

A general practice visionary

Profile: Michael Boland

In profiling Michael Boland, one would need a book to list all the health and educational bodies he has been involved with over the years; medical, governmental and international. During a career spanning over 30 years, he has virtually left no stone unturned and has left a mark on general practice unequalled by anyone else.

Michael was recently awarded an honorary degree of Doctor of Medicine from UCC for his national and international achievements. Summing up his contribution, Prof David Kerins, head of the school of medicine, UCC said: "His influence on the advancement of general practice and patient care are recognised and appreciated on a worldwide basis".

The story of a man who always had a mission began in the mid-1970s when Michael joined the management committee of the Cork Vocational Training Scheme to represent the GP trainees. Having been educated at Clongowes Wood College, and graduating in medicine from UCC in 1972, he joined the GP training scheme directed by Bill Shannon in Cork.

"There was something immediately distinctive about Michael in terms of his highly organised, questioning mind and his attention to detail", Bill Shannon recalls. "At the weekly day release sessions he always came well prepared, often with evidence that he had studied in the current medical literature, in order to back up his argument for a new approach to the management of common conditions seen in the daily work of a GP.

"His GP trainer, the late Dr Miheál O'Súilleabháin, often told me how Michael would quiz him, in his diplomatic way, about how things were done in the practice, always with the intention of adding quality and evidence to the way patients were treated. This was at a time in the 1970s when the era of evidence-based medicine had not yet arrived from centres of excellence such as McMaster University in Canada."

He also became the trainees' representative on the

Postgraduate Medical and Dental Board and convened the first meeting of the national organisation of trainees. At this point many of his eventual achievements in general practice education were a pipedream. Compared to its standing today, general practice was truly in the dark ages and it was quite a struggle for many to survive in the profession. General practice education at every level was embryonic to say the least.

Michael first came to national attention in the early 1980s when he was piloting 'small group' learning. The CME tutor network is so mainstream and well established now, that it's hard to imagine a time when it wasn't there. Michael was at pains to explain his vision. He might as well have been promoting witchcraft, such was the novel if not alien nature of what he was proposing. But he argued his case cogently and received the support of colleagues.

"Michael shared his vision for a continuing medical education programme for established GPs, with me and the members of the Postgraduate Medical and Dental Board, of which he was a member", says Prof Shannon. "The clarity of his plans, combined with his passion for learning and obvious leadership skills, convinced GP colleagues that if CME was to work, the best place to start would be with Michael's proposed west Cork pilot project".

After qualifying, GPs could at best expect to attend lectures here and there where hospital specialists would top the bill. People were working long hours, many of them bearing the brunt of what in some cases, could hardly even be described as rotas, with little chance of actually rotating with anyone. It was difficult to fit in much of anything, never mind education. Professional isolation was more the rule than the exception. Michael often tells the story of the man who hadn't spoken to a colleague in 15 years!

Michael was a rural GP based in Skibbereen in a busy

group practice but well away from the thick of things. He persuaded colleagues in west Cork to come together for 'small group' evenings where they would share experiences and talk about the perplexing issues that faced them on a day-to-day basis – in other words, GPs educating GPs. People overcame the professional isolation and the fact that many of them were in competition for patients. Michael recognised that GPs were more interested in teasing out what to put in the 'doctor's bag' than the latest developments in heart surgery.

The rest is history and Michael was appointed national director of CME by the college, supported by the Postgraduate Medical and Dental Board in 1986. He remained there until his appointment as director of the new ICGP Postgraduate Resource Centre in 1997. He oversaw the completion of the national CME network and the last piece of that particular jigsaw fell into place in 1993. Over the years, the 'tutors' workshops were one of the highlights in the busy life of a tutor. This was an innovative approach to bringing tutors together and a way of collectively developing educational material in a format that could be used at small group meetings.

Through the 80s and 90s, Michael seemed to be at every medico-political meeting. He always had a contribution to make and frequently injected some lateral thinking into the debate. People were quite in awe of him. He was by no means the 'hail fellow well met' political type but rather took an intellectual approach to problem-solving. He believes in clear vision. If you don't know what you want it's very difficult to get there. He has always been a strong advocate of evidence and data and demonstrating educational outcomes.

Over the years he has had an input into many landmark documents. In 1984 he drafted the constitution of the fledgling ICGP and became its first chairman for the key period from 1984 to 1987.

"Before Michael went public with his plans for an Irish college, I was very apprehensive and initially told him of my fears that it would not work. Since only about 300 of Ireland's 2,000 GPs were members of the RCGP, I felt it was most unlikely there would be enough support for an Irish college. How wrong I was!", Bill Shannon recalls.

Subsequently, he led the college publication 'The future



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organisation of general practice in Ireland', sometimes better known as the "Blue Book". This was a landmark publication providing a vision for general practice by general practitioners.

He also co-authored 'A vision for general practice 2000-2006' published by the ICGP/IMO in 2001. He has served on the Health Research Board, the Republic of Ireland Faculty of the ICGP, the Council of the RCGP in London, Equip, Euract, the Women's Health Council, and the GP IT Task

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Group. He was chairman of the Office for Tobacco Control when the smoking ban was introduced. He was heavily involved in Wonca, including his term as president. In the early 90s he ran the Quality in Practice Programme. He was a key driver on the Medical Council in 1989 in getting general practice recognised as a specialty – and the list goes on.

Michael took up his post at the ICGP Postgraduate Resource Centre in April 1997. This meant reducing his commitment to practice in Cork and commuting between Skibbereen and Dublin on a weekly basis. This was an era when more part-time roles in education were becoming available to GPs through the college. His strong advice to others embarking on the same route was to tie down hours and stick to them or you end up working more hours than full-time. Many who have come after him will attest to this.

His moving to the college on a near full-time basis was a baptism of fire. 1998 was the year that Wonca came to Dublin – the largest medical meeting ever seen here - and Michael was chairman of the host organising committee. He had been on the Wonca executive committee since 1992 and was part of the ICGP team which made the successful bid to host Wonca '98. He was appointed Wonca president-elect

in 1999 and served as president from 2001-2004, which involved a huge level of travel. Under his presidency, Wonca's membership grew rapidly and expanded into 120 countries.

The ICGP moved into new purpose-built premises in Lincoln Place in 1998 (and everyone breathed a sigh of relief). This enabled the new PRC to develop a hub for college skills fellows and other key people who would develop GP education in many different ways. The underlying idea was that a wide range of innovative delivery methods would be developed to bring education to the greatest number of GPs possible.

The work carried out at the centre mushroomed from dedicated skills fellows, to various programmes, courses, e-learning, disease surveillance, IT, projects of all shapes and sizes, and recently, the summer school. A scan through the college website gives the best overview of the breadth of what has been achieved. Under Michael's vision and with the input of a huge cohort of talented GPs and committed staff, GPs can now choose from a menu of education delivery second to none.

Heartwatch was one of the college's greatest successes. It was a massive programme to roll out and its excellent results are well documented. While it is still running on a limited basis, the failure of the government to implement it nationally has been a bitter disappointment for Michael and his ICGP colleagues. In fact he has described this in an interview this year as one of the low points in his career.

Upon his appointment, Michael Boland commented that the PRC would need to build its own track record for quality output. "We will need to develop a measure of sophistication," he said. He stuck to his word.

"Michael's contribution to general practice and the ICGP has been enormous and his intellect will be greatly missed", said ICGP chief executive, Fionán Ó Cuinneagáin. "We wish Michael, Susan and the family well in their future endeavours.

– Geraldine Meagan

