the columns

correspondence

Selection of inquiry members: passing the responsibility

Dr Lowe (*Psychiatric Bulletin*, March 2000, **24**, 116) believes that the development of a new QUANGO, namely the Commission for Healthcare Audit and Inspection (UK) (CHAI) and the passing of responsibility for murder reviews to this body is a wonderful step forward. The reason this will make absolutely no difference is that no government sets up a body that is likely to criticise it. Those invited to sit on such bodies are invariably drawn from the list of the great and the good, which excludes anybody who is likely to be properly independent or who believes that the whole process is fundamentally misguided. As I have previously noted, the fundamental purpose of these inquiries is to pin the blame for tragedy on individuals and to protect the Government, the Department of Health and Health Service managers from criticism consequent upon their failure to deliver a properly funded, functioning, psychiatric service. Of course, something useful may occasionally emerge.

Although Dr Lowe may have no complaints about the way he was dealt with, many of us have not had such a happy experience. I was only rather peripherally involved in an inquiry, but I was very unhappy with the nonsense produced by way of a draft report and complained vociferously about it, as a result of which almost all the criticism of me was removed. In the final document I received a glowing commendation! On this occasion, it was a respected senior colleague who was up for crucifixion.

My advice to any colleague caught up in these difficulties is to stand up for yourself and to be totally honest and open, to outline all the background difficulties to practising psychiatry at the relevant time, to react strongly to any unfair criticism or mistakes in the draft report and to marshal whatever support can be obtained from any quarter.

While Dr Lowe is quite correct that the results of inquiries are unpredictable, one effect appears to be perfectly predictable, namely that one or more doctors will emerge from the process feeling that they have been treated unjustly.

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Revalidation

As a non-NHS forensic psychiatrist, practising predominantly medico-legal psychiatry, I have been concerned as to how I should go about the process of revalidation. I was greatly reassured at a recent lecture from a representative of the GMC (Dr Krishna Korlipara: Second Grange Conference, Lake Windermere, 11 October, 2003) that the GMC are particularly keen to avoid increasing the administrative burden on doctors during the process of revalidation. I was urged to seek out an 'appraisal' route to revalidation rather than taking the 'independent' route, and it was suggested that I should seek out individuals in a similar situation to myself and form a loose cooperative for the purposes of maintaining annual appraisal, tailored to our particular needs.

I would be most interested to hear from other practitioners not involved in NHS appraisal, predominantly working in the medico-legal field so as to explore the most effective way forward to maintaining an annual appraisal.

I look forward to hearing the views of others on this topic.

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Journal clubs

Journal clubs are integral to psychiatric training (Alguire, 1998). Their objectives include teaching critical appraisal and presentation skills, keeping up with medical literature and improving practice. Participants also value trainees and trainers working together.

We hold evidence-based journal clubs similar to those described by Walker (*Psychiatric Bulletin*, June 2001, **25**, 237). To assess them, we measured attendance, and determined whether critical appraisal was practised and what priority participants placed on its teaching. From September 2001 to March 2002, 12 of 13 scheduled sessions took place, with 19 papers (of 26 possible) presented. Median attendance was 25, comprising SHOs (44% of the audience), SpRs (20%), consultants (17%) and others (19%). Each presenter included critical comments, but not systematic appraisal. Most discussion focused on the general topic rather than appraising the specific article presented. Consultants made most contributions to discussion (71%), SHOs the least (8%). Interviewed afterwards, presenters valued the opportunity to discuss topics of interest, rehearse critical appraisal skills and practise presentation.

Following the study period, a focus group of SHOs identified key aspects of the journal club process and in a questionnaire to all SHOs (return rate 77%), top priority went to critical appraisal skills. Learning about the topic presented and practising presentation were secondary priorities. These findings were presented to all journal club participants to discuss development options. Although the need to learn critical appraisal skills was widely recognised, a purely critical appraisal journal club was considered too constrained and lacking interest. Critical appraisal skills may be taught in special sessions. The popularity of journal clubs (measured by attendance) suggests that staff enjoy them. They value being updated on and discussing areas of practice and practising presentation skills. These positive values may be lost with a more rigid focus on critical appraisal skills.

Declaration of interest

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ALGUIRE, P. C. (1998) A review of journal clubs in postgraduate medical education. *Journal of General and Internal Medicine*, **13**, 347–353.

WALKER, N. P. (2001) Evidence-based journal clubs and the Critical Review Paper (letter). *Psychiatric Bulletin*, **25**, 237.

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