small. The need for biochemical investigations in general practice is less than the need for haematology and urine tests, but it is possible that the advantages of biochemical investigation are not sufficiently appreciated by general practitioners.

If a general practitioner is to derive maximum benefit from modern medical technology, he must be dependent upon people and services, both in the laboratory and in the specialist clinical departments of the hospital, whom he may never meet and knows little about. The advantages of personal contact and discussion do not need to be emphasized, but medical education also has a place. It should be a major concern of medical educators, at all levels, to ensure that the gap, inevitable by geography, between the primary care physician and the laboratory does not increase, and that each has an appreciation of the problems and difficulties of the

other. The laboratory function is an integral part of patient care; it should not be confined to reporting figures. Close and frequent contact between clinicians and the clinical laboratory will assist in the development of tests to answer specifically defined clinical questions, the better use of information on drug interference, and similar factors in the interpretative process (Conn, 1978).

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Five hundred in a faculty

THE 1977 Annual Report of the College referred to the "healthy upward direction" of the trend of membership and the recorded increase in that year was 5.4 per cent.

The steady rise during recent years in the total membership of the College in the UK is of course being reflected to a varying extent in the different faculties. A recent landmark was reached when, for the first time in the history of the College, a faculty—the South-West England Faculty—achieved 500 members and associates.

There is an old Chinese proverb to the effect that successful organizations require regular revolutions. The truth of this maxim is already being seen as the College nationally and regionally begins to carry out a complete review of its structure and functions in its twenty-fifth Jubilee year.

The founding fathers were obviously most concerned to prevent the new College of General Practitioners becoming over-centralized and dominated by London members. The constitution provides for a majority of the members of Council to be those elected directly by the faculties and thus ensures in the supreme executive body of the College a majority of peripheral opinions. Nevertheless, this structure assumes that faculties are approximately equal whereas in fact very different patterns in geography and numbers have developed over the years. In numbers, for example, in 1977 the smallest faculty—the West of Ireland—had a total of only 20 members and the four Irish faculties combined had a membership of approximately the size of the then biggest English faculty.

Similarly in Scotland the smallest faculty in 1977—the

North of Scotland—had only 72 members and associates and the average size of the five Scottish faculties was only 204.

These figures obviously provide a basis for a charge of relative over-representation, particularly by the Celts. On the other side of the coin, the achievements of these faculties, including some of the smaller ones, have been notable. Scotland in particular has for years been a hive of college activity and has made remarkable achievements. Perhaps this apparent fragmentation has had beneficial results, and in this, as in so many other organizations, small may be beautiful.

Certainly the success of the College in attracting as many as 500 doctors in a single faculty is creating organizational problems. It is becoming clear that in practice colleagues cannot attend meetings when a single faculty spans 300 miles and only a tiny proportion of its membership can be involved in the work of the faculty board.

By contrast, the recent development of small groups meeting within a radius of about 20 miles at a focal point such as a postgraduate medical centre seems to be becoming increasingly popular and may be pointing the way to a new focus of college activity. If their structure is to serve function, faculties must identify exactly what they now want to do. Those like the South-West England, Midland, North-West England, and West of Scotland who are at, or in sight of, the 500 mark now have a special responsibility.

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