## Convalescent homes to make a comeback

Annabel Ferriman BMJ

Elderly hospital patients are to be given "intermediate" care in new convalescent homes and wards, the health secretary, Alan Milburn, announced last week.

Mr Milburn told a meeting at the King's Fund, London, that he would like to build a bridge between home and hospital for elderly people: "At the moment, for too many elderly people there is a false choice between hospital and home. That forces a lot of older people to stay in acute hospital beds because they are not fully recovered enough to go home."

The new convalescent centres could be based in major hospitals, revitalised cottage or community hospitals, "hospital at home" systems, or newly built units, in some cases supported by private finance.

The initiative has been spurred by the findings of the Department of Health's inquiry into bed use and availability (the national beds inquiry), which is due to be published later this month. It has found that two thirds of hospital beds are occupied by patients aged over 65, and half the rapid increase in emergency admissions in the past five years has been accounted for by people over 75-one in two of whom have been admitted on grounds of "symptoms, signs and ill-defined conditions."

Mr Milburn said that the findings called for a radically different approach to the management of care in the NHS. Traditionally, care had been about dealing with life's incidents—heart attacks and broken bones. "Now an ageing population and increasing chronic disease means NHS care has also to be about dealing with life's experiences—getting older and becoming frailer." Moreover the steady reduction in the number of acute beds could no longer go on, he added.

Referring to the prime minister's declaration that spending on the NHS should be raised closer to the European average (22 January, p 205) and the Shipman trial, in which an English GP was found guilty of murdering 15 of his patients, he said that the past few weeks would be seen as a turning point for the NHS and one of the most significant periods in its history.

## BMA accused of contempt of court

Linda Beecham BMJ

Mr Justice Forbes, the judge who presided over the case of Dr Harold Shipman, the English GP who was recently found guilty of murdering 15 of his patients, has criticised the BMA for "flagrant" contempt, which could have halted the trial. He has referred the matter to the attorney general.

The BMA had prepared a background briefing paper for circulation before the verdict to a small number of people who would be asked to do interviews in the event of Dr Shipman being found guilty on all charges.

The association had intended to circulate the paper, after the verdict, to a wider range of BMA spokespeople and members of the General Practitioners Committee. It was released to the wider group in error.

The judge said that he was concerned that the information could have reached the jury. "I accept that there was no intention to prejudice the trial," he said. But he believed that the documents were capable of prejudicing the fairness of the trial. "If the jury in this case had been discharged it would have been almost impossible to retry Dr Shipman either on the charges with which he is convicted or on any other offences."

The BMA has apologised for the error, and will submit to the attorney general that there was not a contempt of court. In a press statement the association said, "We are absolutely horrified ourselves at the possibility that an error on our part could have prevented Harold Shipman from being brought to justice. The persons to whom the document was circulated are responsible members of the medical profession and Mr Justice Forbes has accepted that there was no intention on the part of the BMA to interfere with the process of justice. However, he has referred the matter to the Attorney General for a view on whether, nevertheless, the BMA is in contempt

## Milburn sets up inquiry into Shipman case

Linda Beecham BMJ

The secretary of state for health, Alan Milburn, has set up an independent inquiry into the issues raised by the murder of 15 patients by Dr Harold Shipman (5 February, p 331).

Mr Milburn told the House of Commons last week that the inquiry's main purpose was to make recommendations on how patients could best be safeguarded in the future. He said, "It is almost universally agreed that we have one of the finest family doctor services in the world," but he emphasised, "we must be confident that we ... have the best systems for regulation and self regulation firmly in place."

The inquiry will be comprehensive. It will look at the part played by all the agencies involved in the case, including the coroner, registrar, police, and health services. Victims' relatives will be able to give their views and experiences, and the report will be made public.

The minister said that the inquiry would examine measures needed to guard against the risks of isolated professional

medical practice, GPs' access to controlled drugs, and the role of the NHS tribunal. The inquiry will also have to scrutinise the role and conduct of the West Pennine Health Authority, which has already suspended its GP adviser, and the involvement of the General Medical Council.

Lord Laming of Tewin, a former chief inspector of social services, will chair the inquiry, and he is expected to report by the end of September.

Mr Milburn told the Commons that steps were already being taken to deal with poor performance. The GMC was proposing a system of revalidation, and the report by the chief medical officer for England, Supporting Doctors, Protecting Patients, recommended how to deal with doctors whose behaviour was causing

concern. He believed that "isolation in which an individual doctor's practice is hidden from view will be a thing of the past."

In the future, doctors will be required to disclose any criminal convictions and any action taken against them in Britain or abroad before they can be appointed to medical lists.

It will be made compulsory for GPs to report deaths in their surgeries and other serious incidents to health authorities. The Department of Health will work with the Office for National Statistics to find better ways of monitoring deaths of GPs' patients.

Mr Milburn has asked the chief medical officer for England, Liam Donaldson, to commission an audit of Dr Shipman's past practice.



Alan Milburn outlines the aims of the Shipman inquiry