I fell in love at the Dulwich golf club.

The Treasurer’s Report was a haiku of such beautiful simplicity it melted my heart.

‘Capital account
Seven thousand pounds, current
Account thirteen pounds.’

I was astonished, delighted, and, although I didn’t know it then, I was transformed. This was the AGM of the South London Faculty of the RCGP. I had attended to receive my MRCGP. After dinner and wine I was ready to gaze smugly at my new certificate, while the tedium of the Board’s affairs droned on above my head. With a jolt I realised nothing of the sort would happen. These were GPs. They could take your tonsils and nothing of the sort would happen. These were GPs. They could take your tonsils and I was being gently nurtured and encouraged to spread my wings and try the boots of leadership on for size. Being part of the Faculty Board has given me the courage to be courageous. I have gone on to do other things, appraising and the like. The privilege of seeing the energy and passion GPs put into improving patient care constantly refreshes and inspires me. Surely it is impossible to teach about medicine without learning about humanity, and being human is what it’s all about.

Change isn’t what it used to be, and now webob about on ever-stormier seas. Our steadfast commitment to the best interests of the patient in front of us is tempered with concerns for all the others in someone else’s waiting room. Priceless things are lost as we dance to the tunes of our paymasters, and pointless box ticking makes liars or fools of us all. Can the College save us from our dystopian doom?

In John Berger’s memoir A Fortunate Man, Dr Sassall is called to the scene of a young man crushed by a felled tree. He drives with his hand on the horn the whole way, partly to warn oncoming traffic, but primarily so that the lad would hear it and know the doctor was coming.1

Those glory days of triumphing over disease and suffering with bare determination need not be over. Despite the end of 24-hour responsibility, home births, the betrayal by Shipman, and a half-baked determination need not be over. Despite the end of 24-hour responsibility, home births, the betrayal by Shipman, and a half-baked strike, our patients remain overwhelmingly loyal. In these times of fear and insecurity they look to us to decide how primary care should be run, and to show how we will take care of them now and in the future. Jumping to the latest target or tussling for resources with hospital colleagues will only divert our attention from the important work. It does fall to us to square our shoulders, stand together, reaffirm our values of compassion, clinical excellence, and integrity as a College, and reassure this worried island that the doctor is coming.

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Addendum

I have been an urban GP since 1999 in both London and Nottingham. Currently my portfolio includes being a GP locum, the Associate Postgraduate Dean for the East Midlands GP Fellowship programme, and the Named GP in Child Safeguarding in Nottingham. Since I wrote this article in 2013 there have been a few changes, not least the laudable strike by junior doctors and a glimmer of hope with the General Practice Forward View.2 These are still dark days. We need to know what our values are and keep them as our compass while having difficult conversations about service delivery, patients’ needs, and money.

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