Ian Alisdair Robertson
1940–2017

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ian Robertson aged 76 years died at his home in Villiers St, Arrowtown after a long illness. He leaves his wife of 55 years, Patricia (nee Thomson), four sons, Broughton, David, Michael and Timothy, and a daughter, Melanie. His grandchildren and many close friends mourn his passing.

Ian was born in Mali in Africa, the eldest son of Scottish parents. He was schooled in Canada and received his secondary education at Nelson College. He was educated at the Otago Medical School and graduated in 1964, later obtaining a Diploma of Obstetrics, which he made good use of as one of New Zealand’s last GP obstetricians.

Most of his practising life was spent in Shirley, a suburb of Christchurch. He worked as part of a four doctor practice, the Shirley Medical Centre, and his wife Tricia often worked with the staff as a registered nurse.

He built a large urban practice comprised of obstetrics and paediatrics; he was both respected and revered by his patients who came from all walks of life. In addition to his years of service to his patients and community, Ian made a really significant change to New Zealand medical life, and I am indebted to our colleague Dr Phil Airey for the following contribution.

Tribute to Ian Robertson

Ian had a seminal role in the development of the general practice environment, which exists in Christchurch and the surrounding area today.

General practice in the early 1980s was very different from today. Advertising was unethical beyond a small entry in public notices, medical records were commonly handwritten on 8x4 inch cards, electronic pagers had yet to be superseded by cell phones, computers if used were largely used for administration—the internet did not exist. The Cartwright enquiry, patients’ rights and the rise of entrepreneurs had disrupted the profession’s complacency. However, bureaucracy was pleasantly minimal.
After-hours arrangements were haphazard. In Christchurch, it was better than in many places. Groups of 10 or so GPs would arrange a roster, patients would phone their usual practice and be directed by a phone answering machine or answering service to the doctor on call, who provided the service and collected the fee. The usual GP might or might not be notified of the clinical findings.

Ian, who at that time handled Practice & Premises for the Canterbury faculty of Royal New Zealand College of General Practitioners, had knowledge of a superior format used in Edinburgh. He discussed the situation with an accountant, Euan Hilson, when on holiday and also with Neville Bullock (a pharmacist who thought the urgent pharmacy could relocate to the proposed building) and set about obtaining at his own expense several adjacent properties and proceeded to gather the support of GPs, which he did with his special blend of charm, whimsy and diplomacy. He made no secret of his indebtedness to “Yes Minister” and “Doctor Dolittle” for his philosophy.

Once a “critical mass” of support had been obtained, a “guild” was established (Ian thought it sounded superior to company) and directors appointed. The pharmacists undertook to pay for and use half of the building.

GPs were invited to invest in the project to acquire more property and shares issued. The certificates appropriately featured a Doctor Dolittle decoration of the “Pushmi-Pullyu”, a gazelle-like creature with a head at each end of its body.

Early directors’ meetings were all attended by an accountant and a lawyer who ensured sound governance, and the after-hours surgery commenced operation in a house on one of the properties. An architect, David Childs, designed the new building and it was occupied in 1988.

So the scene was set for cohesiveness in the Christchurch GP community—a GP-led operation on a sound commercial footing. The Pegasus Medical Group followed this format with several of the early after-hours directors involved in its formation. This has now morphed into Pegasus Health, which is less GP-led.

Ian would have felt that in “Yes Minister” fashion, the GPs have lost this round to the bureaucrats.

In conclusion, Ian dedicated much time and energy to his patients and medicine, but his greatest love was always his wife and family.

His immense energy, collegiality and integrity serve as a reminder to us that there are many pathways we can follow.

Ian was a lovely man.