In an interview with the Telegraph, health secretary Jeremy Hunt said it was unacceptable for agencies to make big profits from the NHS and promised action on the matter.

Undoubtedly, urgent action is needed. The problems generated by excessive use of agency staff in the NHS are wide-ranging. As well as the financial implications of using agency staff, there can be issues, such as a lack of consistency and continuity of work, inadequate levels of knowledge, skills and training, and insufficient understanding of organisational operations and structures.

All NHS organisations should have an effective in-house temporary workforce department, particularly a pool of nursing staff who can work flexibly across an acute organisation. These individuals – whether working extra shifts on top of their substantive posts or working exclusively for the temporary workforce department, are a huge asset to NHS organisations. If used effectively, they can provide consistency and continuity to understaffed wards and departments.

By being in-house employees, these individuals will have knowledge of the organisation, will work in line with its values, provide assurance they know the standards expected of them and will have received appropriate training. Using in-house staff to cover staffing shortfalls will surely bring about more benefits for patients and staff than excessive use of external agencies.

Donato Tallo by email

**In-house nursing pools are better for patients – and the bottom line**

**MedS are no panacea for children who might have ADHD**

I agree caution needs to be exercised in using methylphenidate, most commonly known as Ritalin, for attention deficit hyperactivity disorder in children, (clinical update, January 20).

Like many child psychiatric conditions there is no intrinsic test – such as a blood test or scan – for diagnosing ADHD. It comes down to the subjective opinions of the people seeing the child. This results in wide variations in diagnosis and offers of treatment.

One area of major concern is informed consent because often the child’s opinion is not fully canvassed. Furthermore, confusion about whether ADHD is a psychiatric illness or a general developmental disorder results in some children being seen by a psychiatric team and others by the paediatric team. What is clear, though, is that medication alone is not enough and is unlikely to be effective. The child and their family should be supported