

sadly out of touch with reality in its present campaign.—I am, etc.,

Mount Eliza,
Victoria, Australia.

A. CLEMENTS.

* * The report of the Ministry of Health Interview Board was printed in the *B.M.J.* of 6 January (p. 45), after the receipt of this letter.—ED., *B.M.J.*

Return to Britain

SIR,—In a short leading article (23 December, p. 696) satisfaction is expressed concerning the statement by the Minister of Health that arrangements are well in hand for the return of some 50 British doctors from North America. I view the contents of this article with some concern.

I would like to know what inducements have been offered to these individuals. Have they already been offered posts? If they have not, then how are they to be employed? If certain posts have been offered to them, then will these posts be advertised, to be competed for by all? If there should be more candidates than the exiles for these posts how can they be guaranteed to those coming back? This could be done only if the appointment committees show a bias towards the exiles even if they are not the most suitable applicants.

If such a state of affairs should arise in order to entice those who departed to return it would be grossly unjust to those who did not leave. I think, until more is known about what has been offered as an inducement, to be enthusiastic about this return is somewhat premature to say the least.—I am, etc.,

Drumadrochit,
Inverness-shire.

P. W. GRANT.

Administrative Delays over Health Centre

SIR,—We practise as a group from the health centre which has been set up in the old cottage hospital here. In the outline plan for the next 10 years submitted by the Berkshire County Council and approved by the Ministry of Health in 1965 it was agreed that this health centre should be partly rebuilt and improved.¹ Before this could be done, however, it was necessary for the Oxford Regional Hospital Board to transfer the hospital to the county council, and this step also required the approval of the Minister, in whom the property was vested in 1948. The county architect's plan for the rebuilding has been fully approved by the health committee, and we were certain that the work would begin this autumn.

We have since been told by the county's health administrative officer that further progress has been stopped, for lack of the Ministry's approval of the transfer of the building which we already occupy and use. The district valuer was asked to prepare a valuation of the building in February 1967, and this was received in September. His report did not, however, contain any figure for his valuation of the building and site. For lack of this, the Ministry has been unable to approve the transfer, and in turn it has not been possible for the county council to submit its scheme to the Ministry of Health for further approval.

Even when all these protracted and interlocking desk decisions have been taken, we are assured that it will be necessary for the county council to approve the scheme, and then to apply to the Ministry of Housing and Local Government, this time for sanction of the loan necessary to pay for the improvements. The work will then have to be put out to tender, and we wonder how long the local people, who built the hospital without so far as we know any central interference or support, will have to accept the failure to improve the services provided by the health centre.

We inquired of the Minister on 13 December the reason for the delay, but we have not yet had any reply. In view of the Ministry's declared interest in health centres (30 December, p. 800), we are hoping to receive an adequate explanation.—We are, etc.,

R. F. WYATT.
J. A. TOBIN.
J. N. STENHOUSE.
D. G. SARGANT.

Health Centre,
Faringdon, Berkshire.

REFERENCE

¹ *Brit. med. J.*, 1965, 1, 1604.

Managing the Hospitals

SIR,—Recently there have been two reports on the administration of hospital work^{1 2} (28 October, p. 187, and 4 November, p. 252); both these reports are agreed that a great deal of hospital management is ineffectual. The reason for this apparent impotence of the administration at group level is that the regional boards allow the groups very little freedom of decision. The regional board allocates the money and specifies the purpose for which it is to be used, thus pre-empting the decisions which should really be taken at group level. The regional boards without reference to local opinion make decisions on behalf of hospital groups and fix the scale and order of their priorities.

Matters are not likely to be improved by the suggestion made by the King's Fund and the Institute of Hospital Administrators that the present group secretaries should become general managers within the group. This is to appoint the chief clerk to be commanding officer of a fighting regiment; this is to mistake the administration of a business for the actual business itself. I think that all hospital doctors should unite in rejecting this suggestion, which is unlikely to improve either the administration or the relationships within the hospital structure.—I am, etc.,

Bolton, Lancs.

HANUS WEISL.

REFERENCES

- ¹ Ministry of Health, *First Report of the Joint Working Party on the Organization of Medical Work in Hospitals*, 1967. H.M.S.O., London.
² *The Shape of Hospital Management in 1880*, King Edward's Hospital Fund for London, 1967. London.

Reimbursement of Rent and Rates

SIR,—Three years ago my partners and I decided to redesign our surgery premises and re-equip them. Our standards of equipment, comfort, and interior decoration were very high and the total cost of the work was a little over £8,000. We obtained an interest-free loan from our executive council of £2,250 (the maximum that we could get) and the

balance was raised privately by an overdraft from the bank. The local district valuer's valuation for the premises is £300 per annum. We are appealing against this figure, as we take the view that almost all of the £2,250 was spent on obtaining the high standards that we wanted for the equipment and furnishing of the premises. This high standard is not reflected in the district valuer's figures and had we not spent this additional £2,250 the valuation for rental purposes would not have been significantly lower. Indeed, had this interest-free loan not been available we should not have spent the money in this way.

Now, however, we find that an interest of 7% is to be applied to the loan, which will take up nearly three-quarters of our notional reimbursement for rent and rates. The equitable principles that were supposed to apply in the interpretation of this section of the Charter do not seem to apply to doctors who finance part of the improvement of their surgery premises out of their own money. If the best service possible is to be provided for patients then this anomaly should be corrected.—I am, etc.,

Ayr.

A. P. WALKER.

B.M.J. Cover

SIR,—Congratulations on the new much-brighter cover of the *B.M.J.* Thanks also for the new feature "Personal View." How we have missed *Pertinax*!—I am, etc.,

ARTHUR T. SPOOR.

Haselbury Wing,
Somerset.

SIR,—Surely you cannot make Mr. R. G. Fishwick entirely responsible for the second missed opportunity in recent years for doing something positive about the style of the *B.M.J.*

But if this new tippity-toeing into the chilly deeps of imagery is to be a real start to co-ordinate the information policy of both the British Medical Association and the journal it is very welcome indeed.—I am, etc.,

M. J. JAMESON,

Editor, Northern Home Counties Faculty News,
Royal College of General Practitioners,
London S.W.7.

* * Mr. Fishwick was working to a deliberately conservative brief. We thought he deserved credit for what he had achieved (6 January, p. 6).—ED., *B.M.J.*

SIR,—After the last débâcle to alter the face of the *British Medical Journal* I thought it had been settled that the full table of contents on the cover was what readers wanted irrespective of changing times and the urge of the Editor to move with them. I am all for going backwards if it is to be of benefit.—I am, etc.,

Resolven, Glam.

D. JOHN DAVIES.

SIR,—Congratulations on the "new-look" cover for the *B.M.J.* Any chance of a new look for the contents—that is, better quality paper, more modern script and presentation? I suppose cost rules this out, but I like the cover anyway.—I am, etc.,

Farnborough,
Hants.

D. G. BEETON.