Motion

The PRESIDENT: If everyone agrees, I think the time has come when I should call upon the speakers to reply to the discussion. I think it will be convenient if Dr. Howells will reply first and propose his motion during the course of his remarks, and it can then be seconded. We will then take the other replies and, finally, I will call upon Dr. Walk to propose his amendment.

DR. HOWELLS: I believe the amendment should be proposed first.

The PRESIDENT: The motion has to be put first, but the amendment is voted on first.

DR. J. G. HOWELLS: I should like to start then by moving, formally and with pleasure, the motion:

"That this meeting is of the opinion that the Royal Medico-Psychological Association should at once take steps to transform itself into a College of Psychiatry."

DR. J. BOWLBY seconded.

DR. HOWELLS: This brings us to the end of a stimulating and deeply-felt discussion, and I am going to add very little to it.

I enjoyed Professor Hill's remarks very much, but I felt that when he referred to membership of the General Medical Council and other Committees he had, perhaps, missed the point. We understood that there is representation; the point is that this is by accident rather than by right. The other Colleges, of course, would not accept the position.

Dr. Sargant and Professor Hill felt that there was a favourable movement within the College of Physicians, but they have overlooked the statement which I understand was made only a few days ago by Sir Charles Dodds, the present President of the Royal College of Physicians, when he said that there is no intention to set up a higher qualification for psychiatrists. The idea is merely to adjust the present Membership examination and widen it to make it a better qualification for the physician.

I was glad to hear a pathologist taking part in our discussion, but all the while you and I must have felt that the very viewpoints that he put forward were those which failed to convince his own colleagues who went on, in fact, to have a College. One of the reasons why they went on to have a College was because they wanted to include their Scottish and Irish members, something which would be impossible in a Faculty within a College of Physicians, but perfectly possible within a College. Indeed, the College of General Practitioners has a division both in Scotland and in Ireland.

I have said enough of the argument and the counter-argument. We must turn our minds now to the motion and the amendment. They agree in that both will lead to a postal vote to include all those who cannot be here today. They differ because the amendment does not allow us to express our opinions on whether or not we want a College. After such a vivid and responsible discussion we can, and we will, express an opinion, and so we will reject the amendment.

When we turn our thoughts to the motion we shall be influenced by fundamental matters. We shall support the motion because of our wish that our patient, through us, should have full representation. We will vote for the motion because of our conviction that we psychiatrists deserve equal recognition with our colleagues. We will vote for the motion because of our knowledge that our Royal Medico-Psychological Association is ready and fit to become a Royal College of Psychiatrists.

We can have our College now. It is in your hands. Reject the amendment; vote for the motion. Do not wait for the future. Let us create it now. So, Ladies and Gentlemen, let us have our College now.

PROFESSOR DENIS HILL: I cannot answer all the points which have been made in the discussion and I will, therefore, confine myself to four matters.

The first is the point which has just been made by Dr. Howells about the remarks made by the President, Sir Charles Dodds, to the effect that there was no intention of creating a higher qualification in psychiatry. This is true; there was no intention of creating a higher qualification for any part of medicine, not even the M.R.C.P., as it will be, for general physicians. The idea that a higher qualification can establish a man's right to consultant status—I do not say a consultant post, but consultant status—is really going out. It seems practically certain that a man's claim to consultant status will be established by the period of training and the experience which he has had in suitably recognized places. So that higher qualifications, not just for psychiatry but for all specialties and for general medicine itself, are out, unless we believe that the M.D.s and Ph.D.s of our universities are such higher qualifications, which in fact they have always been. These are degrees which are obtained largely by thesis.

Various people have spoken about a Faculty within the College of Physicians. Dr. McMenemey was in favour of such a Faculty, while various other speakers—including Dr. Main and Dr. Stern—were much against it. I think, however, that a word should be said about this. I did not mention it in my paper because I thought that the majority of psychiatrists were, in fact, against a Faculty. Two

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years ago Sir Robert Platt, then President of the College of Physicians, called a meeting of Fellows and Members of the College who were psychiatrists, and one of the points that was put to them was, "Do you want a Faculty of Psychiatry in this College?" It was almost unanimously agreed among those Fellows and Members that they did not want a Faculty. Recently another meeting of Fellows and Members was called by Sir Charles Dodds. This time a smaller number attended, but the same question was put to them, a vote was taken on it, and the result of that vote showed them to be pretty evenly divided. I should like to say that, to the best of my knowledge, there is no intention at all of creating a Faculty of Psychiatry within the College of Physicians unless it is abundantly clear that the majority of psychiatrists in this country want it. There is no question of a pressure group among the psychiatrist Members or Fellows of the College creating this, and certainly it would be rejected by the College of Physicians themselves if it were thought that we, as a body of psychiatrists, did not want it. This is one of the points I think it is important to make, and I hope I have made it.

The third point I should like to take up is the matter which Dr. Hutchinson raised. He said he was querying my figures and he started by talking about representation. He pointed to what he thought was the serious state in the undergraduate teaching hospitals with regard to psychiatry and the number of psychiatric beds. He said that such representation as we have has done nothing to change this situation. This is not true. The Royal College of Physicians has produced a report with recommendations as to the number of psychiatric beds in Teaching Hospitals with a minimum number of 60 on site in the Teaching Hospitals. The Ministry of Health, through its psychiatric advisory machinery, has produced a paper recommending between 60 and 100 psychiatric beds in all the Teaching Hospitals of this country.

Next there is the question of undergraduate teaching and of the inclusion of psychiatry in the Finals. This is something that we are all fighting for very hard. In the provinces the battle has been largely won; it certainly has been won in Scotland, and in the provincial teaching schools the situation is a great deal better than it is in London. The reason for this is that we have twelve medical schools in London and, therefore, to get an agreed policy for London University is a matter of the greatest difficulty. Recently, however, so far as the University is concerned, medical schools have been allowed to set their own internal papers in general medicine, and at least three of the twelve schools have accepted this offer, my own school being one of them. At Middlesex we set one of the two papers in medicine, and the result of this is that we have two compulsory questions in psychiatry. I may say that they are not checked by psychiatrists yet. We also put psychiatric patients into the clinical examination. I am certain, as far as I can be, that this process will continue and that, in fact, psychiatry will be an integral part of the medical examination for the university degree.

As far as the Conjoint Board is concerned, as you have heard we have now psychiatric examiners in the Finals of the Conjoint Diplomas. It is true that they still play a subsidiary role, and we have to press that they should play a major role and that psychiatric patients should be brought into the clinicals.

A comment was made regarding the representation of psychiatrists on Regional Boards. It is no secret that the R.M.P.A. is asked to nominate psychiatrists every year to Regional Boards. The fact that they are not always appointed is a matter over which we as a body have no control at all. Success in getting appointed to these bodies depends upon how well a man is known by his colleagues in general medicine.

Dr. Hutchinson also doubted my figures regarding higher qualifications by provincial consultants and said that, in his findings, 50 per cent of provincial non-teaching consultants had higher qualifications. I think this is probably right so far as the M.D. and Ph.D. are concerned, but I was referring to Membership or Fellowship of one of the eight Royal Colleges.

My final point concerns the Membership. We have been asked whether we are sure that the College of Physicians is not in a state of panic and that they are just showing favour to us at the present time, favour which will be withdrawn. My answer to that is that if the College of Physicians does what is now suggested—to fragment the membership into examinations for specialties, then each part of the membership will be taken over by specialists in that specialty. For us there will be psychiatric examiners, for the paediatricians—who are at least as vocal as we are about this—there will be paediatric examiners, and so on. There can be no going back at all when that happens.

Dr. Cook indicated that he had nothing to add to what he had previously said.

Amendment

The President: I will call now upon Dr. Walk to move his amendment.

Dr. A. Walk: I beg to move the amendment which is down in my name and which consists in deleting everything after the words, "That this meeting", and substituting the words which are on the Agenda paper, namely:

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