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Editor's choice How to be good

A mark of a civilised society is how well it looks after the old, the sick, the vulnerable. On the evidence of this week's *BMJ* several countries aren't doing so well.

On p 426 Clive Ballard and a clutch of senior British geriatricians show how poor the quality of care is for patients with dementia living in private nursing homes and NHS long stay wards. They used a standardised method of observation to map patients' activity and concluded that all seven of the NHS facilities they studied and five of the 10 private homes needed radical changes (the other five needed much improvement). Too many of these patients spend their time "sleeping or sitting apathetically around the walls of the communal areas"-in the words of Mary Marshall in her accompanying editorial (p 410). She argues that one of the biggest problems is low expectations. Demoralised, undertrained, and unsupported staff perpetuate a cycle of "challenging behaviour, overuse of sedatives, and diminished capacity to interact."

According to John Braithwaite the regulatory and economic climate also affects the quality of care in nursing homes. In the first of a series of three articles on regulating nursing homes (p 443) he argues that the direction that Australia has recently taken—of encouraging private, for profit provision at the same time as loosening regulatory control—has been disastrous for the quality of care.

Adrian Hastings and Mohan Rao also emphasise structural factors in their editorial on doctoring deprived areas (p 409). They show that a lack of skilled doctors exists in the face of apparent plenty: India is producing unemployed doctors while medical posts are vacant in 70% of rural health centres. The solution is not, they argue, to rely on exceptional people-such as Dr Matthew Lukwiya, who died of Ebola virus infection contracted at the isolated hospital in Uganda that he had chosen to work in for 15 years. Instead doctors who serve the poor must have facilities to care for their patients and rewards to match those of other doctors. In a week when the UK government decided to recruit more doctors from overseas (p 416), they conclude: "it would be a sad irony if once again the UK solved its medical staffing crisis by enticing the brightest doctors from the developing world where they are most needed."

For doctors who are thinking of going in the opposite direction Andrew and Michelle Furber give some practical advice on taking children to a developing country in Career Focus (classified supplement). These include sending videos of the children back to granny. And for those still on holiday, why not read "this summer's blockbuster" about a GP (p 458)—*How to be Good*.

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