

# Highland Doctor

HIGHLAND DOCTOR  
A FILM OF THE HIGHLANDS & ISLANDS MEDICAL SERVICE

STORY & DIRECTION

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PHOTOGRAPHY

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DIALOGUE

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A MINISTRY OF INFORMATION FILM FOR THE DEPARTMENT OF HEALTH FOR  
SCOTLAND

MADE BY PAUL ROTH  
PRODUCTIONS 1943

DR H. MACWILLIAM

“Would you like to leave your coat?

– Yes, it’s warm here.

– This is a pleasant surprise. I wasn’t expecting you till tomorrow.

– Well, I got your message, Dr MacWilliam, before I started back from Inverness.

– Oh, yes.

– Well, what’s the case?

– She’s a crofter’s wife about 7 miles from here. This is the history.

– And?

– My first diagnosis was an ovarian cyst. But I didn’t like the look of it. And my next thought was that the sooner I called in a specialist, the better.

– A strangulation set in?

– That’s just what I’m afraid of. Well, we better be going on our way.

– I’m ready.

– I have the car rounded at the back.”

“Good afternoon, Nurse. I brought Dr. Wright with me.

– How do you do?

– Good afternoon, Doctor.

– And how’s the patient?

– Oh, she’s had a restless night but she’s a bit easier today. She’s been fretting herself about Dr. Wright here coming all that way from Inverness.”

-Oh, that’s alright now, Mrs. MacDonald, it was I who asked Dr. Wright to come over. Don’t you be worrying about that. I want him to examine you.

-Well, Mrs. MacDonald.

You were right, she's pretty far advanced. But if we can get her to the hospital at once, we got a pretty good chance.

- Well, Stornoway is about 5 hours away by boat and road.
- That would mean starting off the long road we came.
- It would. What about the air ambulance? We can send her down to Glasgow.
- Fine, if it could be done.
- Oh, yes, it could be done. It's been to the Highland before.
- That's the thing. What about her husband?
- Yes, if we are taking her to Glasgow, we must consult him. Nurse, where is MacDonald?
- He isn't back yet from the fishing. He thought it'd be tomorrow you would come, but he shouldn't be long now.
- Let's make the arrangements anyway.
- I can tell MacDonald when he comes in.
- That's good, and I'll have a word with him later. We'd better be going down to the post office. We've got to wire Glasgow for the air ambulance and we need to advise the hospital as well. Will you get your backpack, Nurse, and be ready to go?
- When will you be back, Doctor?
- It'll take about 2 hours for the plane to get here by the time we've sent off the wire. We should be back with the stretcher in about two and a half hours.
- About half past five.
- Very good, then."

TELEGRAPH OFFICE  
SCOTTISH AIRWAYS. GLASGOW.

"Cigarette?"

- Thanks, I have a pipe. Well, since the aeroplane is coming, I might as well go back in it. That'd be alright, wouldn't it?
- Certainly. It's the quickest way to Inverness.
- Yes. Thanks.
- You haven't been long in the North?
- Three years. I was in the London Hospital when this vacancy turned up. You know I'm an Edinburgh man, but even so, the Highlands and Islands' medical scheme wasn't much more than a name to me.
- Well, now that you've seen it working, what do you think of it?
- Seems to me there's a great future for subsidised medical services like this one. Take today. Mrs. MacDonald gets your services, a specialist and an air ambulance to take her 200 miles to hospital. In fact, she's just as well off as a patient in town who has everything on her doorstep.
- It was a different story when I came here, first. Aye. Aye. Over 30 years ago. I used to look at that map and wonder if a way would ever be found to attract enough doctors to the Highlands and Islands, to make it possible for the people there to get medical attention as easily and cheaply as the people in the South.

*Aye! It's a problem. A fifth of the land area of Scotland with so few people living in it, and those scattered like threepenny bits in a Christmas pudding. And with just a handful of doctors with their patients maybe miles away in isolated crofts and townships. It's often 30 miles to see one patient, a day's journey there and back. And they're poor too: farmers and fisher folks You can't charge them what it costs you, they just haven't the money. But there is someone got to look after the folks of the Islands and out here in the Highlands even if it does mean a bit of a struggle.*

*Aye, it's a problem.*

*The Dewar Committee. I wonder now what a committee can do.*

DEAR SIR,

HIGHLANDS AND ISLANDS MEDICAL SERVICE COMMITTEE

I HAVE TO INFORM YOU THAT A COMMITTEE, HEADED BY SIR JOHN A. DEWAR, BART., M.P., HAS BEEN SET UP BY HIS MAJESTY'S GOVERNMENT IN THE PURPOSE OF INVESTIGATING THE PROBLEMS OF THE MEDICAL SERVICE IN THE HIGHLANDS AND ISLANDS OF SCOTLAND.

*Investigating the problems of the medical service in the Highlands and Islands. Well, let them come and good luck to them. We'll tell them the problems alright. I only hope they can find the remedies.*

SESSION OF THE DEWAR COMMITTEE

HIGHLANDS & ISLANDS MEDICAL SERVICES

23<sup>rd</sup> DAY

“And what have you to tell us, Dr. MacWilliam?”

– I expect you'll hear what I'm going to tell you from many of my colleagues. My greatest problem is the time and money it takes to reach the half of my patients. For most visits, I use a trap. It's a slow way of travelling over our roads, but it's better than walking where there are no roads. Then, I have patients across the Loch. To get to them, I have to take a boat. You see the trouble? Journeys like these take so much time and cost us so much in hire of boats and traps that we have to charge a pretty stiff fee even just to cover our expenses. And my practice is no exception. There is one doctor out from here who is forced to cross on some visits. If the tide's low enough, he takes a trap, if it's full he goes by boat. But, if it's half in between, well, he just has to sit and wait. Because none of us can afford motorcars. Even if we had them, road conditions are so bad, we couldn't use them half the time. It's the same for the district nurses too. Most of them travel by bicycle or walk. There are so few of them, and they just can't get 'round their districts. And if we have trouble in reaching our patients, you can imagine the trouble they have in getting in touch with us. Post offices with telephones are few and far between. And in some places, signals are the only means of communication between the doctor on the main land and his patients on the island.

– Have you any other difficulties?

– In the larger towns we have a few hospitals, but most of the communities are so isolated that it's often impossible to send a patient into hospital over the bad roads. It usually means that we just have to operate the best way we can. There was one appendix I did in a hut. I had the school master to get chloroform and all we had for light was a tallow candle held by the man's neighbour. If there's to be a future for these people, we must have a proper medical service.”

“Yes, we certainly gave them something to think about.

– So you are really one of the reasons why we have the Highlands and Islands medical scheme today?

– Oh, well, I wouldn't be saying that. Anyway, the result of the Dewar Committee's report was a grant from the Government. They made an annual grant.

Yes, here we are. *For the purpose of improving medical services including nursing in the Highlands and Islands of Scotland, and otherwise providing and improving means for the prevention, treatment and alleviation of illness and suffering there in.*

– Well, that seems to cover almost everything. That's the end of the story?

– In a way, it's only the beginning, and the story that starts there makes more pleasant telling. I might be boring you.

– By no means, it's interesting to hear it first hand.

– Well, when the grant had been definitely approved, the first job was to attract new doctors to the area. One of the first uses of the grant was to bring each doctor's income up to a level he could live on.

In other words, he didn't have to depend on the people being able to pay him, and the people in turn only had to pay a small fee when they needed a doctor, instead of enough to cover his expenses. So the doctor was consulted more frequently. People's health improved and both doctors and patients benefited. We were able to afford cars under the new arrangement. And as the roads were improved, we could get round to our patients more easily. Now, we could visit three patients in the time it used to take to see one. Then, the nursing associations got money from the grant to appoint more nurses, and well-qualified ones at that. After a while, many of them were provided with cars too. We began to have better telephone and telegraph services. New houses were built for us, and for the nurses. The better roads made it possible to use ambulances more widely. And our key hospitals were enlarged to receive the patients we were now able to send them. They were equipped with up-to-date apparatus for all modern treatments, and resident specialists were appointed. Then, at the beginning of the war, the emergency medical service hospitals were organised to receive possible casualties. They meant extra accommodation, and they used some of their empty beds to take our patients off the waiting list. And that brings us right up to date.

– Why, man, you've jumped a couple of centuries in a few years.

– From (...) cart to air ambulance.

– It could never have happened if it hadn't been backed by the State.

– Aye. If anyone had told me 30 years ago that I would be telegraphing for specialists and for aeroplanes, well, I would have warned them to keep away from the bottle. Though mind you, we're not out of the woods, yet. There are still lots of things to be done.

– Well, you seem to be the kind of man to do them.

– Ah, it's really a young man's job out here. I would have retired before this if it hadn't been for the war.

– I wonder.

– Oh well, it's time we'd be going anyway. I'll get the stretcher."

"All ready, Nurse?

– Yes, Doctor.

– Has MacDonald come in?

– Yes, he's here now.

– And he agrees, doesn't he?

– Aye. Whatever that you think best, Doctors.

– Oh, hello, MacDonald. This is Dr. Wright.

– How do you do?

– I'm glad you came, Doctor. Will she be alright?

– Of course she will. She will be back with you in three weeks.

– And, when will I know for sure?

– Well, Nurse will telephone Dr. MacWilliam from Glasgow.

– Thank you, Doctor."

"A bheith cúam sinn bithar, staghmha bí céas, d'Adhar.

– C'leibhthe."

"Well, all ready now, Mrs. MacDonald? Who's helping with the stretcher, Nurse?

– I've got Ian Campbell waiting outside."

## SCOTTISH AIRWAYS

PLAYED BY

ALEX MACKENZIE – THE DOCTOR

HUGH MILLER – THE SPECIALIST

ANGUS MACDONALD – THE CROFTER  
JOAN MACKIE – THE PATIENT  
EVELYN CLARK – THE NURSE

THE END  
A PAUL ROTH A PRODUCTION

Transcript: Thibault Riegert & Aisling Shalvey