

## WHAT KIND OF COLLEGE?

Sir,

I read with interest the letter from Dr Whitney of Shenstone, Lichfield, in the *March Journal*. Dr Whitney expressed his growing concern at the increasing remoteness of the College which has come about in recent years. My own feeling is that the greatest danger which has come with increasing size and influence is an increasing formality, and it is to this that I attribute the remoteness observed by Dr Whitney.

We are the least formal branch of medicine. The College was founded at a time of depression and insecurity in our specialty following the changes in our role brought about by the introduction of the National Health Service. Our founders understandably felt that if general practitioners were, in the future, to carry influence in the profession comparable with that enjoyed by other specialties, then we must have a college of our own, and, further, we must be seen to take its role seriously. Thus we saw the establishment not only of a college (housed eventually in premises fitting to the status to which the founders aspired) but also a formal procedure for the conduct of its affairs. Inevitably at that time this rapidly became an 'instant tradition'—a ritual behind which the least secure member might shelter in safety.

We have come a long way in the last 22 years. Our role is now much more clearly understood both by ourselves and by our colleagues in other branches of our profession. I readily acknowledge that much of this we owe to the influence and example of the original members of the College. However, I feel that it is time to ask ourselves how meaningful at this point in time are many of the accepted characteristics of a Royal College, which we seem to have unquestioningly mimicked.

I am in entire agreement with Dr Whitney that there is far too little emphasis on local group meetings. The existing Faculties are too large to encourage regular attendance by members. I would however go a little further and say that I feel the College is far too London-orientated. Some central organisation structure is essential, but I am far from convinced that there is any justification for the retention of large prestigious premises in one of the most expensive areas of London, particularly in the present financial climate. A small set of offices would be sufficient for our needs, somewhere less expensive, perhaps with a small meeting room—possibly shared with some other medical organisation. Lecture rooms in medical schools are always available for larger group meetings.

Then there is the question of this *Journal*. Am I alone in feeling that little of any real lasting value seems to appear in these pages? We must be sure that we are not publishing a *Journal* for no better reason than that it is expected of a Royal College. The reputation of this *Journal* among our colleagues in other branches of medicine does not seem to be very high at the moment. Of course research in general practice must be encouraged and the results

must be made available to anyone who wishes to study them. Further we need some kind of news sheet to report on events and distribute information on college activities. A quarterly news magazine could be published (and printed much more cheaply than the letter-press techniques used for the present *Journal*), and announcements of papers received made by this means, perhaps with summaries. The actual papers could then be made available in duplicated form for anyone who wishes to study them.

I am sure many people would disagree strongly with these suggested reforms. However, I feel that we, as a College, are now sufficiently mature and secure not to need the trappings of status and formality which were necessary in the early days. I further feel that a radical rethink of our role in the profession might be much more attractive to the younger members of the profession, to many of whom the present hierarchical structure of the College is far from attractive. Our real status and reputation depends, as it really has always done, on the personal capabilities and personalities of our fellow members.

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Sir,

It is with interest that I read the letter from Dr Whitney in the *March Journal*.

For some time I have been worried about the role of the ordinary member in the day-to-day functioning of the College.

If the head of the College is not to become remote and separated from its body, then far better communication between members is going to be required than exists at present. Not only is communication between members required but also between members and non-members as there is definite "anti-College" hostility among some of our general-practitioner colleagues. For this communication to be effective, the members themselves must be enthusiastic and at present there is a distinct apathy.

Dr Whitney is quite correct in implying that the Faculties must play a larger part in encouraging and maintaining this enthusiasm and that the Faculty Boards must take great care not to become the sites of unchanging policies and faces.

I am sure that the way to further the aims and ideals of the College and to encourage the members to feel that they *belong*, is to start at Faculty level.

The implementation of this type of policy within the College cannot start too soon.

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## REFERENCE

Whitney, J. D. W. (1974). *Journal of the Royal College of General Practitioners*, **24**, 192.