

Disciplinary Cases.

The case of Mary Wilde, S.R.N., 137661, who had stolen money from her colleagues, was considered by the Council, who postponed their judgment on the facts proved against her for a period of one year.

The case of Dora Emily Turner, S.R.N., 55818, R.F.N., 6952 (judgment deferred by Council, November, 1945), was dismissed.

Next Meeting of the Council.

The next meeting of the Council was fixed for January 24th, 1947.

BOARD OF CONTROL.**THE MENTAL HEALTH SERVICE IN WAR TIME.****1945 Admissions Highest on Record: Record Number of Discharges.**

The first report* of the Board of Control to be published since 1939 (issued Wednesday, October 30th) reviews the Board's work during 1945, and also surveys the contribution of the Mental Health Service to the war effort, as well as the incidence of mental illness and the condition of mental patients during the war years. Earlier reports, for reasons of paper economy, were not printed or put on sale.

The total number of persons under care under the Lunacy and Mental Treatment Acts at the end of 1945, the report states, was 146,027, a decrease of 241 during the year, compared with a decrease of 1,289 during 1944. Direct admissions to all forms of care during 1945 were 33,961—the highest on record. But the number of patients discharged was also the highest so far, and was 71.7 per cent. of the direct admissions, compared with an average of 66.8 for the preceding five years.

"Admissions to public mental hospitals," says the report, "are not necessarily an indication of the incidence of mental illness in the population. The admission rate is affected by many factors, including, for example, the amount of accommodation available, the facilities provided at particular hospitals, and the extent to which out-patient work is developed.

War Effects Not Known.

"Nor is it possible to assess with any certainty the extent to which the stresses of war may have affected the mental health of the community. That period of stress was, however, also a period of full employment and a higher standard of living, which might be expected to reduce the incidence of the milder forms of mental illness.

"We can only record as facts that the admissions to mental hospitals in 1940, 1941 and 1942 were lower than the average for the five years before the war. By 1943 they had risen above the pre-war average and continued to rise in 1944 and 1945."

The report adds that it is impossible to say whether the steadily rising discharge rate is due to improved technique in treatment or to the large increase in admissions of voluntary patients, following the passing of the Mental Treatment Act, 1930. It is, however, a reasonable assumption that a higher proportion of voluntary patients indicates the tendency of the public to seek attention at an early stage, when the illness is more likely to yield to treatment.

After-Care for ex-Service Patients.

* Further reference is made to the scheme for the after-care and resettlement of ex-Service patients.

* H.M. Stationery Office. Thirty-second Annual Report of the Board of Control for the year 1945, Part I. Price 1s., Post free 1s. 2d.

The total number of cases referred to the Provisional National Council for Mental Health up to September, 1945, was 7,847; some 75 per cent. of these were referred from the specified hospitals or centres through the Board and the remainder by the Ministry of Pensions, the Ministry of Labour or others, also on account of psychiatric disability or sub-normal mentality. The Council's Regional After-care officers undertake, in close liaison with the Ministries of Pensions and Labour, the after-care work in the area to which a man or woman is discharged. Consultations with Ministry of Labour officials during the year ending March, 1945, took place in 43.5 per cent. of the total number of cases dealt with; of the patients in work, slightly less than half found it through employment exchanges and the remainder by reinstatement or by their own effort. During the period March to September, 1945, 195 patients (4.7 per cent.) received training in Government training centres, compared with 2.8 per cent. in the previous six months.

"The scheme," says the report, "could be extended if it were not for the shortage of psychiatric social workers trained to handle the delicate and involved problems connected with mental disabilities."

Valuable help is given locally by statutory and voluntary bodies, and in a few areas now the psychiatric services are so developed as to allow local authorities to take over through normal channels the medical and social after-care of discharged members of the Forces. It remains generally true, however, that the lack of fully organised local facilities makes a centralised scheme for this work still necessary over the greater part of England and Wales.

Death Rate Half 1914-18 Figure.

The evacuation of 25,000 mental hospital and mental deficiency beds put at the disposal of the Services and the Emergency Medical Service space for some 42,000 beds for war casualties; but in the hospitals to which the mental patients were moved this involved overcrowding, amounting at one time to 16 per cent. This, with black-out restrictions detrimental to night ventilation, shortage of staff and physical strain arising from enemy action, created conditions in which the health of patients was bound to be affected. It is, however, significant that the increase in the death-rate was substantially lower than the increase during the 1914-18 war, the mean death-rate in the public mental hospitals being approximately half of that during the earlier war; in 1945, the rate at 68.4 per thousand was slightly lower than the average of the years 1935-1939. "Our examination of all the factors," says the report, "leads us to suggest that the better health record during the recent war was largely the result of an improved and better balanced diet."

Concern at Staff and Accommodation Shortage.

The report refers to the Board's concern at the present shortage of accommodation and staff. At the end of 1945 bed space for 17,020 mental patients still remained diverted to war-time services, while 847 beds could not be used owing to staff shortage—"a feature which has emerged as the most disturbing and intractable problem in the Service."

It is frequently impossible to find vacancies for defectives urgently in need of institutional care. The only ultimate solution is the carrying out of long-period schemes for extensions and the repair of war damage; while the return of beds and recruitment of staff "is the only immediate hope of remedying an unsatisfactory and, at times, dangerous situation."

National Health Service Proposals.

The Board have been closely concerned with proposals for the integration of the Mental Health Service with the National Health Service.

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