be disappointing; but the figure two days previously had been 158, so the rate was accelerating. Furthermore, it was clear that a number of local authorities were stepping up their offers to their own local police surgeons.

Dr. F. G. Tomlins said he was somewhat disturbed by the fact that at a recent meeting

of his local medical committee a lady practitioner, who did a small amount of policesurgeon work-mostly cases of girls who might have been assaulted-asked whether the question really applied to her.

The CHAIRMAN replied that such practitioners were not in the normal sense of the word police surgeons. They did not carry any of the other obligations of police surgeons. So long as the authority concerned paid a proper fee for their services, no exception need be taken to their carrying on as before. However, it was to be hoped that lady doctors who were employed in that way would give their support to the case for police surgeons generally.

## University Medical Teachers

In November 1967 the National Board for Prices and Incomes was instructed to keep under continuous review the pay of university teachers in Great Britain. Its first report1 was published on 18 December, and the sections which refer to medical teachers are summarized below.

The Report recommends that clinical teachers, appointed as readers, senior lecturers, or lecturers, with honorary consultant appointments, should be paid at the same rate as N.H.S. consultants. The university should be given discretion to decide the point on the salary scale at which the appointment is made. Professors in clinical departments would be paid on the same scale. No change in pay is recommended for clinical teachers without honorary consultant contracts.

The Report states, "There is a need in our view for some rationalization of the practice governing the grant of honorary hospital appointments," and recommends that the universities, the University Grants Committee, and the Health Departments should review the situation in consultation.

### Non-clinical Teachers

No overall pay increase is recommended for university teachers without clinical responsibilities, but several recommendations are made which are not intended to apply to clinical teachers and which in effect give a rise.

The Report suggests that more attention should be given to the respective contributions to administration, research, and teaching made by university staff. The Report recommends that research councils should pay for part of the salaries of teaching staff participating in research projects.

"To encourage a shift to teaching," the Report recommends that each university authority should have freedom within 4% of the relevant annual salary bill to make discretionary payments to certain teachers. Criteria for additional payment should include extent of responsibility towards students and quality of teaching. Distinction awards are recommended for professors.

The Report recommends that all university staff (other than clinical teachers) should serve a probationary period of five years, with passage beyond probation "rigorously controlled."

The Report recommends that with retrospection to 1 October 1968 the two national salary scales for assistant lecturers and lecturers should be combined and the scale shortened. This will result in annual increments being larger. Staff are to be appointed into the new scale in such a way that none is without a rise of at least 4%. Senior lecturers and readers should have rises of 3% and professors 2%.

The London allowance should disappear, says the Report, and it made no firm recommendations about Oxford and Cambridgesubjects to themselves."

#### REFERENCE

<sup>1</sup> National Board for Prices and Incomes. Report No. 98, Standing Reference on the Pay of University Teachers in Great Britain, 1968. H.M.S.O., price 68. 6d.

# **Association Notices**

## Diary of Central Meetings

## JANUARY

2	Thurs.	Rural Practices Subcommittee (G.M.S.), 2 p.m.
2	Thurs.	Finance Committee, 2.30 p.m.
2	Thurs.	Private Practice Committee, 5 p.m.
3	Fri.	Public Health Committee, 10 a.m.
3	Fri.	Medico-Legal Subcommittee (C.C.H.M.S.), 10.30 a.m.
8	Wed.	Council, 10 a.m.
2 2 3 3 8 9	Thurs.	Planning Unit, 12 noon.
13	Mon.	Scottish Committee for Hospital Medical Services (at 7
		Drumsheugh Gardens, Edinburgh), 2.15 p.m.
14	Tues.	Working Pary on Pay Beds (J.C.C.), 2 p.m.
15	Wed.	Occupational Health Committee, 10.30 a.m.
15	Wed.	Young Practitioners Subcommittee (G.M.S.), 2 p.m.
17	Fri.	Working Party on Computers in Medicine (B.M.A. Plan-
		ning Unit), 4 p.m.
22	Wed.	Special Conference of Representatives of Local Medical
		Committees, 10 a.m.
23	Thurs.	Executive Subcommittee (C.C.H.M.S.), 10 a.m.
24	Fri.	Joint B.M.A. and R.C.N. Committee, 2.30 p.m.
28	Tues.	Board of Science and Education, 11 a.m.
30	Thurs.	Special Representative Meeting, 10 a.m.
		FEBRUARY
14	Fri.	Ophthalmic Qualifications Committee, 12.30 p.m.

14	Fri.	Ophthalmic Qualifications Committee, 12.30 p.m.
21	Fri.	Compensation and Superannuation Committee, 2 p.m.

#### MARCH

Conference of Public Health Medical Officers, 10 a.m.

### Branch and Division Meetings to be Held

Members proposing to attend meetings marked • are asked to notify in advance the honorary secretary concerned.

The following branch and division meetings will be held to discuss the Green Paper, to consider motions to the Special Representative Meeting, and to instruct representatives:

BUCKINGHAMSHIRE DIVISION.—At Clinical Lecture Room, Stoke Mandeville Hospital, Friday, 3 January, 8.30 p.m.

Doncaster Division.—At Postgraduate Medical Teaching Centre, Doncaster Royal Infirmary, Friday, 3 January, 8 p.m.
EAST HERTS DIVISION.—At Roebuck Motor Hotel, Stevenage, Thurs-

day, 2 January, 8 p.m.
ENFIELD AND POTTERS BAR DIVISION.—At Board Room, Chase Farm Hospital, Wednesday, 1 January, 8,30 p.m.
HARROGATE DIVISION.—At Cairn Hotel, Thursday, 2 January, 8 p.m.,

divisional meeting.
NOTTINGHAM DIVISION.—At 64 St. James's Street, Friday, 3 January, 8.30 p.m.

READING DIVISION.—At Board Room, Battle Hospital, Thursday, 2

January, 8.30 p.m.

SHEFFIELD DIVISION.—At Board Room, Royal Hospital, Friday, 3
January, 8.30 p.m.

SUTTON COLDFIELD, LICHFIELD, AND TAMWORTH DIVISION.—At Post-graduate Medical Centre, Good Hope Hospital, Friday, 3 January, 8.30

WINCHESTER DIVISION.—At Postgraduate Medical Centre, Wednesday, 1 January, 8.45 p.m.

#### Branch and Division Officers Elected

ALDERSHOT AND FARNHAM DIVISION.—Chairman, Dr. J. McNutt.

ALDERSHOT AND FARNHAM DIVISION.—Chairman, Dr. J. McNutt. Vice-chairman, Dr. Catriona D. McLeod. Honorary Secretary, Dr. A. L. Leigh Silver. Honorary Treasurer, Dr. B. Winchurch.
BARNSLEY DIVISION.—Chairman, Dr. J. T. H. Pick. Vice-chairman, Dr. C. G. Oddy. Chairman-elect, Dr. J. Foster. Honorary Secretary and Treasurer, Dr. D. W. Mayman. Assistant Honorary Secretary, Dr. D. H. Pick.

CAMBERWELL DIVISION.—Chairman, Dr. A. Clark-Jones. Vice-chairman, Dr. E. M. Rosser. Honorary Secretary, Dr. W. B. J. Pemberton. CARDIFF DIVISION.—Chairman, Dr. A. Trevor Jones. Chairman-elect and Vice-chairman, Dr. H. Morgan. Honorary Secretary, Dr. A. C. Williams. Assistant Honorary Secretary, Dr. T. K. Davies. Honorary Treasurer, Dr. Alwyn Griffiths.

## Correction

In the report of the General Medical Services Committee (Supplement, 14 December, p. 65) Dr. J. H. Marks was incorrectly reported. In fact he disagreed with Dr. Howie Wood, his point being that in the early days of the trainee scheme there was a surplus of doctors, and many doctors were driven into trainee assistant posts, the only alternative being emigration.