesting observation that rejection by an interviewing committee can be literally crushing (*Bulletin*, July 1987, 11, 232) pass without further comment and radiographic evidence? Or was it an entirely soft tissue injury?

DEREK STEINBERG

Bethlem Royal Hospital Beckenham, Kent

New Fact Sheets

MIND's new Fact Sheets are now available. Rewritten and redesigned, the leaflets explain in clear, plain language what is meant by mental illness, mental handicap, schizophrenia and manic depression. Practical advice is given for friends and relatives as well as people who are diagnosed as suffering from the various disorders.

They are: Fact Sheet One - Understanding Mental Illness.

Available in English, Bengali and Cantonese; Fact Sheet Two – Mental Handicap; Fact Sheet Four – Manic Depression; Fact Sheet Five – Schizophrenia. MIND's other Fact Sheets on Depression, Anxiety and Talking Treatments are still available. The Fact Sheets cost 25p each, £2 for 10 or £18 for 100 and are available from MIND Mail Order, 4th Floor, 24–32 Stephenson Way, London NW1 2HD.

New Journal

The British Review of Bulimia and Anorexia Nervosa is a new journal designed to extend the activities of the Anorexic Family Aid National Information Centre by providing a readily available source of review articles on different aspects of bulimia and anorexia nervosa. It is aimed at professionals of all disciplines who are involved in the treatment of bulimics or anorexics and their families as part of

their general work rather than being a journal for the specialist.

The Review is published every six months; annual subscription £10 (£15 outside UK). Further information can be obtained from: Anorexic Family Aid National Information Centre, Sackville Place, 44 Magdalen Street, Norwich, Norfolk NR3 1JE (telephone 0603 621414).