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THE PORTSMOUTH MEDICAL SOCIETY AND MEDICAL CENTRE

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INTEREST in postgraduate education in Portsmouth gradually grew until in 1957 it became clear that lack of accommodation and facilities was preventing regional and national medical meetings and limiting general practitioner courses to one weekend a year. These courses were heavily and consistently over-subscribed and necessitated taking over temporarily the nurses' lecture rooms and recreation rooms. The Medical Advisory Committee to the Group therefore decided to set up a small sub-committee, including general practitioners, to study the problem.

This committee considered that the proper solution was to build a medical centre in the grounds of St. Mary's Hospital, Portsmouth, since such a building could become a focal point for consultants, general practitioners and resident junior medical staff, and would allow clinical meetings to be held with the minimum of difficulty. Plans for such a building to cost £75,000 were drawn up. However, applications to two well-known trusts were regretfully refused.

This, however, did not dismay the consultants, who continued to donate their lecture fees to a medical centre fund and decided to initiate discussions with the Wessex Regional Board. As the Board is without a teaching hospital within its boundaries, a good deal of thought had already been given to the educational needs of the area. Several teaching programmes were being undertaken in the region, Dr. Shackleton at Southampton having set up a basic primary course in anaesthetics and a similar lecture course for pathological registrars having been provided at Portsmouth, to give two examples. Other groups in the region had provided general practitioner courses, but there was little integration between the various groups or indeed in any individual group itself.

In December 1961 the Nuffield Provincial Hospitals Trust called a meeting at Oxford to discuss and to plan postgraduate medical education; and it was as a result of this meeting and of the interest shown in postgraduate teaching by the Wessex Regional Board, the British Postgraduate Medical Federation and the Nuffield Provincial Hospitals Trust that the plans for Portsmouth were enabled to come to fruition.

The scheme put forward by the Wessex Regional Board covers all the groups in the region. In each of the seven major general groups a clinical tutor selected from the existing consultants has been appointed by the Postgraduate Medical Federation to organize the teaching programme; for this he receives a small honorarium. In Portsmouth he is assisted by a full-time secretary, who also acts as librarian. At the same time the Wessex Regional Board and the Postgraduate Medical Federation have appointed Grant Massie Esq., C.B.E., M.S., F.R.C.S., as Regional Adviser, whose job it is to co-ordinate the postgraduate training and teaching programmes for the entire region.

In common with most other groups, there was no suitable accommodation available in Portsmouth, so a prefabricated building was provided in the grounds of St. Mary's Hospital at a cost of £11,000 from funds provided by the Regional Board and the Nuffield Provincial Hospitals Trust and was opened by the Rt. Hon. Lord Cohen of Birkenhead, P.R.S.H., M.D., D.Sc., F.R.C.P., on March 26, 1963.

The Medical Centre (Fig. 1) consists of a large lecture room which will seat approximately 200 people or in which 100 people can lunch or dine. Opening into the lecture room is a small kitchen, from which pre-cooked food can be

FIG. 1.—An end-on view of the Portsmouth Medical Centre.

distributed, and a bar. The building also has a clinical tutor's office, a secretary's office so designed that she can also keep an eye on the library, and a quiet room in which small discussion groups or meetings can take place.

It soon became clear that if we were to equip the Medical Centre in a satisfactory manner further funds would be required. The consultants had a nucleus of some £500 donated from their lecture fees and some projection equipment was available, but, as this was clearly not enough, it was decided to form a Portsmouth Medical Society. This would have a twofold function: firstly, to provide an organization which could collect funds and which could be recognized as a charity and, secondly, to obtain a club licence for the Medical Centre. Both these objects have been achieved and an appeal was made last year to all local members of the medical and dental professions, offering them membership of the society.

Active membership is of two types. Ordinary membership is restricted to any medical or dental practitioner whose name appears on the Medical or Dental Register and who has paid an entrance fee of £5 and an annual subscription of £1, or who has taken up five or more shares of £5 each as an interest-free repayment loan. These shares can be repaid by ballot in due course, but whilst a member holds at least £25 worth he will not have to pay an annual subscription. Associate membership is available to all senior registrars, registrars, house officers and assistants engaged in practice in the Health Service at an annual subscription of 10s. As Portsmouth has a number of Service doctors in the area who are often here for short periods of time, the Officers' Mess of the Royal Naval Hospital, Haslar, has provided a group subscription which allows Service doctors to become associate members on an annual basis. So far the Society has 296 members.

FIG. 2.—A portion of the Library.

In this way £2,500 has been raised by dental and medical practitioners, but it has also been found necessary to make an appeal to various firms and local organizations with whom we have had connections and who have provided a further £2,200, bringing the total, with the moneys already available, to nearly £5,500. With this money we have been able to furnish and equip the Medical Centre with its basic requirements and we hope to expand and improve it later on. Two rooms as well as the library were furnished as a result of the donations and an initial supply of books to which the Regional Board has also contributed has been purchased. A number of firms have provided covenants which will be of great value in maintaining the library.

The catering and bar arrangements are all under the control of the Mess Secretary, Dr. J. C. Hesketh, and a small Mess Sub-Committee. Through the co-operation of the Portsmouth Management Committee it is possible for members, including general practitioners, dentists, house officers and registrars, to lunch daily in the Centre and to take part in discussions if they so wish. Some departments hold regular weekly lunches.

One of the primary objects of the Centre in this day of specialization was to bring all disciplines of the dental and medical professions together as well as providing all types of educational programmes.

The educational programme is split into three academic terms each year and has ten major events in each term. For these, lecturers receive a fee and travelling expenses. In addition to these, there are a number of other activities, all of which come under the organization of the Clinical Tutor, Dr. D. E. Argent, with the assistance of a small committee consisting of three consultants, two general practitioners and one registrar, covering the St. James Hospital (Mental) Group and the Portsmouth Hospital (General) Group.

The educational programme can be divided into the formal series of lectures and the informal discussion groups. There is little doubt that the latter are more popular in general.

Informal Events

(1) *Discussion Group.* It has been found that the most popular form of meeting has been the discussion group which usually takes place in the evening on different nights of the week. The meetings start with a film or a short introductory talk and are then thrown open to general discussion. This appeals particularly to general practitioners. In many ways it resembles the smoking concert atmosphere since the bar is especially opened.

(2) *Lunch Time Discussion Group.* This takes place at 12.30 p.m. and is followed by lunch at 1 p.m. An invited speaker is asked to review recent advances in a particular subject, speaking for not more than 20 minutes, followed by 10 minutes discussion. It is, however, found that controversy frequently continues over the lunch-time table.

(3) *Individual Tuition.* The Clinical Tutor has arranged for a number of practitioners to sit in on a Consultant's Out-patient Clinic and this has proved popular with the general practitioner for revising knowledge or learning techniques. In addition, arrangements have been made for junior medical staff to attend at general practitioners' surgeries and on their daily round of visits.

Formal Events

(1) *Weekend Course for General Practitioners.* Up till now only one weekend course per year is presented and comes under the aegis of the Postgraduate Medical Federation. It is hoped in the future to augment this course during the year since it has proved so popular. One of the features of this course has been the importance of ensuring that the general practitioner helps to design the pattern of the course and the subjects chosen.

(2) *Open Ward Rounds and Clinico-Pathological Conferences.* It is intended to encourage open ward rounds though these raise some difficulties over timing both for the consultants, the general practitioners and the wards themselves. Clinico-pathological conferences involve an enormous amount of preparatory work and have had to be restricted to once in two months.

(3) *Clinical Meetings.* On the whole clinical meetings appear to be most popular among the registrars and housemen but it has become a routine to invite any general practitioner whose patient is being shown to attend. This has proved highly successful and an increasing number of family doctors are attending as a regular event and contributing to the discussion.

(4) *Lecture Series.* A lecture series started in 1950 for registrars in pathology takes place every Monday evening. Outside speakers are invited for three evenings a month and a slide seminar takes place on the fourth. Registrars from other groups attending this course are entitled to their travelling expenses payable by the Regional Board. Lecture courses for specialized subjects are envisaged for anaesthetics, obstetrics and surgery. These lecture series are, of course, supplementary to ordinary monthly B.M.A. or B.D.A. dinner meetings. It is the policy of the Society not to compete with these functions which are already well established.

Later it is proposed that newly appointed housemen shall have a series of practical demonstrations on such things as techniques for lumbar puncture, dressings,

etc., which they may have had little chance of carrying out in their teaching hospital.

One of the more gratifying features has been the fact that, whereas at the B.M.A. or weekend courses about one-third of the group of doctors attending were the same, in this system a much wider group of doctors or dentists have attended various events.

Regional and national meetings of specialist groups have already been arranged and will be held in the Centre during the forthcoming year.

The Society was also anxious to provide facilities for self-education and it was for this reason that a quiet room and library (Fig. 2) have been provided. The Honorary Librarian, Dr. H. G. Penman, M.D., M.R.C.P., with a small committee is responsible for the library and the purchase of books. Although it is early days to say how the library will develop, it has proved popular already and will need enlarging soon, despite the fact that the individual hospital and departmental libraries have not been disbanded. As yet we have not been able to keep the library open after normal working hours, but the Clinical Tutor is optimistic that he will be able to provide a temporary librarian in the evenings from a rota of doctors' wives who have volunteered for this duty. It must be pointed out that this again proves how long-suffering the doctor's wife can be.

It is not possible to say at this moment how the Society will progress, but it is believed that this modest beginning will improve postgraduate facilities. It has already brought the general practitioner more in touch with the consultant, the houseman and the registrar, and the consultants with one another.

It is clear that the scheme would not have been possible if it had not had the support of the two Management Committees, the general practitioners and the consultants in the area, in particular the Clinical Tutor, Dr. D. E. Argent, the Administrative Secretary, L. C. Rogers, Esq., M.R.S.H., F.H.A., Secretary to the Portsmouth Group Hospital Management Committee, Dr. J. Revans, M.B.E., Senior Administrative Medical Officer, and G. Bowden, Esq., F.H.A., Secretary of the Wessex Regional Board.

Finally it is realized that this has been a co-operative effort, but the members of the Society are grateful to P. G. Templeman, Esq., and the members of the Wessex Regional Board, A. G. Asquith-Leeson, Esq., and the Portsmouth Group Hospital Management Committee, N. W. McCaw, Esq., St. James Hospital and, last but not least, the Nuffield Provincial Hospitals Trust.

The photographs were taken by J. A. Hewes, A.I.B.P., A.R.P.S., Southsea.