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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". . . deplores any attempt to force a premature decision on a matter requiring the most exhaustive consideration; and is of the opinion that the question should continue to stand referred to the Special Committee already appointed for the purpose, and that any eventual decision should follow a postal ballot of the whole membership."

DR. WILLIAM SARGANT seconded.

DR. WALK: Dr. Sargant has disclaimed membership of the "establishment" of the College of Physicians; I can go further, and disclaim any connection whatever with the College of Physicians. I am not only not a Member or a Fellow, I have not even got their Licence.

I have felt it my duty to put down this amendment as Chairman of the Committee which has been considering this question. The Committee was appointed during my Presidency and, for that reason, I was made its Chairman. In this amendment I am supported by the majority of the members of my Committee and by very nearly the unanimous vote of the Council.

I want to make it quite clear that this amendment is not a vote against a College of Psychiatry, nor is it a vote in favour of indefinite postponement or of doing nothing. It is intended as a vote in favour of good order, good government and proper democratic processes within this Association. Dr. Howells went over at lightning speed the proceedings of the Committee, of which he is a member, but I should like to go over them again slightly more fully.

Our first steps were to clarify and define the problems, and to see what alternatives there were to be put before the Association. After doing that we sent out statements prepared by our General Secretary—very ably—and we asked members to send in their comments and give their views. These were analysed very carefully, and we found that there was, in fact, no preponderance of opinion in favour of any of the courses that we had put before the membership, and therefore there was no mandate at that time for any action. That being so, we felt that a period should intervene during which the subject could be prominently brought to the notice of members and could be debated and discussed in every possible way. That has happened. We have had *ex parte* statements put out, we have had discussions at Divisional level, we have had correspondence in the medical Press, we have been helped by at least one outside body who have conducted their own investigations—as you have heard today—and, finally, we arranged with the Papers and Discussions Committee that there should be this discussion today at which the different viewpoints should be put forward. Our next step, which is quite clear and is well known to Dr. Howells, will be to publish and circulate the whole of this debate to all members, through our *Journal* or its Supplement, and it will appear in our March issue. Everyone will then be able to read and to reflect on what has been said here today, and will be able to form his own judgment.

Our next step after that would be to hold a postal ballot of the whole membership, and I do hope—this is a personal view—that we shall hold the ballot in such a way that people will be able to indicate not only their preferences but also their aversions, so that we shall afterwards be able to weigh how much serious opposition there is to any of the steps which we shall put before members.

It seems to me that there is one other matter which must be settled before we take any of the positive steps which are among the choices before us, and that is to have some sort of agreement about the kind of higher examination which is possible in psychiatry. A great deal has been said about it today, but in fact we have been considering this for a good many years and so far there is no agreement whatever, to my knowledge, about the kind of examination this could possibly be or what its contents might be. This seems to me to be a matter of the utmost importance, because although we can have a higher examination without a College we can hardly have a College without a higher examination. We must come to some sort of agreement on what this is to be. Some say that it should have an organic bias, others that it should have a psychological or an anthropological bias, or there might be several alternatives; there is no agreement on the question at all and it does seem that we must have agreement before we can proceed with any positive steps which may be proposed.

This seems to me the orderly procedure we should follow, and at Dr. Howells' request we readily agreed that a vote should be taken on this occasion. However, at that point Dr. Howells sent in a notice of motion which interrupted this orderly procedure and called on this meeting to give a mandate to the Council to proceed *at once* to take steps to transform the Association into a College of Psychiatry. We on the Committee and on the Council took a very dim view of this. It seemed to us that for one of our colleagues who has been engaged in this work to ask that there should be a brusque interruption of the work in this way and to insist on an immediate decision was not the way things should be done and not in accordance with orderly, representative, democratic methods. It is for that reason, and that reason only, that I am putting this amendment before you today.

Dr. Howells has rather implied today, and he did the same in a letter to me, that the motion does not in

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fact mean what it says. In a letter to me he said that ". . . The motion seeks what you ask for, namely, the collective wisdom of the Association's members, at the meeting to begin with and, later, by a referendum by the Council", and he has said the same in his speech today, that in fact no steps should be taken until there has been a referendum or a postal vote of the whole Association. But, he adds, a referendum should be held "as the first step to a College". I put it to the meeting that a postal vote cannot be taken as the "first step" to anything. It is taken in order to ascertain the wishes of the members and it must be completely free and impartial. It is not part of the process of forming a College; it is part of the process of decision before any steps can be taken towards adopting any solution. That is why, in the interests of the Association, we are asking you to vote for this amendment.

But it has been put by Dr. Howells, and there is some force in this, that the passing of an amendment would prevent a vote being taken which would be very valuable as an indication of present opinion at this meeting. That is all it can be. The passing of this motion cannot be mandatory on the Council, because votes at Quarterly Meetings are, in fact, not mandatory on the Council constitutionally, nor could the Council conceivably go to the Privy Council with a request for an alteration to the Charter, on the basis of a vote taken here. However, I think that Dr. Howells has a point when he says that the passing of this amendment would prevent the taking of a straight vote for or against the principle of a College at this meeting. I have no wish to prevent that, and I am therefore going to make an offer to Dr. Howells. I suggest that he may like to ask the President's permission to alter the wording of his own motion so that it is compatible with the orderly processes which we have in mind. I wonder whether Dr. Howells would accept that. If he does that we can vote on the motion and it will be a straight vote as to whether those members present are in favour of a College of Psychiatry or not.

Perhaps in the present mood of the movers of the resolution it may be too much to ask them to alter the wording, and it may be that the meeting can safely be left to interpret what is in their minds in using the words "at once". If Dr. Howells will make it clear that he does, in fact, wish our Committee to continue its work in the way I have said—that is, for this meeting's proceedings to be published, for every member to be acquainted with them, a little time for reflection and then a postal vote, and then an orderly evaluation of what the result of this vote means—I am quite prepared to withdraw my amendment.

DR. HOWELLS: I think it is most unfortunate that, since an amendment has been moved, you and I have no opportunity of discussing it. I think this is most unfortunate. Our Bye-Laws allow discussion of an amendment and even allow a member to speak twice if an amendment is before the meeting.

What I did want to make clear was that, by the amendment, as Dr. Walk has admitted, you will not be able to express an opinion as to whether or not you want a College. This is precisely what we want to do. Dr. Walk asks me to adjust my motion, and so on and so forth, but he need not have put his amendment at all and then we could have had a straight vote. I feel it would be very much better and fairer, seeing that you have come and seeing that both the motion and the amendment are before you, that we should first of all reject the amendment. We are not going to have obstruction to our expressing our point of view. We will reject the amendment, and then we will vote for the motion.

Vote

The PRESIDENT: Under our Bye-Laws, Standing Rule 113, the vote will be taken by a show of hands, the hands being counted by the Chairman and the General Secretary. I hope you will forgive me if I ask other people to come up, preferably Dr. Howells, to help us count.

I will put the amendment first.

A vote was then taken by show of hands, and there was then a recount, members standing to record their vote. There being 70 *in favour and* 64 *against, the amendment was* **carried.** (*Total voting* 134)

The PRESIDENT: It only remains for me to thank you all for your attendance. I hope the counting was more or less right, although it may be one or two wrong. However, it does show the general trend. On the whole people seem to be in favour of the amendment by a small majority.

A MEMBER: Many of those who voted for the amendment may still wish to indicate their desire, or lack of desire, for a College of Psychiatry. We came here for this purpose.

DR. A. WALK: May I suggest that someone proposes a straight motion that this meeting is in favour of a College of Psychiatry?

DR. J. G. HOWELLS: I will do that.

DR. J. BOWLBY seconded.

The CHAIRMAN: I should like to have this cleared up in our minds. Dr. Howells has proposed a motion that this meeting is in favour of a College of Psychiatry, and that has been seconded by Dr. Bowlby as before.

A vote was then taken, members standing to record their votes. There being 85 *in favour and* 26 *against the motion was* **carried.** (*Total voting* 111)

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