

that "an exceptional consultation" fee of £14 should be paid to consultants making periodic visits to Orkney and Shetland. It was reported that the Home and Health Department had raised the matter with the D.H.S.S. in London. The committee emphasized that a consultant should not be out of pocket when he had to make these visits. Consultants in Aberdeen had suggested that since the work they did in Orkney and Shetland was outside their own area health board work their expenses could be covered by the Orkney or Shetland Health Board.

The committee learnt that the problem of the singlehanded consultant surgeon providing services in remote areas was being considered by a small subcommittee of the Advisory Committee on Hospital Medical Establishments and that Mr. A. B. Kerr from the Scottish Joint Consultants Committee had been co-opted to serve on it.

Removal Expenses

The negotiating subcommittee had been successful in obtaining the payment of removal expenses for consultants moving from one N.H.S. post to another from 26 July 1974, but the question of 100% reimbursement of removal expenses for maximum part-time consultants would be discussed in the Owen Working Party.

Committee on the E.E.C.

Dr. A. J. Rowe was in the chair at the meeting of the Committee on the E.E.C. on 31 October, and Mr. R. Brearley was appointed deputy chairman.

Advisory Committee on Medical Training

The Plenary Assembly of the Standing Committee of Doctors of the E.E.C. will be meeting in London on 22 and 23 November and the B.M.A. Committee had two important matters on which to advise the U.K. delegation—namely, the proposed advisory committee on medical training and the draft medical directives (*Supplement*, 1 June, p. 83).

The Standing Committee had recommended to the European Commission that there should not be specific government representation on the medical advisory committee and that the committee should confine its role to basic medical education. The Commission had, however, indicated that neither recommendation was acceptable and that the Council of Ministers would make a final decision about the committee before the meeting of the Plenary Assembly.

Nevertheless, Mr. Walpole Lewin, President of the Standing Committee had persuaded the Commission that the medical profession attached great importance to its responsibility for maintaining the standards of medical education, practice, and discipline and that decisions made on such delicate issues were unlikely to be effective if they

Owen Working Party

The Chairman reported on the recent meetings of the working party, on which he represented Scotland together with Dr. A. W. Wright. He hoped that progress would be made on the new contract for consultants and the position of pay beds in N.H.S. hospitals. Dr. Roberts said that morale in the hospital service depended on the outcome of the working party's deliberations. The committee considered a letter from Mr. D. C. Smith pointing out that an increasing number of junior staff were considering emigrating. Mr. Smith thought that the lack of communication was one of the causes of the juniors' dissatisfaction and he urged the Chairman to consider ways of improving liaison with junior staff.

Medical Assistants

The Committee was informed that a medical assistants subcommittee was to be set up with the following terms of reference and membership: "To consider matters of interest to whole-time medical assistants in Scotland and to report thereon to the S.C.H.M.S. and, on U.K. matters, to the Medical Assistants Subcommittee of the C.C.H.M.S." The Subcommittee would be composed of the chairman and deputy chairman of the S.C.H.M.S. and nine whole-time medical assistants.

Technical Staffing

The committee considered the problem of technical staffing in Scottish hospitals due partly to the failure of the recruiting programme of the Department of Clinical Physics and Bioengineering in Glasgow. It was resolved to ask the Scottish Joint Consultants Committee to request a departmental report on the number of unstaffed hospital beds and hospital units in Scotland.

Fees for Dental Anaesthetics

The Chief Administrative Dental Officer of the Lothian Health Board had asked the B.M.A.'s opinion on whether dental anaesthetics provided for health boards on a sessional basis should be regarded as specialist medical services as general practitioner services. The committee agreed that a doctor with a D.A. should be paid at the higher rate, and to refer the matter to the anaesthetists subcommittee of the C.C.H.M.S.

Other Matters

The Committee also received a progress report from Dr. A. Rowe, Chairman of the B.M.A. Committee on the E.E.C., considered the Home Office's paper on "Equality for Women," and discussed fees for medical witnesses and minimum time-off for junior medical and dental staff.

did not carry the full support of the practising profession in Europe. So the views of the Plenary Assembly on the proposed new initiative would be taken into account by the Council of Ministers.

It was argued by one speaker that the advisory committee should be realistic and flexible and though it should give priority to basic training he suggested that a subcommittee to deal with post-graduate training might be acceptable to the Commission. Mr. E. A. J. ALMENT and the CHAIRMAN were concerned at the suggestion of a subcommittee which they saw as another organ of the Commission. The membership of the advisory committee would have to be rediscussed unless, of course, it became a forum and inquiry agency, making recommendations on specialist training. The working groups which the advisory committee would be empowered to set up could deal with specialist training in detail.

Mr. R. BREARLEY wondered whether the U.K. was being too insular. Though the Standing Committee had said that the advisory committee was inappropriate to deal with specialist training, its composition could be varied to take on additional roles. Mr. Alment said that one solution would be to ensure that one of the alternate delegates was expert in further training.

GOVERNMENT REPRESENTATION

On the question of the representation of the

third sector—authorities responsible for the determination of qualifications—Commissioner Ralf Dahrendorf had said that it would be for the individual member states to decide whether these should be represented by governments or other experts, and the CHAIRMAN hoped that the Government would invite national delegations to nominate members. Mr. PARROTT pointed out that the concept of the advisory committee was unique—there was to be a tripartite participation indicating that the profession, the universities, and the general public (government) had a direct interest in the way that mutual recognition of qualifications was established.

The Committee decided to recommend to the Plenary Assembly that there should be flexibility in the appointment of alternate members and that wherever necessary appropriate experts should be asked to assist the advisory committee. The Standing Committee should be advised to agree to the inclusion of a third sector in the constitution (apart from the practising profession and the medical faculties of the universities) provided these representatives were medically qualified and appointed by the authorities responsible for the determination of the programme of studies for qualification as a doctor.

Draft Medical Directives

The draft medical directives formed the

other major item on the agenda. The observers from the Department of Health explained that the working group in Brussels which was discussing the medical directives at official level was still making amendments but there was some pressure to adopt definitive decisions.

The Committee supported the following entry to describe the evidence to be produced by a U.K. specialist to prove that he was one: "Certificate of specialist training issued by the competent authority recognized for this purpose."

Dr. R. A. GAWN (D.H.S.S.) said that the question of the inclusion of general practice

as a recognized medical discipline had not yet been fully aired in the working group.

The Committee thought that the requirement to establish information centres on health and social laws should be mandatory on the member states and the following amended article as evidence of formal qualification as it concerned the U.K. was approved: "A primary qualification granted in the U.K. after passing a qualifying examination held by a competent examining body and a certificate of experience granted by that body which give entitlement to registration as a fully registered medical practitioner."

MAINTENANCE OF STANDARDS

All members were concerned about the maintenance of high standards and, though this would be achieved by the proposed advisory committee as well as by the persuasive powers of the Commission and the member states, the Committee welcomed the addition of a safeguard in the directives if there was evidence that training requirements were not being observed. The Commission would notify the member state concerned and, until the situation was remedied, its diplomas or certificates would not be recognized.

Association Notices

Diary of Central Meetings

NOVEMBER

- 14 Thurs. Organization Committee, 10 a.m.
- 15 Fri. Panel on the Relationship of Alcohol and Other Drugs to Road Accidents (Board of Science and Education), 2 p.m.
- 19 Tues. Remuneration Working Party (Armed Forces Committee), 2 p.m.
- 21 Thurs. General Medical Services Committee, 10 a.m.
- 21 Thurs. Finance Committee, 2 p.m.
- 21 Thurs. Senior Hospital Medical Officers Group Committee, 2 p.m.
- 21 Thurs. Board of Science and Education, 4.30 p.m.

Branch and Division Meetings to be Held

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

Birmingham Division.—At 36 Harborne Road, Tuesday, 12 November, 7.15 p.m., jointly with Midland Medical Society, buffet and exhibition; 8.15 p.m., Mr. R. J. Hurst, Mr. W. A. Bannister: "Savings and Investment for Retirement".*

Blackburn Division.—At De Tabley Arms, Ribchester, Friday, 15 November, 8 p.m., annual dinner dance.*

Blackpool and Fylde Division.—At Savoy Hotel, Blackpool, Wednesday, 13 November, Dr. G. R. M. Sichel (D.H.S.S.): "Problems that Face the Health Service." (Preceded by dinner, 7.30 p.m.) Guests are invited.*

Brighton and Cuckfield Division.—At Sussex Postgraduate Medical Centre, Tuesday, 12 November, joint meeting with B.D.A., Professor D. Poswillo: "Role of Cryosurgery in and around the Oral Cavity." (Buffet supper provided, 7 p.m.)*

Cambridge and Huntingdon Branch.—At Churchill College, Thursday, 14 November, 8.30 p.m., Dr. A. Rook: "John Addenbrooke and his Hospital" (illustrated). (Buffet supper, 7.30 p.m.)*

Cardiff Division.—At Lakeside Restaurant, University Hospital of Wales, Friday, 15 November, 8 for 8.30 p.m., annual dinner. Speaker, Mr. Leo Abse, M.P. Guests are invited.*

Forth Valley Branch.—Monday, 11 November, B.M.A. lecture by Professor J. F. Mason: "Medical Investigation of Major Air Accidents."*

Greenwich and Deptford Division.—At Trafalgar Tavern, Greenwich, Saturday, 16 November, 7.30 for 8 p.m., annual whitebait supper. Speaker, Dr. Keith Porter. Guests are invited.*

Grimsby Division.—At postgraduate centre, Scartho Road Hospital, Wednesday, 13 November, 8 p.m., film: "Management of Rheumatoid Disease." (Refreshments provided.)*

Hendon Division.—At Hendon Hall Hotel, Tuesday, 12 November, 8.30 p.m., Professor H. Ellis: "Royal Operations" (illustrated). Guests are invited.*

Holland Division.—At Boston General Hospital, Saturday, 16 November, 7.30 p.m. Professor M. J. S. Langman: "Assessment of Value of Novel Drug Treatment." (Followed by buffet supper.)*

Lancaster Division.—At postgraduate medical centre, Wednesday, 13 November, 8 p.m., social evening (buffet and wine provided). All doctors are invited.*

Mid-Essex Division.—At Chelmsford and Essex Hospital, Thursday, 14 November, 7.45 p.m., a.g.m.

Mid-Glamorgan Branch.—At East Glamorgan General Hospital, Church Village, near Pontypridd, Friday, 15 November, 8 p.m., meeting to discuss future organization of B.M.A. in Mid-Glamorgan area.*

Mid-Northumberland Division.—At St. George's Hospital, Morpeth, Wednesday, 13 November, 7.30 for 8 p.m. Clinical evening.

North Northumberland Division.—At Berwick Infirmary, Wednesday, 13 November, 8.30 p.m., Dr. J. F. Munro: "Management of Obesity in General Practice."*

North of England Branch.—At Royal Victoria Infirmary, Newcastle upon Tyne, Thursday, 14 November, 7 for 7.30 p.m., Dr. C. E. Cooper, Dr. I. Kolvin, Mr. E. B. Rycroft: "Non-accidental Injuries in Children."*

Oxford Division.—At Nuffield Department of Surgery lecture theatre, Wednesday, 13 November, 8.30 p.m., a.g.m., and chairman's address: "Climbing and Falling." Guests are invited.

Portsmouth Division.—At Queen Alexandra Hospital, Tuesday, 12 November, 7.30 for 8 p.m., university quiz evening with junior hospital doctors. (Buffet supper provided.)*

Reading Division.—At library, Royal Berkshire Hospital, Wednesday, 13 November, 8.30 p.m., Dr. D. F. Rowlands: "Medical Problems Associated with School Ski Courses" (illustrated). Ladies are invited.

Reigate Division.—At Redhill General Hospital, Tuesday, 12 November, 8.15 p.m., Mr. D. Allen: "Life History of a Television Programme." (Buffet supper provided, 7.30 p.m.) Guests are invited.*

South-west Durham Division.—At Bishop Auckland General Hospital, Tuesday, 12 November, 8 p.m., Dr. J. A. J. Ferris: "Sudden Infant Death Syndrome."*

West Norfolk Division.—At postgraduate centre, West Norfolk and King's Lynn General Hospital, Tuesday, 12 November, 8.30 p.m., a.g.m.*

Worcester and Bromsgrove Branch.—At Gifford Hotel, Worcester, Saturday, 16 November, 7.45 for 8.15 p.m., annual dinner. Guests are invited.*