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Government of Madras.

*Public*

DEPARTMENT.

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Not to be folded or roughly handled

No. 68.

FROM

THE OFFICIATING PRESIDENT  
OF THE SANITARY COMMISSION FOR BENGAL,

To

THE SECRETARY TO THE GOVERNMENT OF INDIA,  
PUBLIC WORKS DEPARTMENT.

DATED CALCUTTA, 6th February 1865.

SIR,

In your letter No. <sup>874</sup>/<sub>449</sub>c, dated 26th September 1864, forwarding for an expression of the opinion of the Commission thereon, the proposed plan for a Medical College Hospital at Lahore, the Commission is expressly invited to state its views on the proper mode of administration that should in future be adopted in all Native hospitals. The question is one of the greatest importance, and it has therefore been deemed advisable to treat it apart from that relating to the details of the construction of hospitals on sanitary principles.

2. In paragraph 3 of Proceeding No. 179, dated 8th August 1864, the Commission remarked "that the question of the proper construction and management of Native hospitals, and especially of hospitals for Native soldiers, is one of considerable difficulty." The Commission then proceeded to refer to the remarks made upon this subject by the Commissioners appointed to enquire into the sanitary state of the Army in India. The remarks, quoted in the paragraph of the Proceedings above referred to, relate to defects in the construction of Native hospitals rather than in their management. The following remarks taken from the same report apply more to defective administration: "Ablution is generally performed in the open air in the verandah, or the patients are allowed to go home to wash. \* \* \* The Medical Officer has no control over diet or cooking, and hence patients often make themselves ill by errors in quantity or quality. \* \* \* The attendance on the sick is insufficient. In one hospital of 30 beds the only attendant is the Assistant Apothecary; but in this, as in other similar cases, native orderlies may be obtained from the regiment." Miss Nightingale in her Notes on Hospitals states that "the patients cook their own diets, eating and drinking what they please, or when too ill to cook for themselves an orderly friend is detailed for the purpose. There are no conveniences: sometimes the sick go home to wash or bathe themselves in a tank."

3. The administrative defects noticed in the preceding remarks are: 1st, that the sick are allowed to leave the hospital enclosure, and go to their lines to bathe, or for other purposes; 2nd, that the Medical Officer has no control over diet or cooking; 3rd, that the patients are permitted to cook their own diets, or

when too ill to cook for themselves that an orderly friend is detailed for the purpose; and 4th, that the attendance on the sick is insufficient.

4. There can be no doubt that the defects above noticed do at present exist in practice; but it can by no means be admitted that improvement is impossible. In the first place, as regards the sick being allowed to leave the hospital enclosure, the Bengal Medical Regulations provide that "the sick in hospital, either European or Native, are not to be permitted to leave the hospital without special leave of the Surgeon or Medical Staff in charge."\*

\* Chap. IX, para. 18. That Native patients are now so permitted to leave without special permission may be attributed partly to the hitherto defective construction of hospitals, and partly to what the English Commissioners term "an indifferent deference to supposed caste prejudices." In proof of the above assertion the following extracts from the replies of Medical Officers to the Commission's letter asking for their opinion on the requirements of Native hospitals, with respect to their construction and administration, may be quoted. "The usual construction and administration of hospitals for Native troops," writes Dr. Guise, Deputy Inspector General, Cawnpore Circle, "are very much as described in the Report of the Commissioners appointed to enquire into the sanitary state of the Army in India. But with the prejudices of the Natives as to diet and even ablution in time of sickness, it is difficult to see what improvement in the administration of hospitals can be suggested. At present it is more than probable that four-fifths of the sick in hospital prepare their food in their lines, except in the few cases in which the hospital is so distant as to preclude this being done." "The great defect in the discipline of a Native hospital," states Staff Surgeon Major Beatson, "arises from the fact that nine-tenths of the patients go to their lines to cook and are present in hospital only at the visit hours." "The existing cook-rooms are little used; most of the patients cook their food in their lines" says Dr. Rae.

5. Any excuse that may hitherto have existed for the non-enforcement of the Regulation quoted on the score of absence of proper means for ablution and cooking within the hospital enclosure will be remedied, should the Government see fit to approve of the recommendations made by this Commission on Lieutenant Colonel Crommelin's proposals for standard plans of Native hospitals. That a strict enforcement of the rule is advisable is shown from the following remarks made by Staff Surgeon Major Beatson. "Nevertheless to compel every man who is not fit for duty to be in the hospital is a wholesome principle, one which tends greatly to prevent disappointment when a regiment is ordered suddenly into the field, and one which moreover does directly influence the figure of health in the ranks generally. More especially is it advisable to treat in hospital cases of severe surgical accidents and operations, while it is absolutely necessary that men suffering from infectious disorders, requiring careful segregation, should not be allowed to remain in the lines as heretofore." The opinion of Dr. Anderson, Deputy Inspector General of Hospitals, Presidency Circle, will be quoted presently.

6. The second defect noticed is that the Medical Officer has no control over diet and cooking. This is more or less inevitable so long as the third defect is allowed to exist, viz., so long as the patients are permitted to cook their

own diet either within or outside of the hospital enclosure, or to have their diet cooked by an orderly or other friends, or in fact by any one but a regular hospital cook.

7. It is necessary to employ the greatest caution in approaching this question, because it trenches not only on the prejudices supposed or real of the Natives concerned; but also on the deference hitherto paid to those prejudices, as noticed by the English Commissioners.

8. The Bengal Medical Regulations direct that "the diet of Native Sick in Hospital will be provided from their own resources, except in particular cases, when Medical comforts, such as sago, arrow-root, wine or spirits may be deemed

necessary by the Medical Officer, who will procure these supplies from the Commissariat Department." Chapter XXV. para. 2.

It is thus clear that the Medical Officer has no control over the diet of the patient except in particular cases. That he should have such a control, cannot admit of doubt, if the recovery of the sick be the real object aimed at. It may be true, as remarked by Dr. Turnbull, one of the Medical Officers consulted by the Commission, that "in the large majority of the illnesses of natives, their ordinary food is upon the whole well adapted for the purpose, with the addition of the few so called medical comforts consisting of sago, arrow-root, wine and brandy," but in the absence of any fixed scale of diet, and of any authority to enforce an adherence to such scale, as much injury may be done to the patients by the quantity of food eaten, as by its quality.

9. Dr. Turnbull is of opinion, that the "principal element in the cure, viz. food and drink cannot be interfered with." Dr. Murray, Officiating Inspector General of Hospitals, North Western Provinces, states that "the construction of cooking places, and the administration were certainly framed or modified by the habits of the natives; but this is essential, while caste exists, and no surgeon knowing the importance the natives attach to diet, would forget to tell him the proper kind of food to take, and he would not recommend beef tea to a weak brahmin." Doubtless he would not; but could he be certain that the patient took the proper kind of food or confined himself to the quantity prescribed? Dr. Buckle, Officiating Principal Medical Storekeeper to Government, writes as follows:—

"The opinion of Native Hospitals arrived at by the Commissioners appointed to enquire into the sanitary state of the Army in India\* may be condensed into one sentence, that "the hospital construction and administration appear to have been framed on the habits of

Natives rather than on what is necessary for the recovery of the sick," and that the real question is, to what extent it is prudent to press the adoption of any general system of administration "or of the conveniences of hospitals in Europe," if any way interfering with or opposed to these.

"Those who have mixed much with native troops would consider the practice in use to involve a wise precaution, and that while the construction of hospital buildings, &c. should be in accordance with true sanitary principles, the administration should be adapted to the habits of the men; the primary object being to maintain native regiments, healthy, contented, and

\* Report pp. 155, 156, 8vo.. Edition quoted in Resolution III of Minute No. 179 of the Sanitary Commission for Bengal.

efficient, with a feeling of good will and confidence between the men and their officers; and that while attending to the physical health of the men, no mode of treatment or arrangements that could possibly be construed into a grievance should be practised, it being never lost sight of, that the object of Government is faithful and efficient native troops, and that it is incumbent in framing medical arrangements to pay every attention to the habits and prejudices of the natives. \* \* \* \* \*

"All these minor details might be carried out, but it requires, I think, grave consideration before introducing changes in the system of the administration of native hospitals (however great an improvement) that might be construed by native soldiers as opposed to their habits and prejudices; nor is it necessary as personal influence will usually effect that which, if attempted to be forced, might be met by sullen discontent or worse.

"Native hospitals are supplied with medicines, instruments, hospital necessities as wine, brandy, sago, arrow-root, &c., &c.; these are all the essentials for the treatment of disease; the result rests with the Medical Officer; as in every other position he can either do his duty or neglect it; but there is a wide field for alleviating suffering, and the means and appliances for varied hospital practice are supplied.

"In the views now advocated the result aimed at has the efficiency of native troops as the one object sought for; and it is doubtful whether any alteration in the system of administration, especially if opposed to the habits of the natives, is desirable or necessary, or that it would in any way tend to facilitate the recovery from sickness. The actual treatment of native sick is the same as used in European hospitals and private practice; exceptions have to be made for prejudices, for instance, no consideration would induce a Sikh to let his head be shaved, and the attempt in this case, as in others that could be mentioned, would grossly violate the religious feelings of the men; there is also a strong feeling against post mortem examinations; but if these things are so, is it not better to leave well alone than in attempting improvement to run the risk of doing harm?"

10. The above letter has been quoted at length with a view to show the extent to which Officers are influenced by their deference to the so-called prejudices of the natives. That "no mode of treatment or arrangement that could possibly be construed into a grievance should be practised" may be admitted as an undoubted axiom, the slightest infringement of which this Commission would be the last to propose; but it remains to be proved that the necessary arrangements cannot be introduced without infringing any prejudice, or creating a grievance. Miss Nightingale in her Notes on Hospitals, states: "It is supposed that caste prejudices are such as to prevent native hospitals being properly built and supplied with requisites for sick. But this has to be proved by giving Natives a properly constructed and provided hospital. There are plenty of caste prejudices in this country (England) against good hospital construction; but good hospital construction advances nevertheless."

11. That the introduction of improved administration into native hospitals, is possible is shown by the results of Dr. Anderson's, Deputy Inspector General Presidency Circle, experiments in the Police and Chowkeydaree Hospitals of Calcutta. That Officer informed the Commission that "in re-organizing the

Police and Chowkeydaree Hospitals of Calcutta, he had no difficulty in restricting patients to the hospital compounds, and to a diet scale prepared for their use." The Commission requested Dr. Anderson to favor it with a report explaining the measures he had adopted in enforcing his scheme.

12. From Dr. Anderson's reply we gather that "both hospitals are surrounded by walls, and that the sick are unable to leave the compound of either, save by the gates, where durwans are stationed to prevent the exit of all who are unfurnished with a pass. The sick are well aware that when admitted into hospital, they are not to leave it without the permission of the Medical Officer, and, it must be evident that this arrangement is absolutely necessary in every native hospital, otherwise it would be quite impossible for the Surgeon in charge to prevent the use of unsuitable medicaments, and of improper articles of diet.

"The dieting of the patients is effected, in a manner similar to that employed in European hospitals, agreeably to the diet scales, of which copies are forwarded herewith. The Medical Officer, orders the diet suited for each patient, entering it on the bed-head ticket. The totals of each class of diet, are sent daily to the Contractor, and when supplied, are prepared by the hindoo and mussulman cooks, with due regard to caste, and then served out to each patient. Such patients, as are able to do so, are allowed to cook for themselves, but only the food which has been ordered by the Medical Officer, and supplied by the contractor. Of course, the unfortunate poverty-stricken patients of the Police-hospital, are dieted at the expense of Government, but the chowkedars are subjected to hospital-stoppages, which are deducted from their pay.

"The system works well, gives the Medical Officer that proper control over his patients without which, it is, in my opinion, utterly impossible, either to judge of the effects of treatment, or to be answerable for it, and does not seem to have any influence in deterring the sick from resorting to hospital."

13. It will be observed that the measures adopted, are—1st., the prevention of the patients leaving the hospitals without permission, and 2nd., the enforcement of a dietary scale. Dr. Anderson permits such patients as are able to do so, to cook for themselves, but this appears unnecessary. If hindoo and mussulman cooks are provided, and no prejudice exists to the patients eating the food cooked by these, when they are unable to cook for themselves, there can be no reason why the patients should not submit to eat the food cooked for them during the whole of their stay in hospital. The Medical Regulations provide that the servants (hindoo and mussulman) to be employed in the kitchens of native regimental hospitals, shall be such persons only as the Native Officers and men shall themselves approve of.\* If this

\* Chapter IX., para. 17. condition were extended to the cooks, there could be no reasonable objection on the part of any patient to partake of the food prepared by one of the approved cooks. Surgeon Major Keates states that when a regiment is broken up into detachments he has "always found that the sick suffer; for, if they are too ill to cook their own food, and even allowed an attendant, they do not get their food, sago or arrow-root cooked, for want perhaps of the cook of that caste. \* \* \* Cooks are essentially necessary to the recovery of those who are very sick."

14. The fourth administrative defect noticed in para. 3, of this letter is the insufficiency of attendance upon the sick. In Chapter XXVI, paras. 2 *et seq.* of the Bengal Regulations will be found the hospital establishment fixed for a regiment of cavalry or infantry of the line, &c. These are marginally quoted. The following opinions on this point have been sent to the Commission. Surgeon Major Keates says, there is little attendance in a Native hospital and attributes the want to the insufficiency of the establishment. He writes thus "the conditions most favorable to the recovery of the sick, especially natives, consist in having a good hospital, and increased attendance, where portions of the hospital-establishment are detached." Dr. Turnbull states that "the difficult cases to deal with and cure are those of men reduced to a low state of weakness from a long or serious illness; in such cases it is that a Medical Officer feels the want, not only of a more nutritious diet than farinaceous food and water, but also of proper attendance and nursing, so as to insure the patients getting some food every 3 or 4 hours, night and day, and large numbers of natives die from this want and not from the disease they may have been suffering from, but considering what the native mind and religion is, and their habits and prejudices, I can see little or no prospect of any improvement for this state of things, at least in our day."

| Description of Servants.                                                                                  |                                                                                                                                                                                 | Salaries per mensem. |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| One Shop Coolie ...                                                                                       | One Musselman ...                                                                                                                                                               | 5 Rs.                |
| Two Bheesties ...                                                                                         | One Hindoo ...                                                                                                                                                                  | 4 Rs. each.          |
| One Goorgah, or a proper person for cleaning the pots and preparing the cooking places of the Hindoo sick |                                                                                                                                                                                 | 4 Rs.                |
| One Brahmin Cook ...                                                                                      | To prepare Medical prescriptions that require boiling, and prepare the cooking places, and dress the victuals of the sick in Hospital who may be unable to do it for themselves | 4 Rs. each.          |
| One Mussulman Cook ...                                                                                    |                                                                                                                                                                                 | 4 Rs. each.          |
| One Head Sweeper and Leechman*                                                                            |                                                                                                                                                                                 | 6 Rs. each.          |
| One Sweeper ...                                                                                           |                                                                                                                                                                                 | 4 Rs.                |

\* The Head Sweeper, besides his pay of 6 Rs., two of which are for providing leeches, will be paid by the Commissariat Department for the leeches he supplies under the orders of the Medical Officer, either at a rate contracted for or at the Bazar rate of the Station.

PARA. 3.—For a Detachment of Lascars and Ordnance Drivers, consisting of G. O. G. No. 251, from 100 to 200 men when on detached duty or under peculiar circumstances of great sickness at a Station where no European Artillery Hospital is available, an Establishment will be available of 1 Bheestie, 1 Cook and 1 Sweeper.

PARA. 4.—For a Company of Sappers and Miners, when detached at a distance from other Companies, or from the Head Quarters of a Corps, or for two or three Companies when composing 1 Detachment, 1 Native Doctor, 1 Bheestie, 1 Cook and 1 Sweeper.

PARA. 5.—For a Troop of Native Horse Artillery when detached from Brigade Head Quarters, or for a Company of Native Foot Artillery attached to a Battery drawn by Horses, 1 Native Doctor, 1 Shop Coolie or Dresser, 1 Bheestie, 1 Cook and 1 Sweeper.

PARA. 6.—For a Corps of Irregular Cavalry, two Native Doctors and one Shop Coolie.

to the insufficiency of the establishment. He writes thus "the conditions most favorable to the recovery of the sick, especially natives, consist in having a good hospital, and increased attendance, where portions of the hospital-establishment are detached." Dr. Turnbull states that "the difficult cases to deal with and cure are those of men reduced to a low state of weakness from a long or serious illness; in such cases it is that a Medical Officer feels the want, not only of a more nutritious diet than farinaceous food and water, but also of proper attendance and nursing, so as to insure the patients getting some food every 3 or 4 hours, night and day, and large numbers of natives die from this want and not from the disease they may have been suffering from, but considering what the native mind and religion is, and their habits and prejudices, I can see little or no prospect of any improvement for this state of things, at least in our day."

15. The Commission is inclined to take a more hopeful view of the subject than Dr. Turnbull. It observes that in private life a native, when suffering from sickness, obtains the services of an attendant, whenever he can afford to pay for him. It would point especially to the case of natives travelling to a distant place, the servants attend on them, doing all that is required, without any mention being made of prejudice or caste. At the present time natives of all ranks, castes, and creeds, are proceeding to Europe in considerable numbers. No objection to the journey is now advanced on the score of caste prejudice. Caste is undoubtedly lost, but it is regained on return by the payment of a very trifling sum; hence its temporary loss opposes no obstacle to free action. If the

natives then voluntarily do an act which involves a loss of caste, they can have but slight scruples to offer against submitting to a regimen which carefully protects their caste from injury, and is enforced solely for their own good.

16. The Commission recommends the adoption of the following administrative reforms in the management of native hospitals:—

1st.—That no patient be allowed to leave the hospital enclosure without special leave until declared convalescent.

2nd.—That a dietary scale be enforced, and that no patient be allowed to cook his own food, or to have it cooked by any one but a hospital cook, except under special circumstances, and

3rd.—That trained attendants be entertained to wait on the sick.

17. It will be unnecessary to introduce any new regulation with a view to the first reform. A strict enforcement of the existing regulation, which has been already quoted, will suffice. The stationing of a guard at the entrance to the hospital enclosure, as proposed in our letter on the construction of native hospitals, will afford a ready means of preventing the patients leaving the enclosure, except by stealth. We cannot, however, advocate the construction of walls round the hospital as auxiliaries to their proper administration. We think the railings proposed will answer every purpose, and that discipline must be enforced without recourse to measures which are objectionable on sanitary grounds.

18. We anticipate but slight difficulty in the introduction of a dietary scale, but we fear that some may be experienced in enforcing the rule that no food shall be cooked within the hospital enclosure except by the hospital cooks. With a view to make the introduction of this rule as little objectionable as possible, we would recommend that none but brahmins be employed as cooks for the hindoo, and mussulmen for the mahomedans. We think that the cooks employed in native regimental hospital should be persons approved of by the Native Officers and men, and, with these restrictions, added to a power to be vested in the Medical Officer of permitting under special circumstances the prescribed food to be cooked by a friend, we think that the rule might be introduced without fear of creating any alarm, much less giving cause for a supposed grievance.

19. Should the Government approve this recommendation, we would suggest that one hindoo and one mussulman cook should be specially told off for the preparation of the so-called medical comforts. It has been recommended in our letter on the construction of native hospitals that these articles should always be prepared in the hospital sculleries, and we think that cooks should be detached for this work, and that they should be specially trained in the proper mode of preparing sago, arrow-root, &c.

20. In regard to the number of cooks that would be required, we observe, that the plan for a regimental native hospital prepared by Lieutenant Colonel Crommelin provides for 50 sick. One-fourth of the total number of patients are, on an average, convalescents. We have recommended that these should be allowed to live in their lines, and consequently the actual number of patients whose food would have to be cooked in the hospital enclosure would be about 38.



To

The Principal Inspector General, Medical Department.

SIR,

1. With reference to your Memorandum dated 31st January 1865, No. 395, referring the subject of Hospital expenditure in the Civil Institutions of the Presidency for our report, we have the honor to state that having completed our inquiry into the expenditure on account of European and East Indian patients in the General Hospital, and this being the most important Institution, we deem it advisable to acquaint you with the results, without waiting to investigate the working of the other Institutions, which will be reported on in due course.

Comparative expenditure in the Civil and Military Hospital. 2. We beg to forward a Tabular Statement (Appendix A.) exhibiting the comparative expenditure in the Hospital of Her Majesty's 76th Regiment, and that for Europeans and East Indians in the Civil General Hospital. From this it will be observed that the expenditure in the Civil General Hospital exceeds that of the Military under every minor head, and that the total monthly charge for a patient is, in the Regimental Hospital, Rupees 21-2-9, and in the Civil General Hospital Rupees 40-3-10, showing an excess in the latter of Rupees 19-1-1.

Excessive expenditure in the Civil Hospital. 3. The excessive expenditure in the Civil Hospital is chiefly owing to the average cost of each diet being Annas 11 and Pice 7-65, whereas in the Military Hospital it has been only Annas 6 and Pice 7-86. The diet scale in use in Military Hospitals is that ordered in G. O. G. of 1st May 1863, No. 149. In the Civil Hospital the old scale of 1858 has been followed, and extra diets appear to have been prescribed without any limit. In the Military Hospital supplies have been furnished by the Commissariat Department, and in the Civil by a Contractor direct. On comparing the rates of Commissariat charges with those of the Contractor for the Civil Hospital, there are found to be some slight differences: some articles are charged higher in one Schedule, and some lower, so that on the whole these discrepancies do not appear to affect the general expenditure, and cannot account for the very great difference in the cost of dieting patients treated in the same building.

Diet Scale.

4. With a view to reducing the expenditure in the Civil Hospital, we are of opinion that the diet scale in use in European Military Hospitals should be introduced, with the slight alteration of excluding the "Low Milk Diet," and adding one suited to East Indian and other patients whose mode of living differs from that of Europeans in general. The Medical Officers, of the Hospital concur in these suggestions, and we forward herewith the diet scale proposed to be introduced, in which the new diet alluded to will be found under the head "Mixed Diet." (Appendix B.) The Medical Officers mentioned, that the quantity of Tea (half an ounce to each diet) was not, they thought, sufficient to give the patients a cup in the early morning, which in general they

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FROM

THE OFFICIATING PRESIDENT  
OF THE SANITARY COMMISSION

FOR BENGAL.

TO  
THE SECRETARY

TO THE GOVERNMENT OF INDIA,  
PUBLIC WORKS DEPARTMENT.

No. 68, dated 6th February 1865.

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of 1866

Administration of Civil and Military  
Hospitals for Natives.

Military Orphan Press—No. 67 S. C.—23-3-65.—20.

Communicated

to the Principal Secretary

General Medical Staff,

whose attention is drawn

to the fact that in the

letter from the officiating

Secretary of the Sanitary

Commission for Bengal,

regarding the despatch of

patients to Civil Hospitals

to the S. P. O. 1865

of 1866

desired, as well as the usual pint of tea for breakfast and supper. We, however, are of opinion that in making tea for a large number of persons, there can be no difficulty in economising the consumption of the article, so as to afford to those who require it, an extra cup from the daily allowance. Half an ounce of tea per diem, is, we think, more than the average consumption of persons in health, and the necessity for increasing this quantity in the scale, or permitting a further issue as an extra, is not clearly shown. The Physician to the General Hospital urges, in reference to the fact of his past expenditure being so much in excess of that in the Military Hospital, that the class of cases he is called upon to treat necessitates the employment of many extras. He points out that the chief part of his patients are broken down Europeans and East Indians, or Sailors debilitated by scurvy, and that as a rule, they require more nourishing diet than the well-fed Soldier. We have clear evidence that the practice of prescribing extra articles of diet as a rule, rather than the exception, has mainly contributed to increase the comparative cost of the Civil General Hospital, and while giving due weight and consideration to Dr. Blacklock's arguments, we are of opinion that the cases which cannot be sufficiently well fed on one of the twelve diets in the proposed scale must be very rare and exceptional. To meet such exceptional cases, extras may be allowed on any of the diets; but only on condition of full explanation being given, and on the responsibility of the prescribing Officer, pending the approval of the controlling authority.

#### Hospital Establishment of servants.

5. We find that the present fixed Establishment of servants for the European and East Indian patients in the General Hospital costs Rupees 230½ monthly, exclusive of the pay of a Purveyor and Assistant Purveyor, besides which there has been an average expenditure of Rupees 67 per mensem for extra servants. The chief cause of the expenditure under this head being in excess of that for the Regimental Hospital is, that a larger proportion of the patients admitted into the General Hospital are in a helpless or bed-ridden condition. The admission of persons suffering from mania, delirium tremens, &c., necessitates the employment of a large staff of servants to watch them; while in the Regimental Hospital, orderlies being available in certain cases fewer extra servants are required. The Conservancy Establishment of the Civil General Hospital, which includes three Hospital toties and four extra servants of this class, to assist in carrying out the details of the earth sewage system, appears to us needlessly large. It amounts at present to one toty to an average of ten patients, and in addition, two carts are employed at a cost of Rupees 44 per mensem to bring earth and remove the excreta. We are of opinion that a fixed establishment of four toties (at any rate with the present average number of sick) should suffice. With this number no extra servants of that class should be required, and when servants of any description are employed in addition to the fixed Establishment, the Medical Officer should attach to his monthly Bill an explanation to show for what reason they were considered necessary, and as in the case of extras in the diet bills, this source of expense should be subject to the approval of the controlling authority. On the completion of the Hospital building, it seems probable that a single Conservancy establishment for the duties of both Military and Civil departments may be adopted with economy. As a further means of economising labor, we would recommend that a supply of "patent self-acting earth closets" such as described by Rev. H. Monk in his pamphlet on "earth sewage" be obtained from England, and fitted to the latrines in the new Hospital.

#### Hospital Bedding and Clothing.

6. We would next bring to your notice that bedding and clothing occasion a very large expenditure in the Civil General Hospital, and compared with the Military Hospital, the cost is excessive. It seems questionable whether Civil patients should not be required, as a rule, to find their own clothing, and arrange for the washing of their under clothing, as is the practice in Civil Hospitals in Great Britain. Many patients will present themselves for treatment who have no change of clothes, and for such we would propose that the present system of supplying them with all that is requisite should be continued; but Hospital gowns and caps, such

as are used for Military patients, seem quite unnecessary for Civil patients of any class. A number of the people treated in the General Hospital belong to a class who have no difficulty in providing themselves with sufficient clothing, and it appears an unnecessary expense for Government to undertake the supply of Hospital clothing for such patients. There is a considerable supply of clothing at present on hand, and if the above suggestions are approved of no fresh supplies should be required for some time, and expenditure under this head considerably reduced in future years. We would suggest that the Physician to the General Hospital should be called upon to report, six months hence, the proportion of patients who require to be provided with Hospital clothing that a fixed scale of stock may be drawn up for approval and sanction.

#### Hospital Stoppages.

7. Having expressed our views on the different heads of expenditure, we now come to consider the subject of Hospital stoppages and recoveries. We append a letter on this subject from Dr. Blacklock. (*Appendix D.*) It will be observed he points out that Military Pensioners are placed under the usual stoppages of two Annas per diem for a Private, and three for a Sergeant. Civil patients are charged according to the scale sanctioned in Proceedings of Government of 21st March 1862, No. 363. By this scale, Government servants and others with salaries of less than Rupees 25 per mensem are admitted without payment, others are charged according to the following rates:—

|                                    |                                                      |
|------------------------------------|------------------------------------------------------|
| With salaries from Rupees 25 to 50 | Rupees 0- 4-0 per <sup>diem</sup> <del>station</del> |
| „ 50 to 100                        | „ 0- 8-0                                             |
| „ 100 to 150                       | „ 0-12-0                                             |
| „ 150 to 200                       | „ 1- 0-0                                             |
| „ 200 to 300                       |                                                      |
|                                    | and upwards 2- 0-0                                   |

Military Commissioned Officers are charged Rupees 2-0-0 per diem. A third class of patients, such as Seamen, are charged only the actual cost of the diet they consume. Dr. Blacklock remarks that Military pensioners, however small their income are placed under stoppages; while Civil patients drawing less than Rupees 25 per mensem are treated free. He points out that during the year 1864, Rupees 491-8-0 were thus recovered from Pensioners, and suggests that Government be moved to sanction this stoppage being discontinued; but we are of opinion that it would be more advisable to recover from Civil patients, drawing a salary from Rupees 15 to 25 monthly, a small stoppage of, say, two annas per diem, and to exempt Military Pensioners drawing less than Rupees 15 monthly from all stoppages. By this arrangement both classes would be placed on a footing of equality, and at the same time Government would, to a slight extent, be compensated for the cost of maintaining them while sick. Dr. Blacklock further points out that Rupees two per diem, the highest rate of charge in the present scale for the class of persons whose incomes exceed two hundred Rupees per mensem, is often insufficient to cover the actual disbursements on account of such patients. He gives two instances of patients of this class treated during the past year, in one of which the Government lost Rupees 5-8-5, and in the other Rupees 22-4-8 on the actual cost of diet and extra servants alone, while in both cases the patients were in receipt of very large incomes. We are of opinion that as a general rule persons who have incomes of more than Rupees 500 per mensem are not fit objects to be admitted into a Government Hospital. We recognise, however, that in certain instances, such as cases of contagious disorders, mania, or temporary aberration of mind from excessive use of stimulants, it may be necessary to receive persons of every grade of the social scale into a public hospital. Such cases, however, are in no way objects of charity, and it would seem advisable to place some limit upon their admission, such as requiring a certificate from their ordinary medical attendant, "that the patient could not be treated without risk to himself or others in his own dwelling." As the present scale of charges is obviously insufficient to meet the cost of such patients, we recommend that all persons received into the General Hospital whose incomes exceed Rupees 300 per

mensem including Military commissioned officers drawing this amount of pay, be charged at the rate of Rupees five per diem. In the new building, wards are specially to be set apart for such persons, and as ordinary Hotel charges would amount to more than the sum named, no patient could reasonably object to such a moderate rate of payment for the advantages of careful nursing and treatment, and all the appliances of a Hospital at hand to minister to his necessities. The present system to charging seamen treated in the General Hospital with the cost of diet only, appears to us open to objection, on the ground that the Government has thus to bear many other expenses which should be defrayed by the ship-owners, and which at other ports in India is borne by them. It is clear from evidence before us that no European sailor can be fed, clothed and nursed in Hospital (leaving out of question the cost of medical attendance and physic) for less than one Rupee four annas per diem. The present cost per patient is found to be Rupees 1-5-5, but this we think may be reduced by the introduction of the Military diet scale, &c. On the other hand, the cost of the daily necessities of life is rapidly increasing, so that it would not be safe to fix the rate of payment on too low a scale. We think that one Rupee and a quarter per diem should be the fixed scale of charge for every sailor of the merchant service sent into the General Hospital for treatment. Discharged or shipwrecked seamen, as at present, should be received and treated without payment.

#### Money Recoveries.

8. According to Dr. Blacklock's statement, it is evident that the present mode of recovering from ship-owners their debts on account of dieting seamen, is defective. The Master Attendant in writing his request for the admission of a sick Sailor, states, "the Commander of the Vessel has furnished me with the necessary reference to a House of Agency for the payment of his Hospital expenses." It would appear, however, that this reference is not always effectual in securing payment; for in 1864 the amount that should have been recovered was Rupees 3,610-0-4, while the amount actually recovered by the Master Attendant was only Rupees 1,800-10-7, leaving a balance still due, the recovery of which seems doubtful, of Rupees 1,839-5-9, or more than 50 per cent. of the whole. The loss in the same way for 1863 was Rupees 893-5-4. The Master Attendant may, if called upon, be able to afford information as to the cause of these losses to Government. We would suggest that to obviate them in future one of two courses might be adopted, namely, either to hold the Master Attendant responsible for the recovery of the amount of Hospital bills for seamen, or to require the House of Agency referred to for payment for the sick sailor, to sign the order for his admission to Hospital. We concur in the remarks in paragraph 8 of your Memorandum of 31st January No. 395, that, however these Hospital stoppages may be recovered, they should be considered as assets of the Institution incurring the expenditure, and that regular estimates of probable recoveries should be shown in the annual Budget of the Medical Department, that Government may be asked only for the sum actually required after taking credit for these items.

#### General Superintendence.

9. The duty of Superintending the economical management of the General Hospital, has, since the Commissariat ceased to furnish supplies to Civil departments, fallen on Dr. Blacklock. We think that this gentleman in his capacity as Senior Medical Officer should be required to exercise a general control and superintendence, but are of opinion he should be relieved of the non-professional executive duties he has voluntarily undertaken, and which in similar establishments in Great Britain, are entrusted to "Stewards" and "Matrons." The limited number of patients hitherto under treatment, and the constant presence of Dr. Blacklock in the hospital wards, are circumstances which we have duly noted. With a larger number of patients, and consequent increase of work, it would be manifestly impossible for the Physician to undertake anything beyond the strict line of his professional duty. Hitherto, the condition of the clothing, bedding, food, and drink, the supervision of the contractors, and the Subordinate hospital staff, entrusted with the charge of the general and medical Stores, have all devolved upon Dr. Blacklock. He is most indefatigable in his exertions for the comfort of

the sick but it appears to us that it was never the intention of Government that the duties referred to should devolve on Medical Officers. The Establishment of the General Hospital, however as at present constituted, contains no one who could have been entrusted with them. Besides the servants alluded to in paragraph 5, there is a Purveyor and an Assistant Purveyor (formerly attached to the Commissariat Department) on Rupees 30 and 15 per mensem respectively. They are native servants, and their duties consist in receiving daily and other supplies from the contractors, and issuing the same under the directions of the Physician and Surgeon; they are in charge of bedding, clothing, &c., but have no responsibility as to the safe custody of Stores, all this devolves on the Senior Medical Officer. They also give no assistance to that Officer in collecting hospital stoppages or in keeping the accounts connected therewith.

#### Appointment of a Steward.

10. Bearing in mind the great increase of work in the Purveying and Account departments likely to take place when the new building is completed, and the labor and responsibility attaching thereto, we are of opinion that a respectable European or East Indian should be engaged as "Steward," who should be responsible for the charge of all stores; for order and discipline amongst the patients and servants; for the recovery of stoppages from patients, and, in a word, all the general routine duty and correspondence of the Hospital. As these duties would involve some pecuniary responsibility we think that the person holding the appointment should give security to the amount of Rupees 2,000 (and that to obtain the services of a respectable and well qualified person, it would be necessary to offer a salary of at least Rupees 120 per mensem. To assist the "Steward," there should be another person, who might be called Assistant Steward. This servant would reside in the Hospital at night, keep the accounts, and be available in the absence of his superior to issue supplies, &c.; his salary should be Rupees 30 per mensem. A peon on Rupees 7 a month would also be required to assist in collecting bills due by patients. With this establishment we consider that the internal economy of the General Hospital may be put upon a proper footing. We append a statement (Appendix C.) showing the present and proposed establishment; the latter will occasion an increase to the present expenditure, but we feel sure that by carrying out the other changes recommended, and a stricter attention to the recovery of monies due by private parties, it is possible to diminish very materially the expenses of keeping up this noble Institution, and that the entertainment of a competent Steward on a fair rate of pay will prove in the end a wise economy.

#### Control of expenditure.

11. We have considered it advisable to recommend that the Civil Hospital expenditure at the Presidency should be scrutinized, as is done in the Military Department, by the Examiner of Medical Accounts. At present the contractors' bills are examined in the Office of the Principal Inspector General, Medical Department, with a view to ascertain that the vouchers are correct, they are then forwarded to the Civil Paymaster for audit and payment, but it seems desirable that the consumption of extras should be curtailed, as far as possible, consistent with the welfare of the sick, and that the practice followed in Military Hospitals should be made applicable to Civil Hospitals also. With this view we suggest that all bills for hospital expenditure in the Civil Institutions at the Presidency should be sent through the Deputy Inspector General of Hospitals to the Medical Examiner for pre-audit, who, when satisfied that they are correct and contain no unnecessary expenditure, will pass them on to the Civil Paymaster. The introduction of this system will enable the Examiner of Medical Accounts to compile the expenditure of money and materials, under the different heads, as is done in the case of Military Hospitals. With the view of showing the amount of assets on account of the Civil Hospitals, duplicate receipts of all monies paid into the Government Treasury by the several Institutions should be sent to the Medical Examiner to be entered in a journal, so as to afford data for the compilation of correct Budget estimates of receipts.

#### Conclusion.

12. In conclusion, the following is a recapitulation of the changes we recommend.

1st. That the Diet scale, herewith forwarded, be ordered to be adopted in all Civil Hospitals at the Presidency for European and East Indian patients. That extras should be allowed only in exceptional cases, and when ordered full explanation of the supposed necessity must be given in writing, and the responsibility to rest with the prescribing Officer till the charge is passed by the controlling authority.

2nd. That the number of Toties in the fixed establishment at the General Hospital be four, and that when any extra servants are employed, the Medical Officer should attach to his monthly Bill an explanation to show for what reason they were considered necessary, and that the responsibility should rest with him till the charge is passed by the controlling authority.

3rd. With a view to economise labor, that a supply of "patent self-acting earth closets" be obtained from England and fitted to the Latrines in the General Hospital.

4th. That the use of Hospital clothing for Civil patients be restricted to those who are unable to supply their own, and that the Military pattern of Hospital gown and cap now in use be discontinued in Civil Hospitals.

5th. That Military pensioners drawing less than Rupees 15 per mensem should be exempt from stoppages while under treatment in the General Hospital, and that the following rate of charges for all persons with a salary above that sum be substituted for that now in use:—

| Patients of all grades or employments with salaries or means |   | from Rupees |  |  | 15 to 25 per mensem Rupees |  |  | 0 2 0 per diem. |    |   |
|--------------------------------------------------------------|---|-------------|--|--|----------------------------|--|--|-----------------|----|---|
|                                                              | " | 15 to 25    |  |  |                            |  |  | 0               | 4  | 0 |
|                                                              | " | 25 to 50    |  |  |                            |  |  | 0               | 8  | 0 |
|                                                              | " | 50 to 100   |  |  |                            |  |  | 0               | 12 | 0 |
|                                                              | " | 100 to 150  |  |  |                            |  |  | 1               | 0  | 0 |
|                                                              | " | 150 to 200  |  |  |                            |  |  | 2               | 0  | 0 |
|                                                              | " | 200 to 300  |  |  |                            |  |  |                 |    |   |

Above Rupees 300, including Military Commissioned Officers  
drawing that amount of pay ... .. 5 0 0

Seamen of the merchant service ... .. 1 4 0

6th. That more efficient means should be adopted to secure the recovery of money due on account of patients treated in the General Hospital, particularly in the case of merchant Seamen. That all monies recovered should be considered assets of the Institution incurring the expenditure, and estimates of probable recoveries shown in the annual Budget of the Medical Department.

7th. That instead of the present Purveyor and Assistant Purveyor, a Steward, Assistant Steward, and Peon be appointed, and that the fixed establishment of servants for the European and East Indian patients in the General Hospital be that proposed in the accompanying scale.

8th. That Hospital expenditure in the Civil Institutions at the Presidency should be scrutinized, as is done in the Military Department, by the Examiner of Medical Accounts.

Fort Saint George,  
22nd March 1865.

We have the honor to be,  
Sir,  
Your most obedient servants.

*Geo Murray M.D.*  
*Surgeon Major*  
*Wm. Cornish. Apothecary.*

(Appendix A.)

Statement of the comparative cost of Patients in the Hospital of Her Majesty's 76th Regiment, Madras; and European and East Indian Patients in the General Hospital.

|                                                       | Number of Diets. | Pay of Servants. | Diet. Ordinary and Extra. | Wines and Spirits. | Bazaar Medicines. | Hospital Necessaries. | Clothing and Bedding. | Hospital Miscellaneous. | Total.     | Cost per diet for a month of 30 days. |      |
|-------------------------------------------------------|------------------|------------------|---------------------------|--------------------|-------------------|-----------------------|-----------------------|-------------------------|------------|---------------------------------------|------|
|                                                       |                  |                  |                           |                    |                   |                       |                       |                         |            | ...                                   | ...  |
| Expenditure during the year 1864.<br>Cost per diet... | 31,702           | 2,412 15 8       | 13,186 7 2                | 3,659 6 1          | 20 15 4           | 985 6 11              | 574 1 9               | 1,534 15 7              | 22,374 4 6 | ...                                   | ...  |
|                                                       |                  |                  |                           |                    |                   |                       |                       |                         |            |                                       |      |
| Expenditure during the year 1864.<br>Cost per diet... | 28,207           | 3,567 0 0        | 20,517 4 0                | 3,637 6 6          | 34 8 5            | 2,700 2 7             | 6,133 0 8             | 1,249 2 1               | 37,838 8 3 | ...                                   | ...  |
|                                                       |                  |                  |                           |                    |                   |                       |                       |                         |            |                                       |      |
|                                                       |                  |                  |                           |                    |                   |                       |                       |                         |            | 21                                    | 2 9  |
|                                                       |                  |                  |                           |                    |                   |                       |                       |                         |            | 40                                    | 3 10 |

H. M.'s 76th Regiment, Madras.  
General Hospital at Madras, Europeans and East Indians.

Table of Diets proposed for European and East Indian Patients in the General Hospital, Madras.  
Articles comprising the different heads of Diet for a day.

*Avoirdupois Weight.*

|  | 1                                                                                                                  | 2                                                                                                    | 3                                                                                | 4                                                                                                                                                                                                                | 5                                                                                                                                                                                                                                                                                                                                                                                                               | 6                                                                                                                                                                                                                                                 | 7                                                                                                                                                                                                          | 8                                                                                                                                                                                                          | 9                                                                                                                                                                                                            | 10                                                                                                                                                                                                                                                                                                                                                                                                                 | 11                                                                                                                                                                                                                                                                                                                                                                                                      | 12                                                                             |
|--|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
|  | Spoon.                                                                                                             | Tea.                                                                                                 | Beef Tea.                                                                        | Milk.                                                                                                                                                                                                            | Chicken.                                                                                                                                                                                                                                                                                                                                                                                                        | Low with Pudding.                                                                                                                                                                                                                                 | Low.                                                                                                                                                                                                       | Half.                                                                                                                                                                                                      | Fish.                                                                                                                                                                                                        | Mixed.                                                                                                                                                                                                                                                                                                                                                                                                             | Full.                                                                                                                                                                                                                                                                                                                                                                                                   | Infant.                                                                        |
|  | Sago..... 2 oz.<br>Tea..... 1/2<br>Sugar..... 2 1/2<br>Milk..... 6<br>Rice 2 oz. For conjee<br>Salt 2 drs. (water. | Bread ... 8 oz.<br>Tea... 1/2<br>Sugar ... 2 1/2<br>Milk ... 9<br>For Beef 12<br>Salt 2 drs. (water. | Bread 12 oz.<br>Tea... 1/2<br>Sugar 1 1/2<br>Milk. 6<br>For Beef 12<br>Salt... 1 | Bread... 1 lb.<br>Rice... 3 oz.<br>Including 1 oz. for<br>Conjee water.<br>Milk 2 pints and<br>6 oz. for Tea.<br>Butter... 1 oz.<br>Sugar... 2 1/2<br>Including 1/2 oz. for<br>Tea.<br>Tea... 1/2<br>Salt... 1/2 | Fowl made into soup<br>or boiled... 8 oz.<br>Bread... 8<br>Tea... 1<br>Sugar... 1 1/2<br>Milk... 6<br>Butter... 1<br>Onions... 1<br>Barley... 1<br>Flour... 1<br>Salt... 1<br>Sugar... 1 oz.<br>Eggs... 2 No.<br>for custard, pudding.<br>N.B.—The Fowl<br>may be roasted or<br>grilled. In such cases<br>the requisite quantity<br>of ghee may be used<br>and the Barley, Oni-<br>ons and Flour exclud-<br>ed. | Mutton in<br>broth. 8 oz.<br>Bread 12<br>Tea... 1<br>Sugar 1 1/2<br>Milk... 6<br>Butter... 1<br>Onions... 1<br>Barley... 1<br>Flour... 1<br>Salt... 1<br>Rice... 2<br>Milk... 1 pt.<br>Sugar... 1/2 oz.<br>Eggs... 2 No.<br>for custard, pudding. | Mutton 8 oz.<br>Bread... 1 lb.<br>Potatoes 8 oz.<br>Tea... 1/2<br>Sugar... 1 1/2<br>Milk... 6<br>Butter... 1<br>Onions... 1<br>Barley... 1<br>Flour... 1<br>Salt... 1<br>Country Vegetables 4<br>Salt... 1 | Mutton 8 oz.<br>Bread... 1 lb.<br>Potatoes 8 oz.<br>Tea... 1/2<br>Sugar... 1 1/2<br>Milk... 6<br>Butter... 1<br>Onions... 1<br>Barley... 1<br>Flour... 1<br>Salt... 1<br>Country Vegetables 4<br>Salt... 1 | Fish ... 8 oz.<br>Bread... 1 lb.<br>Potatoes 8 oz.<br>Tea... 1/2<br>Sugar... 1 1/2<br>Milk... 6<br>Butter... 1<br>Onions... 1<br>Barley... 1<br>Flour... 1<br>Salt... 1<br>Country Vegetables 4<br>Salt... 1 | Coffee..... 1 1/2 oz.<br>Hoppers ... No. 6<br>Mutton for curry... 8 oz.<br>Rice..... 8<br>Curry Powder..... 1<br>Sugar..... 1 1/2<br>Milk..... 6<br>Butter..... 1<br>Onions..... 1<br>Barley..... 1<br>Flour..... 1<br>Salt..... 1<br>N.B.—In this diet<br>the meat may be<br>roasted or broiled. In<br>such cases the diet<br>to be marked, "Full<br>varied," and Onions,<br>Barley, and Flour to<br>be excluded. | Meat, either Beef<br>or Mutton... 12 oz.<br>Bread..... 1 lb.<br>Potatoes... 12 oz.<br>Tea..... 1/2<br>Sugar..... 1 1/2<br>Milk..... 6<br>Butter..... 1<br>Onions..... 1<br>Barley..... 1<br>Flour..... 1<br>Salt..... 1<br>N.B.—In this diet<br>the meat may be<br>roasted or broiled. In<br>such cases the diet<br>to be marked, "Full<br>varied," and Onions,<br>Barley, and Flour to<br>be excluded. | Milk..... 1 1/2 pint.<br>Sugar ... 1 1/2 oz.<br>Arrowroot 2<br>or<br>Sago... 4 |

N.B.—The meat for the various Diets must weigh in the raw state, exclusive of bone, the weights specified in the Table. An addition at the rate of one-fourth of a pound more will be considered an equivalent when meat is issued with bone.  
\* "Hoppers" to weigh two ounces each when cooked.

(Appendix B.)

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Appendix C.

STATEMENT showing the present and the proposed scale of the Establishment of the General Hospital, at Madras.

| Present. |                                             |              | Proposed. |                         |              |
|----------|---------------------------------------------|--------------|-----------|-------------------------|--------------|
| Num-ber. | Designation.                                | Monthly pay. | Num-ber.  | Designation.            | Monthly pay. |
|          |                                             | RS. A. P.    |           |                         | RS. A. P.    |
| 1        | Head Purveyor...                            | 30 0 0       | 1         | Steward ...             | 120 0 0      |
| 1        | Assistant do. ...                           | 15 0 0       | 1         | Assistant Steward ...   | 30 0 0       |
| 2        | Tailors ...                                 | 16 0 0       | 1         | Peon... ..              | 7 0 0        |
| 1        | Cooly Maistry ...                           | 10 0 0       | 2         | Tailors ...             | 16 0 0       |
| 1        | Head Cook ...                               | 14 0 0       | 1         | Cooly Maistry ...       | 10 0 0       |
| 1        | Cook's Mate ...                             | 5 0 0        | 1         | Head Cook ...           | 14 0 0       |
| 1        | Leechman... ..                              | 7 4 0        | 1         | Cook's Mate ...         | 5 0 0        |
| 2        | Poultice men ...                            | 14 8 0       | 3         | First Class Coolies ... | 21 12 0      |
| 8        | Second Class Coolies ...                    | 56 0 0       | 8         | Second do. do. ...      | 56 0 0       |
| 3        | Sweepers ...                                | 12 0 0       | 3         | Sweepers ...            | 12 0 0       |
| 2        | Watermen... ..                              | 14 0 0       | 2         | Watermen... ..          | 14 0 0       |
| 3        | Toties ...                                  | 18 0 0       | 4         | Toties... ..            | 24 0 0       |
| 2        | Washermen ...                               | 16 0 0       | 2         | Washermen ...           | 16 0 0       |
| 2        | Puckallies... ..                            | 17 8 0       | 2         | Puckallies... ..        | 17 8 0       |
| 5        | Lascars ...                                 | 30 0 0       | 5         | Lascars ...             | 30 0 0       |
|          | Average monthly costs of extra servants ... | 67 0 0       |           |                         |              |
|          |                                             | 342 4 0      |           |                         | 393 4 0      |

Appendix D.

From the Physician, General Hospital, to the Deputy Inspector General of Hospitals, Presidency, dated Madras, 9th March 1865, No. 93.

1. With reference to the Financial Statement of the General Hospital for 1864, forwarded to you on 20th ultimo, I have the honor to submit for your consideration the following observations on Hospital stoppages.

2. The Military Hospital stoppages for 1864 amounted to Rupees 1,521-1-4. This sum must have been recovered by the Military Pay Office in the usual course; but I am not aware that it is placed with the Principal Inspector General, Medical Department, as it should be, to the credit of the Hospital. Of this sum, Rupees Four hundred and ninety-one and Annas eight (Rupees 491-8-0) were recovered from pensioners. A pensioned European Private pays two Annas per day in Hospital, a pensioned Serjeant three Annas. The payments press hard on pensioners, who have mostly families to maintain, and the gain to the Government is very small. In any other country the pensioner finds admittance to Hospitals supported by public charity, where he is cared for free of charges. Here, Civil patients of all grades or employments with salaries or means under 25 Rupees a month, and who have never served the Government, pay nothing for the benefits of the Hospital; while the old Soldiers who have done fair service to the State, and who, in many instances, have lost their health in its service, are placed under daily stoppages while under treatment. I would, therefore, respectfully request, that the head of the Medical Department may be moved to submit the subject for the consideration of His Excellency the Governor of Madras.

3. The stoppages actually recovered by the Master Attendant for diets of Seamen was Rupees 1,800-10-7. The sum which should have been recovered was Rupees 3,640-0-4. The difference, or Rupees 1,839-5-9, is still outstanding debt to the Institution. Though part of it may yet be recovered, the loss on Seamen's diets will still be heavy. The sum that should

have been recovered in 1863 was Rupees 2,434-14-2; the sum actually recovered was only Rupees 1,541-8-10. Shewing a loss of Rupees 893-5-4; thus making the total deficit in 1863 and 1864 Rupees 2,732-11-1.

4. The Seaman's ticket to my address for his admission to Hospital is signed by the Master Attendant, or his Deputy, and contains the statement, that "the Commander of the Vessel has furnished me (the Master Attendant or Deputy) with the necessary reference to a House of

\* See Ticket hereto attached, No. 319 of 1863.

Agency for the payment of his Hospital expenses." If the man\* is a discharged or wrecked Seaman he is entered as such on the ticket. He comes on our books as a pauper, and no bill is sent in for his diet.† Some means

† See Ticket hereto attached, No. 929 of 1864.

may probably be found for ensuring the better recovery of the diet charges. It would be well, perhaps, to have the name of the House of Agency inserted in a blank space in the printed ticket, and to employ a Bill Collector to convey the bill to that address, and receive the money for deposit in the Master Attendant's Office. Seamen pay only for the diets and drinks they consume in Hospital, and these are charged for at contract price. Were Sailors treated on board their own ships, while in these Roads, the Commanders would likely have to pay more for diet, if visited by a Medical Officer,‡ and that officer's visits and medicines, added to the cost of diet, would form a heavier charge on the ship than is incurred now. I cannot see why Government can be expected to provide any necessities or comforts for Seamen still on a Ship's books, or who have been discharged while sick from service on Board. Every article provided by the Hospital for the sick Sailor's use should be paid for by his Ship. Thus a small daily charge, say two Annas, should be made for clothing and the same for bedding. If the man's case requires the attendance of extra servants, these two should be paid for at their daily hire.

5. The stoppages from Civilians in 1863 amounted to Rupees 447, and in 1864 to Rs. 551-11-0. Very little difficulty has been experienced in collecting these sums. The scale of charge sanctioned by Government on 21st March 1862, has been proved to be very suitable and not productive of inconvenience to the parties charged. One part of the scale, however, appears to me to require revision. Patients with incomes from Rupees 200 to Rupees 300 and upwards,

§ See scale of 21st March 1862, hereto attached.

per month, are now charged Rupees 2 per day.§ This sum generally covers the cost of diet, but not always; and, contrasted with the charges in the preceding part of the scale, is not properly proportioned to an income of Rupees 300 and upwards. Occasionally men with rather large incomes are admitted into Hospital. During 1864 two were admitted whom I shall name Mr. A. and Mr. B.

|                                                               |     | RS. | A. | P. |
|---------------------------------------------------------------|-----|-----|----|----|
| Mr. A had £ 4,000 per annum. He was eight days in Hospital.   |     |     |    |    |
| The extra servants on his account cost                        | ... | 3   | 2  | 8  |
| His food cost                                                 | ... | 18  | 5  | 9  |
| Total Rupees...                                               |     | 21  | 8  | 5  |
| Total payment to Hospital at Rupees 2 per day                 | ... | 16  | 0  | 0  |
| Loss to Government...                                         | ... | 5   | 8  | 5  |
| Mr. B had Rupees 1,000 per month. He was 18 days in Hospital. |     |     |    |    |
| The extra servants on his account cost                        | ... | 14  | 4  | 0  |
| His food cost                                                 | ... | 44  | 0  | 8  |
| Total Rupees...                                               |     | 58  | 4  | 8  |
| Total payment to Hospital at Rupees 2 per day                 | ... | 36  | 0  | 0  |
| Loss to Government...                                         | ... | 22  | 4  | 8  |

‡ Commanders of Ships usually put their sick seamen on very low diet when there is no Doctor on Board.

6. These gentlemen gave very good presents to some of their more immediate attendants, and thus evinced their gratitude for the assistance they had received, and their thorough willingness to pay for it; but I regretted, when each case was discharged from Hospital, that the scale did not allow me to recover more than Rupees 2 per day. The present scale should, therefore, be extended so as to include incomes of from Rupees 250 to Rupees 1,000.

| Income.    |            | Hospital charges per day. |    |    |
|------------|------------|---------------------------|----|----|
|            |            | RS.                       | A. | P. |
| Rupees 200 | to 250...  | 2                         | 0  | 0  |
| " 250      | to 300...  | 2                         | 4  | 0  |
| " 300      | to 350...  | 2                         | 8  | 0  |
| " 350      | to 400...  | 2                         | 12 | 0  |
| " 400      | to 450...  | 3                         | 0  | 0  |
| " 450      | to 500...  | 3                         | 4  | 0  |
| " 500      | to 550...  | 3                         | 8  | 0  |
| " 550      | to 600...  | 3                         | 12 | 0  |
| " 600      | to 650...  | 4                         | 0  | 0  |
| " 650      | to 700...  | 4                         | 4  | 0  |
| " 700      | to 750...  | 4                         | 8  | 0  |
| " 750      | to 800...  | 4                         | 12 | 0  |
| " 800      | to 850...  | 5                         | 0  | 0  |
| " 850      | to 900...  | 5                         | 4  | 0  |
| " 900      | to 950...  | 5                         | 8  | 0  |
| " 950      | to 1000... | 5                         | 12 | 0  |

7. Whatever rate of Civil stoppage may be fixed in extending the present scale, it will be well to remember that the accommodation for the better classes of paying patients will shortly be much better than what has hitherto been provided and cheerfully paid for, and as good as any seriously sick gentleman should require.

I have the honor to be,

Sir,

Your most obedient servant,

A. BLACKLOCK,

Surgeon Major,

Physician, General Hospital.

J. MAYER,

Deputy Inspector General of Hospitals.

No. 319.

To

The Physician in charge  
of the General Hospital.

Sir,

Please receive into the General Hospital, J. Bird, boatswain of the Ship "Nonimahal."

The Commander of the Vessel has furnished me with the necessary reference to a House of Agency, for the payment of his Hospital Expenses.

I have the honor to be,

Sir,

Your most obedient servant,

J. B. CROWTHER,

Assistant Master Attendant.

Master Attendant's Office,

Madras, 15th May 1863.

Fort Saint George, 8<sup>th</sup> April 1865.

Robert Cole Esq  
Principal Inspector General, Medical Department,

Fort Saint George,

To  
The Honorable A. J. Arbutnot  
Chief Secretary to Government, Public Dept.,

Fort Saint George.

SIR,

My attention having been drawn to the comparative cost of Civil Hospitals in the Presidency, I directed Messrs Macnay and Cornish to investigate and report to me upon the best mode of diminishing the growing expenses of these institutions.

No 395 dated 2. My Memorandum of instructions, and the report of the Committee, I have now the honor to forward to Government.

3 With reference to the various recommendations made, I beg to state that they have my full concurrence, and I would beg the immediate sanction of Government to the introduction of the new diet scale from 1<sup>st</sup> May next in all Civil Hospitals at the Presidency, so that no time may be lost in giving effect to a measure that will tend so much to the reduction of cost.

4 I defer any further remarks upon Hospital expenditure at the Presidency, pending the submission of my Annual Report on Civil Hospitals for 1864, now in course of preparation.

Public Office to Aug 31 May 18 1866

To  
The Physician in charge  
of the General Hospital.

Sir,  
Please receive into the General Hospital, John Richey, Seaman of the Ship "Wallasea", as a Pauper.

I have the honor to be,  
Sir,  
Your most obedient servant.  
J. B. CROWTHER,  
Deputy Master Attendant.

Master Attendant's Office,  
Madras, 22nd August 1864.

EXTRACTS FROM PROCEEDINGS OF THE MADRAS GOVERNMENT.

- PUBLIC DEPARTMENT, FORT SAINT GEORGE, dated 1st March 1862, No. 53.
- "The simplest plan would probably be to request pre-payment of the regulated allowance for a fixed period on the patient's admission."
  - "The period for which pre-payment should be required."—"At the General Hospital at Madras a week's payment in advance would always be sufficient."

PROPOSED SCALE.

|                                                                                                   |                     |
|---------------------------------------------------------------------------------------------------|---------------------|
| Civil patients of all grades or employment with salaries or means under 25 Rupees per mensem..... | Free                |
| With from 25 to 50.....                                                                           | Rs. 0 4 0 per diem. |
| Do. 50 " 100.....                                                                                 | 0 8 0 do.           |
| Do. 100 " 150.....                                                                                | 0 12 0 do.          |
| Do. 150 " 200.....                                                                                | 1 0 0 do.           |
| Do. 200 " 300 and upwards.....                                                                    | 2 0 0 do.           |
| Military Commissioned Officers dieted in the General Hospital.....                                | 2 0 0 do.           |

- ORDER THEREON, 21st March 1862, No. 363.
- "The Government approve of the scale of charges proposed to be levied from Civil Patients."
- "The new rates will be adopted from the 1st May next"
- "The course proposed in paras. 2 and 3 is sanctioned."

CIVIL GENERAL HOSPITAL, MADRAS.  
MEMO. OF HOSPITAL STOPPAGES.

|                          |   |                  |
|--------------------------|---|------------------|
| Admitted                 | } | Days in Hospital |
| Discharged               |   |                  |
| Amount due at            |   | per day          |
| Sums received in advance |   |                  |

|                                   |
|-----------------------------------|
| Rupees                            |
| Balance due Rs.                   |
| or difference to be returned, Rs. |
| Received payment—No demands.      |

Madras, }

Physician, Genl. Hospital.

87424  
C. S. P. 1864

preparation.

I have the honor to be,  
Sir,

Your most obed<sup>t</sup>. servant,

*R. H. [Signature]*

Principal Inspector General,  
Medical Department,

N<sup>o</sup> 395.

Memorandum

The subject of Hospital expenditure in the Civil Institutions of the Presidency has of late engaged the attention of Government.

2. At present all these Institutions are believed to be using the diet scale laid down for European troops in 1858 and the native diet scale of the Medical Code.

3. It is an object of some importance to ascertain whether, as regards European and East Indian patients in the Civil General Hospital, it would not be an economical measure to introduce the Hospital diet scale now in use in Military Hospitals, and whether the old scale of native diets does or does not admit of modification and improvement.

4. As the building of the General Hospital is approaching completion, it will be necessary to ask Government for a special grant of money to purchase bedding and furniture, to fit it for the reception of the increased number of patients likely to be received when the accommodation is more complete.

5. It is possible that many improvements in Hospital bedding, clothing, and furniture, can be introduced, without incurring much extra expense. It is desirable that the General Hospital, Madras, (where the young men of the country derive their practical knowledge of Hospital duties) should be in every respect a model of order, efficiency and economical arrangement.

6. The relative daily cost per patient of the men in Her Majesty's 76<sup>th</sup> Hospital, and in the wards of the Civil General Hospital must be enquired into, and the causes of the difference, if any, reported upon.

7. The establishment of medical <sup>General Hospital</sup> <sup>Lunatic Asylum</sup> <sup>Lying-in Hospital</sup> demands in the several Presidency Hospitals marginally noted, should be revised with the view to efficiency and economy.

8. Lastly, the question of Hospital stoppages in Civil Hospitals and the mode in which they are recovered and brought to credit in the public accounts must be thoroughly investigated. I have a strong impression that the recoveries on account of merchant Seamen, treated in the General Hospital

Hospital, are insufficient to pay the actual expenses incurred. All monies recovered from patients in Civil Hospitals, should be made available under orders of Government, for the general support of the Institution incurring the expenditure, and it is desirable that some simple and uniform plan of procedure may be adopted to secure this object.

9. I have accordingly come to the determination to submit these several points to the officers marginally named (their official experience enabling them to deal effectually with such questions) for full investigation & report.

10. The Deputy Inspector General Presidency will be so good as to request the medical officers of the several Institutions to afford every facility to the above named Gentlemen in their enquiry into the several subjects mentioned in this memorandum.

Office of Principal Surgeon  
Medical Department  
Fort Saint George  
31<sup>st</sup> January 1865

(signed) R. Cole  
Principal Inspector General  
Medical Department

(True Copy)  
[sig] W. R. Cornish  
Secy. P. Surgeon Med. Dept. Fort St. George 2<sup>nd</sup> Feb. 1865

N<sup>o</sup> 432.

To

Surgeon Major G. Mackay and  
Assistant Surgeon W. R. Cornish for  
information and guidance.

(True Copy)

~~W. R. Cornish~~  
Secy. Principal Inspector General  
Medical Deptt.

To

THE PRINCIPAL INSPECTOR GENERAL,  
MEDICAL DEPARTMENT.

SIR,

In continuation of our letter to your address, dated 22nd March 1865, reporting on the expenditure on account of European and East Indian patients in the General Hospital, we have now the honor to report on the Native portion of that hospital, and the hospital expenditure in the other Civil Institutions of the Presidency.

GENERAL HOSPITAL—NATIVE PATIENTS.

2. *General Expenditure.*—The accompanying tabular Statement (Appendix E) shows that the cost on account of Native patients in this institution is very high, the total monthly expenditure for each being Rupees 17-11-4-50, which is only Rupees 3-7-4-50 less than the monthly cost of each European patient in the hospital of Her Majesty's 76th Regiment, and as hospital stoppages at the rate of Rupees 3-12-0 per mensem are recovered from each European soldier, and these Native patients pay nothing, the latter actually cost the Government more than the former. The aggregate cost per month of servants, for an average of 1714 sick, is Rupees 113-5-4, or Annas 1 Pie 0-69 per diet, which is nearly equal to the expense under this head of the Military European sick which is shown to be Annas 1 Pie 2-61. The average cost of each diet in the Native hospital is Annas 6 Pie 4-99, and in the Military European hospital Annas 6 Pie 7-85; and the statement further shows that the expenditure under the head "Malt Liquor, Wine and Spirits" is very high in the Native hospital.

3. *General Management.*—Military Native sick (fighting men and non-combatants) are still received and treated in the Native wards of the General Hospital, all other Native sick are treated in what is denominated the Civil Dispensary attached to the General Hospital, and, whether Medical or Surgical cases, are under the care of the Surgeon of the institution. As the entire charges are borne by the Civil Department it seems desirable that Military patients should as far as possible be excluded. The fighting men consist of sick landing from Foreign service, and who are too ill to proceed direct to the Military Depôt at Palaveram; but if suitable carriage is provided the cases must be very few that could not in a day or two be sent that short distance, otherwise they must prove fatal. Again, it has hitherto been customary to send Military insane patients to the General Hospital, for these there is no suitable accommodation; while the extra servants required to watch such patients is an item of expense which it seems hardly right to entail on a Civil establishment. For this reason, as well as for the benefit of these unfortunate individuals themselves, we would suggest that if they cannot be managed in their own Regimental hospitals, or in the Military Depôt hospital at Palaveram, the proper place for them is the Lunatic Asylum. This, we are aware, will necessitate an alteration of the existing rules as laid down in Section 1, page 12 of the Medical Code, but we submit for your consideration whether such an alteration is not very desirable. The other Military sick treated in this institution consist of Artificers, Lascars, &c., attached to the different establishments at the Presidency, these being non-combatants; there seems no objection to their being admitted into the same wards as Civil patients, and the very few emergent cases, which it may be necessary to receive till they can be forwarded to Palaveram, could be accommodated in the same wards; by this arrangement one establishment would be sufficient for all requirements, instead of the expensive double one which the present system necessitates. We would further suggest the discontinuance of the present denomination of "Civil Dispensary;" all Native cases to be treated in the wards of the General Hospital set apart for them, to be there arranged into Medical and Surgical, the former under the charge of the physician, the latter of the Surgeon. This will have a further advantage of giving the Physician, who is also Professor of Clinical Medicine, the opportunity of imparting practical instruction to the pupils at the Medical College on the diseases peculiar to Natives, which at present he has little or no opportunity of doing.

4. *Diet Scale.*—Extra diet appears to have been used to a considerable extent, and to be one cause of the high rate of expenditure per patient. The class of cases admitted into this hospital no doubt, as a general rule, require nourishing food as much if not more than medicine to effect their recovery, being mostly persons suffering from want, and so susceptible of the full

22nd March 1865  
27th March 1865

Public Letter to King 31st May 1865

For March 1865

From the Secy. to the Govt. of India - 730.

Public 1865. Rept.

27th May 1865

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1865.

reference to the Government  
Military Department, 1865  
dated 26th June 1865, and  
from the Govt. Public Department,  
No 1263, dated 25th August  
1865.

March 1865

Respecting the action  
taken for the Secy. to the Govt. of India  
in the 85th per Civil Department  
in the 1865  
published in the 2nd part of the  
report of the Secy. to the Govt. of India  
dated 1865.

27th May 1865

effects of the various morbid influences to which the poorer Natives are constantly exposed. The present diet scale for Native sick, as laid down in the Medical Code, is very defective, extra articles have consequently been freely used, which is a very expensive system. We beg to forward a new Diet scale (Appendix F), which we have submitted for the opinion of the Medical Officers of the General Hospital, and of which they approve. We would suggest its being adopted in that institution. If this more liberal diet scale is approved of, we would further suggest that no extras be allowed for Native patients, except Port Wine and Arrack in cases where one or other is necessary as a remedy. By these means we hope that the expenditure for Native sick in this hospital may be considerably reduced, with due regard to the efficient treatment of all applicants really in need of Medical or Surgical aid. The most expensive diet in the proposed scale (Appendix F), namely, "full," with tea, it is calculated will cost Annas 5 Pice 9-59, and the average cost of each diet on this scale, including tea and coffee as nearly as can be calculated from the rates at the Presidency in the Medical Examiner's office, will be Annas 4 Pice 3, whereas the average cost of each diet hitherto has been Annas 6 Pice 4. Admitting that the majority of patients will require full diet, we may still hope, after allowing for the cost of firewood, &c., to effect a saving, say of three-quarters of an Anna per diet, which, on the number of patients during last year, would amount to Rupees 8000-00 *per annum.*

5. *Establishment of Servants.*—Expenditure under this head has hitherto been very high, amounting, as shown in Appendix E, to very nearly as much per diet as in the hospital of Her Majesty's 76th Regiment. This is owing partly to the number of helpless bed-ridden patients and accidents admitted, which necessitate extra servants; but the chief cause of the expenditure is that separate establishments are kept up for the Military sick treated in the General Hospital, and Native patients treated in what is denominated the Civil Dispensary attached to the General Hospital. If the arrangement proposed in paragraph 3 above be approved of, namely, to treat all Native patients in the wards set apart for them in the General Hospital, a double establishment will be unnecessary. We forward a Statement (Appendix G) showing the two fixed establishments now maintained, and the one establishment which we consider would be sufficient, by which a saving of Rupees 26-13-4 per mensem would be effected. When extra attendance is required for a Native Military patient, if a fighting man, application might probably be permitted to the Military authorities for a Sepoy orderly as allowed in a Native Regimental hospital, and when any extra servants are employed, the Medical Officer in charge of the patient should attach to the monthly bill a certificate showing the necessity for the extra charge, which will be on his responsibility till approved of by the controlling authority.

6. *Clothing and Bedding.*—Under this head there is little that requires remark; what we stated in our former letter regarding clothing for European and East Indian patients, being only required in exceptional cases in a Civil Hospital applies also to Native patients. Among the extra servants charged for during the past year is a tailor for repairing the bedding used by Native patients, this seems quite unnecessary, as all such stores should be under the charge of the hospital steward, and the necessary repairs executed by the tailors on the permanent establishment for the European portion of the hospital.

7. *Money Recoveries.*—The total cost of the Native portion of the General Hospital comes on the State, there are no money recoveries made from patients. Medical Officers should therefore be careful that no cases are admitted but such as are really fit objects for Medical or Surgical treatment, as no doubt many apply who are more properly suitable inmates for a poor-house or other such charitable institution.

#### LYING-IN-HOSPITAL.

8. *General Expenditure.*—In this hospital, European, East Indian, and Native patients are admitted, the two first of these classes are dieted, but the Natives receive a daily allowance of Annas 2 each, and provide their own food. It is not possible to show the exact cost of a patient of each of these classes separately, as the establishment of servants, and expenditure of all articles except diet is common to both. The accompanying Statement (Appendix H) shows

the expenditure under the different heads for the year 1864, and the average cost of each patient per month, Europeans, East Indians, and Natives taken together. Calculated in this way the cost of each patient in this hospital is small, being only Rupees 8-7-9-60 each per mensem.

9. *Allowance of Annas 2 per diem to Native Patients.*—There is no doubt but that granting this daily allowance is more economical than feeding a Native patient, but the expenditure for the year under this head amounts to Rupees 5243-2-0, and it seems probable that this might be considerably reduced without interfering with the real usefulness of the institution as a hospital. When first established, it was desirable to offer an inducement to Natives to take advantage of the hospital, but as during the past year there has been an average daily number of 115 receiving this allowance, the benefits should now be sufficiently well known and felt. We are of opinion that provision should still be made for the poor, and for all difficult cases of confinement for the time that medical aid is actually necessary; but the defect in the present rule is, that there is no limit as to the time for which this allowance may be given, consequently persons apply long before the date that their confinement is likely to take place, and continue to draw the daily allowance of 2 Annas for a month or six weeks. If the institution is intended to be a Government charity for all pregnant women who choose to apply, this system may be continued, but if it is to be considered a hospital for such cases for the time they require medical aid, by an alteration of the rule, a considerable saving might be effected.

Instead of making it a daily allowance, we think it would be more desirable to fix a sum for each confinement, and fifteen days being a liberal time to allow for an ordinary case. We would propose to try the effect of granting each Native patient confined in the hospital a donation of Rupees 2.\* In the event of a patient actually

\* At present each Patient, on an average, receives Rs. 4-2-7. requiring medical treatment for more than fifteen days, on the certificate of the Medical Officer to that effect, the daily allowance might be continued to such a case for the time she is detained in hospital beyond sixteen days.

10. *Diet Scale.*—The cost of dieting European and East Indian patients in this hospital is not excessive, but still it is higher than in the European Military hospital at the Presidency, and it is desirable that the diet scale proposed in our Report on the General Hospital should be adopted.

11. *Hospital Establishment of Servants.*—Considering the number of patients of all classes, and the nature of the cases treated, the establishment of servants in this hospital is not large. There are, however, a few alterations which we think might be made with advantage. The Matron, who receives Rupees 100 per mensem, having professional duties to attend to, is unable to undertake all the duties which, in the General Hospital, would devolve on a steward, consequently there is a Purveyor employed to perform the duties in this and the Eye Infirmary, and his pay, Rupees 14 per mensem, is divided equally between the two hospitals. The same arrangement is made with regard to a Writer who receives Rupees 17-8-0 a month from this and a similar amount from the Eye Infirmary. It is not desirable that this division of the services of these individuals should be continued. There seems no reason why one man on a fair salary should not do both duties in this hospital, and for this purpose we would propose a Writer on Rupees 20 per mensem. The amount at present allowed for a cook, Rupees 5, monthly, is too small to ensure a suitable person being entertained, great difficulty is found in getting an individual to take the place; we would propose to increase this servant's pay to Rupees 8, per mensem. In Appendix I the present establishment, and that we propose, are given containing these and other minor charges, which we think necessary, at the same time effecting a saving of Rupees 2-4-3 monthly.

12. *Clothing and Bedding.*—We have no suggestions to offer under this head; there is very little clothing used. It is found that all European and East Indian patients, except the very poorest, object to use hospital clothing, and are able to provide their own.

13. *Money Recoveries.*—The scale for recoveries to be made from Civil patients, published in Proceedings of Government, dated 21st March 1862, No. 53, is applicable to this hospital for European and East Indian patients, but either from the class who apply for admission being

really poor, or the difficulty in ascertaining correctly what their means are, the amount realized is very small, having in the past year been only Rupees 174-8-0. The scale proposed by us will, if approved of, be applicable to this hospital. We find that the wives of effective European soldiers apply in considerable numbers and are admitted into this hospital, they add considerably to the expense of the institution and no recoveries are made from them, the regulated hospital stoppage of 1 Anna per diem, which would be deducted if they were under treatment in a Regimental hospital, would even if paid go a very little way towards meeting the actual cost of such cases in this institution. Cases will occur which cannot be so well attended to in Regimental hospitals, and it is desirable that such should, if possible, have the benefit of being admitted into this special institution, but some restriction should be placed on this source of expenditure in the Civil Department. At present all Military patients who apply are admitted. We would recommend that none should be received without a certificate from their husband's Departmental or Regimental Medical Officer, to say that they cannot be efficiently treated under his charge, and such certificate should be countersigned by the Deputy Inspector General of the Division. In the event of such patients drawing their pay at Madras, the usual stoppage roll should be made out by the Medical Officer in charge of the Lying-in-Hospital, the amount received and placed to the credit of the hospital. If pay is not drawn here, a stoppage roll should be forwarded to the husband's Commanding Officer and the money remitted to the Medical officer. Soldiers' wives not in the receipt of pay would of course be exempt from stoppages. The Medical Officer in charge has brought to our notice that the benefits of the Dispensary attached to the Lying-in-Hospital are by no means restricted to the poorer class; that persons drive to the hospital in their carriages and pairs, and receive medical advice and medicines as paupers; that in fact a considerable proportion of the applicants for relief are in circumstances which ought to preclude their claims to gratuitous aid. Dr. Aitken considers that many of these patients would gladly contribute towards the support of the institution if they knew that they were expected to do so; the present orders of Government preclude any demand being made for payment; at the same time the gratuitous issue of medicines to such persons is an expense to the State, and a loss to private medical practitioners and druggists to whom they would otherwise be obliged to apply.

#### LUNATIC ASYLUM.

14. *General Expenditure.*—Europeans, East Indians, and Natives are admitted into this institution. Appendix K shows the general expenditure, and that the average monthly cost of each patient is Rupees 17-9-0. It is not possible to show accurately the cost of Europeans, East Indians, and Natives separately, as the establishment of servants and other charges are common to both, but as nearly as can be calculated, each European and East Indian patient costs Rupees 23-3-8 per mensem, and each Native patient, Rupees 12-7-10 per mensem. Considering the nature of the cases admitted and compared with the expenditure in the hospitals at the Presidency generally this institution is economically managed.

15. *Diet Scale.*—The diet scales in use in this institution are the old ones prescribed in General Orders for European and Native sick, and such extra articles as may be considered requisite are allowed under the sanction of the Deputy Inspector General of the Division. Appendix K shows that, although extras are permitted, the dieting both of the European and Native inmates has been economically managed; the average daily cost of each diet for Europeans has been Annas 7 Pice 2-08, and for each Native only Annas 3 Pice 2-72. In hospitals generally it is seldom necessary to detain patients longer than a few weeks, but in a Lunatic Asylum there is no limit to the time that many may be confined, while at the same time they may be in good bodily health; a variety of diet is therefore often desirable for the preservation of bodily health, and in many cases it is absolutely necessary for the proper treatment of insane patients to be able to humour their caprices and delusions. For these reasons we do not consider it advisable to propose any alteration in the present system of dieting the inmates of this institution.

16. *Establishment of Servants.*—It is hardly necessary to point out that the duties of the establishment of servants attached to a Lunatic Asylum are peculiar; that the proper management of the inmates depends greatly on the keepers and others being judicious and ex-

perienced; and that the numbers should be sufficient to prevent the necessity of resorting to that happily exploded practice of using bodily restraint in the case of troublesome patients; vigilance on the part of the establishment in the Madras institution is rendered more necessary from the building not being altogether suitable for troublesome patients, ever watching their opportunity to escape. Difficulty is experienced in procuring suitable attendants, we therefore feel bound to recommend a few alterations in the present establishment, and a slight increase to the pay of some of the servants to ensure greater efficiency. At present there is a Purveyor employed who receives Rupees 17-8-0 per mensem from this institution, and also attends at the Vepery Dispensary. We have already alluded to the inconvenience of this arrangement in the case of the Lying-in-Hospital, and it is even more felt at this Asylum, where the almost constant presence of this servant is necessary, and when absent, whether correct or not, there is always a convenient reason available that his services were required at the other hospital. The keeper who receives Rupees 35 per mensem, being the only European on the establishment, is required to be so constantly looking after the inmates and Native servants that it is not considered advisable to give him any other duties, we consider that the services of the "Native Head Keeper" may be dispensed with, and would recommend the appointment of a steward, who should be obliged to reside at or near the Asylum, give security for Rupees 500, and receive a salary of Rupees 20 per mensem. There are at present three "Ordinary Keepers," three "Lascars," and three "Civil Lascars," all drawing different rates of pay and all doing the same duty. We propose to class them all together under the head of Keepers. Instead of employing a cooly tailor at Annas 3 a day, we believe it would be more economical to have a good workman on the permanent establishment. The patients are constantly tearing their clothes and bedding, there is consequently constant work for a tailor, and the timely application of his needle would often be a saving in the end. Appendix L shows the present establishment, and what we propose, and that the total increase of expenditure would be Rupees 7-6-0 monthly. Considering how important it is to have an efficient establishment in this institution, and the amount that we have shown will be saved to Government if our recommendations are approved of with regard to the expenditure in the hospitals of the other Civil institutions, we hope that sanction will be accorded to the small increase here proposed. We think it right to add that in British country Asyls, all the attendants are entitled to pension after a certain period of good service. We have no doubt that if a similar rule was adopted here, it would tend to keep up a good class of warders, and to make them more faithful and worthy in what is admitted to be a most disagreeable duty.

17. *Clothing and Bedding.*—It is necessary that the poor helpless inmates of this Asylum should be supplied with clothing; many of them require such frequent changes that cleanliness could not otherwise be ensured, and we do not think that any change is desirable, or that any saving could be effected under this head.

18. *Money Recoveries.*—Payment is occasionally received from a Civil patient, but the only regular recoveries are those from European and Native soldiers; from the former the regulated hospital stoppages are made, for the latter the contractor makes out a monthly bill of the actual cost of the diet supplied, and the amount is deducted from the Sepoy's pay. In the margin we give the sums received during 1864. As the money required for the institution is entered in the Civil Budget, it would seem right that these recoveries should be credited

|                                               | RS.   | A. | P. |
|-----------------------------------------------|-------|----|----|
| Stoppages from European Military patients.... | 745   | 0  | 0  |
| Do. a Native do. ....                         | 61    | 15 | 4  |
| Recovered from a Pensioned Officer.....       | 158   | 5  | 6  |
| Do. Civil patients.....                       | 59    | 13 | 5  |
| Total.....                                    | 1,025 | 2  | 3  |

to the Asylum, and an estimate of probable recoveries shown in the annual Budget.

19. *The Lunatic Asylum Building.*—In concluding our Report on this institution it may not be out of place for us to remark that the present building is in many respects defective, and that the addition of separate accommodation for the more manageable and for cases under observation is very desirable; also some means of employment would be a great advantage to many of the inmates.

#### EYE INFIRMARY.

20. *General Expenditure.*—A Statement of the general expenditure is given in Appendix M, from which it will be seen that this institution is on the whole economically managed.

The average cost of each patient, Europeans, East Indians, and Natives taken together is Rupees 14-11-2. The cost of each separately cannot be accurately shown, for the reasons given in our remarks on the other institutions, in which these different classes are treated, but as nearly as can be calculated, Europeans and East Indians cost Rupees 25-6-9, and Native in-patients Rupees 11-7-2 monthly, the former are dieted, the latter paid Annas 2 per diem to supply their own diet; besides this, another class of Native patients, who it is not absolutely necessary to keep in hospital, but who require treatment, and are unable for the time to gain a livelihood, receive 1 Anna a day, these are shown in the Statement as out-patients.

21. *Money Allowance.*—It appears to us that the system of a daily money allowance to patients is essentially faulty in principle, and open to abuse. The diet of patients should be as much under the control of the Medical Officer as any other part of the treatment. Probably no suitable scale of diet could be constructed which would not cost more than the 2 Annas a day now allowed for each patient. At the same time it would be desirable to make the change; it would then be seen whether the money, or the benefit of medical treatment, is the inducement to attend, and undoubtedly it is the latter which it is the desire of Government to encourage. In this institution, dieting the Native in-patients would not necessitate any increase to the establishment of servants, as there is already a cook employed. With regard to the allowance of 1 Anna a day to out-patients alluded to in paragraph 20, should sanction be obtained to diet Native in-patients, it appears to us that this might be discontinued, as all applicants, who the Physician considers fit subjects for medical treatment and unable to gain a livelihood, could be admitted and dieted.

22. *Diet Scale.*—The average cost per diet for Europeans and East Indians in this hospital has been Annas 8 Pice 3-83, which is less than in the General Hospital, but more than in the hospital of Her Majesty's 76th Regiment, and we would recommend the introduction of the new diet scale proposed for the General Hospital.

23. *Establishment of Servants.*—In our remarks on the establishment of servants in the Lying-in-Hospital, we mentioned that the same Writer is employed in that institution, and this, and proposed to alter this arrangement by appointing a separate servant for each. The Purveyor also attends both hospitals. We recommend that a Writer be appointed on a salary of Rupees 20 per month, and that he should perform also the duties now done by the Purveyor. In the course of a few months, when the ward for eye diseases in the General Hospital is completed, there will be little for a Purveyor to do in this institution. In December 1861, in consequence of the decrease in the number of patients, the establishment was diminished. There is at present a sum of Rupees 12 per mensem saved out of that entered in the Budget under this head. As the number of patients has increased, and some of the servants are insufficiently paid, compared with those in other hospitals, we would suggest a few alterations and append a Statement marked N, showing the present and proposed establishment. The cost of the latter is exactly the amount now budgeted for, and in reality there will be an actual saving of Rupees 7 per mensem, the present half pay of the Purveyor; for by an oversight this sum was not included in the Budget of this hospital, and consequently, though employed also in this institution, his entire pay is disbursed from the Lying-in-Hospital, and does not appear in the Pay list of the present establishment in the Eye Infirmary.

24. *Clothing and Bedding.*—Our remarks under this head, in reporting on the General Hospital, apply equally to this institution.

25. *Money Recoveries.*—Stoppage bills are made out monthly for European Military patients, and the amount no doubt recovered and credited to Government; but we think that, as in the other instances we have remarked on, it should appear as an asset in the accounts of the institution. During the past year these stoppages amounted to Rupees 214-11-0. The only other patients from whom recoveries might have been made were a few seamen of the Merchants' service, but bills were not made out, which we think should be done.

#### VEPERY AND TRIPLICANE DISPENSARIES.

26. *General Expenditure.*—The Statement appended, marked O, shows the general expenditure in these two institutions. The total monthly cost per patient is higher in the Triplicane than in the Vepery Dispensary, owing chiefly to there being a more expensive establishment of servants. In other respects both these institutions are economically managed. We may remark, however, that many of the cases in the Vepery Dispensary must have been a long time in

hospital as 629 admissions give an aggregate of 13,847 diets, whereas in the Triplicane 502 admissions give only 6596 diets. Care should be taken to admit only cases that are fit subjects for Medical or Surgical treatment.

27. *Diet Scale.*—The cost of diet in these institutions is small, and we do not propose that any alteration should be made. As after arrangements are completed for the Native branch of the General Hospital, should these institutions be continued, Government will probably consider it desirable to place them on the same footing as other Civil Dispensaries, when the dieting will be arranged for by the Local Committee, and no alteration could now be made without increasing the expenditure.

28. *Establishment of Servants.*—In both these institutions a Purveyor is employed. When supplies were issued by the Commissariat Department this servant was necessary, but contractors now engage to deliver all articles required at the hospital, so that there seems no necessity for a servant on so high a rate of pay, simply to take charge of the hospital bedding and clothing, and to receive from the contractor the daily supplies. It appears to us that the first class Hospital cooly, who receives Rupees 10 per mensem, should be qualified for this duty, or the clothing and bedding might be placed under the charge of one of the Medical subordinates. We append a Statement, marked P, showing the present and proposed establishments for these Dispensaries; if the latter is approved of, it will effect a saving of Rupees 45-8-5 per mensem.

29. *Local Contributions.*—An attempt has been made to raise a fund for the support of the Dispensary in the Vepery District. The Statement received from the Secretary shows that from October 1864 to May 1865 the following sums have been received:—

|                                                   | RS. | A. | P. |
|---------------------------------------------------|-----|----|----|
| From Europeans and East Indians, subscriptions... | 223 | 0  | 0  |
| Donations.....                                    | 10  | 0  | 0  |
| From Natives, subscriptions.....                  | 48  | 12 | 0  |
| Total...                                          | 281 | 12 | 0  |

Of this sum, Rupees 172-11-5 have been expended in paying the monthly Wine bills, &c., and the balance now remaining is Rupees 109-0-7. As the total cost of this hospital for the past year, exclusive of house-rent, medical attendance, and medicines has been Rupees 5324-14-4, it will be seen that the local contributions go a short way in meeting the outlay, and the Secretary states that several of the European contributors have discontinued their payments from this month. No attempt has been made to raise funds for the support of the Triplicane Dispensary.

#### LEPER HOSPITAL.

30. *General Expenditure.*—Europeans, East Indians, and Natives are admitted into this hospital. Appendix Q shows that it is very economically managed. The total monthly cost per patient including all classes is Rupees 9-6-11. As nearly as can be calculated, each European and East Indian patient costs Rupees 16-7-9 per mensem, and each Native Rupees 6-10-2.

31. *Diet Scale.*—The old diet scale is still in use in this hospital for European and East Indian patients, and the average cost of each diet is Annas 8-0-68, which is more than that in the European Regimental hospital, and might, we think, be reduced by the introduction of the scale proposed for the European patients in the General Hospital. The average cost of each diet for Native patients is only Annas 2 Pice 9-51, and we do not propose that any change should be made.

32. *Establishment of Servants.*—Difficulty is experienced in getting servants to attend on the unfortunate inmates of this institution, which must be taken into consideration in fixing the rate of pay; we therefore deem it necessary to recommend a slight increase to the present pay of some of the servants, which, however, will only put them on an equality with those in the other institutions, and for like reasons it will be necessary to recommend the same for the Idiot Asylum which we have to report on next; but the small additional sum proposed to be thus expended in placing the establishments of both these institutions on a more satisfactory footing may be met by dispensing with the services of the Purveyor in the Leper Hospital, who receives Rupees 21 per mensem. For the reasons already given, we do not consider so expensive a servant necessary under the present contract system, and an individual fully capable of performing all the duties required in this hospital may, we think be obtained for Rupees 12, and

should be denominated a steward. Appendix R. shows the present and proposed establishment the latter will effect a saving of Rupees 5-12-0 per mensem.

33. *Clothing and Bedding.*—Under this head we have no suggestions to offer, no change is necessary.

#### IDIOT ASYLUM.

34. *General Expenditure.*—We found on visiting this institution that the inmates with very few exceptions are lunatics and not idiots, not from any want of cases of the latter class requiring to be admitted, but from the number of the former, and the impossibility of confining the two together, the poor idiots become so terrified at the noise and violence of the insane, that it has been found necessary to remove them from the Asylum. This state of matters can only be obviated by more suitable and extensive accommodation for Native cases being provided at the Lunatic Asylum. The monthly cost per patient in this institution is small, being only Rupees 5-10-0 as shown in Appendix S, and we have no changes to propose except a slight increase to the monthly pay of some of the servants, for the reasons mentioned in paragraph 32, which amounts altogether to only Rupees 3-4-0, and will be much more than met by the saving of Rupees 5-12-0 proposed to be effected in the establishment of the Leper Hospital. Appendix T. shows the present and proposed establishment.

#### RECAPITULATION.

35. We beg in conclusion to recapitulate the various changes which we recommend.

1st.—*General Hospital Native Patient.* That all Native patients, Civil and Military, be treated in the wards set apart for them in the General Hospital to be arranged into Medical and Surgical cases, the former under the charge of the Physician, the latter of the Surgeon; and that the Civil Dispensary as a separate establishment be abolished.

2nd.—That Native Military sick arriving from Foreign service and other stations, are only to be admitted into the General Hospital in cases of emergency, and when admitted are to be forwarded as soon as possible to the Military Depot at Palaveram.

3rd.—That Native Military insane patients should not be admitted into the General Hospital, and that the present regulations be altered so as to admit of their being transferred direct to the Lunatic Asylum.

4th.—That the diet scale given in Appendix F. be substituted for that now in use in the Native General Hospital, and that no extras be allowed, except Port Wine and Arrack, in cases where one or other is necessary as a remedy.

5th.—That the single establishment of servants for Native patients in the General Hospital shown in Appendix G, the cost of which will amount to Rupees 86-8-0 monthly, be substituted for the two establishments now maintained at a cost of Rupees 113-5-4 per mensem; that when extra attendance is required for a Military patient, if a fighting man, application be permitted to be made to the Military authorities for a Sepoy Orderly as is allowed in a Native Regimental Hospital; and that when any extra servants are employed, the Medical Officer should attach to the monthly bill a certificate showing the necessity for the extra charge, which will be on his responsibility till approved of by the controlling authority.

6th.—That all clothing and bedding for Native patients be under the charge of the steward of the General Hospital; and the necessary repairs executed by the tailors on the permanent establishment for European patients.

7th.—*Lying-in-Hospital.* That instead of the daily allowance of 2 Annas, each Native patient confined in this hospital should receive a donation of Rupees 2; that in the event of a patient actually requiring medical treatment for more than fifteen days on the certificate of the Medical officer to that effect, the daily allowance of Annas 2 may be continued for the time she is detained in hospital beyond sixteen days.

8th.—That the diet scale proposed for the European portion of the General Hospital be substituted for that now used in this institution for European and East Indian patients, subject to the same restrictions with regard to the use of extras.

9th.—That the establishment of servants shown in Appendix I, the cost of which will amount to Rupees 237-12-0 monthly, be substituted for that now maintained at a cost of Rupees 240-0-3.

10th.—That the scale of charges proposed for the General Hospital be made applicable for all Civil patients admitted into this hospital.

11th.—That the wives of Soldiers should not be admitted into the Lying-in-Hospital without a certificate from their husband's Departmental or Regimental Medical Officer, to the effect that they cannot be efficiently treated under his charge, and that when admitted the usual hospital stoppages should be recovered and credited to the institution.

12th.—*Lunatic Asylum.* That the establishment of servants shown in Appendix L, at a monthly cost of Rupees 236, be substituted for the present one, the cost of which is Rupees 228-10-0 per mensem; that the steward should give security for Rupees 500, and be obliged to live at or near the Asylum.

13th.—*Eye Infirmary.* That the money allowance of 2 Annas a day to Native in-patients, and 1 Anna to out-patients be discontinued; and that all Natives admitted be dieted on the scale proposed for Native patients in the General Hospital.

14th.—That the diet scale proposed for European and East Indian patients in the General Hospital be adopted for the same class of patients in the Eye Infirmary, subject to the same restrictions as regards extras.

15th.—That the establishment of servants given in Appendix N be substituted for the present one, at a cost of Rupees 7 per mensem less than the amount now budgeted for under this head.

16th.—That the scale of charges proposed for the General Hospital be made applicable for all Civil patients admitted into this institution.

17th.—*Vepery and Triplicane Dispensaries.* That the establishment of servants given in Appendix P be substituted for the present ones in these institutions. The cost of each will be Rupees 61 monthly, and a saving of Rupees 45-8-5 per mensem will thus be effected between the two Dispensaries.

18th.—*Leper Hospital.* That the diet scale proposed for Europeans and East Indians in the General Hospital be adopted for the same class of patients in this hospital, with the same restrictions as regards the use of extras.

19th.—That the establishment of servants given in Appendix R, at a cost of Rupees 91-8-0, monthly, be substituted for the present one, which cost Rupees 97-4-0.

20th.—*Idiot Asylum.* That the establishment of servants shown in Appendix T be substituted for the present one, at an increased expenditure of Rupees 3-4-0 per mensem, to be met out of the saving of Rupees 5-12-0 to be effected under the same head in the Leper Hospital.

21st.—The following tabular Statement shows in one view the monthly cost of the present, and proposed establishments of servants in the hospitals of the Civil Institutions at the Presidency, the decrease on the whole amounting to Rupees 25-12-0 per mensem, while the pay of many of the individuals has been raised, and all have been put as nearly as possible on an equal footing.

| Hospitals.                                             | Present Es-<br>tablishment. |    |    | Proposed Es-<br>tablishment. |    |    | Increase. |     |     | Decrease. |     |     |
|--------------------------------------------------------|-----------------------------|----|----|------------------------------|----|----|-----------|-----|-----|-----------|-----|-----|
|                                                        | RS.                         | A. | P. | RS.                          | A. | P. | RS.       | A.  | P.  | RS.       | A.  | P.  |
| General Hospital. { European and East Indian patients. | 342                         | 4  | 0  | 393                          | 4  | 0  | 51        | 0   | 0   | ...       | ... | ... |
| Hospital. { Native patients...                         | 113                         | 5  | 4  | 86                           | 8  | 0  | ...       | ... | ... | 26        | 13  | 4   |
| Lying-in-Hospital...                                   | 240                         | 0  | 3  | 237                          | 12 | 0  | ...       | ... | ... | 2         | 4   | 3   |
| Lunatic Asylum...                                      | 228                         | 10 | 0  | 236                          | 0  | 0  | 7         | 6   | 0   | ...       | ... | ... |
| Eye Infirmary...                                       | 97                          | 0  | 0  | 90                           | 0  | 0  | ...       | ... | ... | 7         | 0   | 0   |
| Vepery Dispensary...                                   | 74                          | 11 | 5  | 61                           | 0  | 0  | ...       | ... | ... | 13        | 11  | 5   |
| Triplicane Dispensary...                               | 92                          | 13 | 0  | 61                           | 0  | 0  | ...       | ... | ... | 31        | 13  | 0   |
| Leper Hospital...                                      | 97                          | 4  | 0  | 91                           | 8  | 0  | ...       | ... | ... | 5         | 12  | 0   |
| Idiot Asylum...                                        | 62                          | 12 | 0  | 66                           | 0  | 0  | 3         | 4   | 0   | ...       | ... | ... |
| Total...                                               | 1,348                       | 12 | 0  | 1,323                        | 0  | 0  | 61        | 10  | 0   | 87        | 6   | 0   |

We have the honor to be,

Sir,

Your most obedient Servants.

# Appendix E.

STATEMENT of the comparative cost of Patients in the Hospital of Her Majesty's 76th Regiment, Madras; and Native Patients in the General Hospital.

|                                          | No. of Patients | Pay of Servants. |       | Diet ordinary and extra. |        | Wines and Spirits. |       | Bazaar Medicines. |       | Hospital Necessaries. |       | Clothing and Bedding. |       | Hospital Miscellaneous. |       | Total. |        | Cost per diet for a month of 30 days. |    |     |     |    |   |    |
|------------------------------------------|-----------------|------------------|-------|--------------------------|--------|--------------------|-------|-------------------|-------|-----------------------|-------|-----------------------|-------|-------------------------|-------|--------|--------|---------------------------------------|----|-----|-----|----|---|----|
|                                          |                 | RS.              | A. P. | RS.                      | A. P.  | RS.                | A. P. | RS.               | A. P. | RS.                   | A. P. | RS.                   | A. P. | RS.                     | A. P. | RS.    | A. P.  |                                       |    |     |     |    |   |    |
| H. M. 76th Regt.,<br>MADRAS.             |                 |                  |       |                          |        |                    |       |                   |       |                       |       |                       |       |                         |       |        |        |                                       |    |     |     |    |   |    |
| Expenditure during the<br>year 1864..... | 31,702          | 2,413            | 15    | 8                        | 13,100 | 7                  | 2     | 3,659             | 6     | 1                     | 985   | 6                     | 11    | 9                       | 1,534 | 15     | 7      | 22,374                                | 4  | 6   |     |    |   |    |
| Cost per diet.....                       | ...             | 0                | 14    | 61                       | 0      | 8                  | 7     | 86                | 0     | 110                   | 16    | 0                     | 0     | 3                       | 49    | 0      | 11     | 3                                     | 50 | 21  | 8   |    |   |    |
| GENERAL HOSPITAL AT<br>MADRAS—NATIVES.   |                 |                  |       |                          |        |                    |       |                   |       |                       |       |                       |       |                         |       |        |        |                                       |    |     |     |    |   |    |
| Expenditure during the<br>year 1864..... | 20,569          | 1,360            | 0     | 0                        | 8,248  | 5                  | 4     | 1,741             | 11    | 3                     | 488   | 6                     | 10    | 0                       | 0     | 0      | 12,143 | 1                                     | 5  | ... | ... |    |   |    |
| Cost per diet.....                       | ...             | 0                | 1     | 69                       | 0      | 6                  | 4     | 59                | 0     | 1                     | 4     | 25                    | 0     | 0                       | 0     | 4      | 0      | 9                                     | 3  | 35  | 17  | 11 | 4 | 50 |

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TABLE of Diets for Hospitals of Native Sick.  
*Articles composing the different heads of Diets for a day—Avoirdupois Weight.*

| Spoon.               | Milk.  | Low.                | Full.                        |
|----------------------|--------|---------------------|------------------------------|
| Sago...              | 4 oz.  | Mutton in broth ... | Mutton for curry ... 8 oz.   |
| Sugar ...            | 2 oz.  | Bread ...           | Rice* ... 8 oz.              |
| Milk ...             | 6 oz.  | Butter ...          | Curry Powder... .. ½ oz.     |
| Rice. (For Conjee... | 3 oz.  | Onions ...          | Country Vegetables ... 4 oz. |
| Salt. (Water...      | 2 drs. | Barley ...          | Hoppers† ... No. 6.          |
|                      |        | Flour ...           | Bread ... 8 oz.              |
|                      |        | Salt ...            | Butter ... 1 oz.             |
|                      |        |                     | Salt ... 1 oz.               |

\* Or Rice 1 lb. omitting the Bread.  
† Hoppers to weigh 2 oz. each when cooked.

The weight of Meat in the Above diets to be inclusive of bones.  
In cases in which the Medical Officer considers it necessary, Tea ½ oz. or Coffee 1 ½ oz. per diem may be ordered with any of the above diets, when given with Low or Full diet, Sugar 1 ½ oz. and Milk 6 oz. will also be allowed.

N. B.—Cost of the above Diets.

| Spoon.            | Milk.                         | Low.            | Full.                                                |
|-------------------|-------------------------------|-----------------|------------------------------------------------------|
| Rupees 0 0 11.72. | With Bread ..... Ra. 0 4 0.37 | Rupees 0 2 11.0 | With Bread .....Rs. 0 4 6.18                         |
|                   | With Rice ... .. , 0 2 11.62  |                 | Without Bread and }<br>with 1 lb. Rice. } , 0 3 9.68 |

Tea, &c., Rupees 0 1 3.41 | Coffee, &c., Rupees 0 0 10.82



**STATEMENT showing the present and proposed Scale of the Establishment of the Civil Dispensary attached to the General Hospital and Native General Hospital at Madras.**

| PRESENT.                                           |                                        |              |     |                 |              | PROPOSED                          |                     |              |
|----------------------------------------------------|----------------------------------------|--------------|-----|-----------------|--------------|-----------------------------------|---------------------|--------------|
| Civil Dispensary attached to the General Hospital. |                                        |              |     |                 |              | General Hospital—Native Patients. |                     |              |
| No.                                                | Designation.                           | Monthly Pay. | No. | Designation.    | Monthly Pay. | No.                               | Designation.        | Monthly Pay. |
|                                                    |                                        | RS. A. P.    |     |                 | RS. A. P.    |                                   |                     | RS. A. P.    |
| 2                                                  | Peons ... ..                           | 14 0 0       | 1   | Cook ... ..     | 8 0 0        | 1                                 | Peon ... ..         | 7 0 0        |
| 1                                                  | 1st Class Cooly or Poultice Man ... .. | 6 0 0        | 2   | Ward Coolies... | 12 0 0       | 1                                 | Cook ... ..         | 8 0 0        |
| 1                                                  | Cook ... ..                            | 6 0 0        | 1   | Waterman ...    | 6 0 0        | 1                                 | 1st Class Cooly ... | 6 0 0        |
| 3                                                  | Ward Coolies ...                       | 12 0 0       | 1   | Sweeper ... ..  | 4 0 0        | 4                                 | 2nd Class Coolies   | 22 0 0       |
| 1                                                  | Lamp-lighter...                        | 5 0 0        | 1   | Toty ... ..     | 7 0 0        | 1                                 | Washerman ...       | 8 0 0        |
| 1                                                  | Washerman .....                        | 8 0 0        |     |                 |              | 1                                 | Sweeper ... ..      | 3 0 0        |
| 1                                                  | Sweeper ... ..                         | 2 5 4        |     |                 |              | 1                                 | Nurse ... ..        | 5 0 0        |
| 1                                                  | Nurse ... ..                           | 5 0 0        |     |                 |              | 1                                 | Lascar... ..        | 5 0 0        |
| 1                                                  | Lascar ... ..                          | 5 0 0        |     |                 |              | 1                                 | Bheasty ... ..      | 7 0 0        |
| 1                                                  | Bheasty ... ..                         | 7 0 0        |     |                 |              | 2                                 | Toties ... ..       | 12 0 0       |
| 1                                                  | Scavenger ... ..                       | 6 0 0        |     |                 |              | 1                                 | Toty Woman ...      | 3 8 0        |
|                                                    |                                        | 76 5 4       |     | Total.....      | 37 0 0       |                                   |                     |              |
|                                                    |                                        |              |     | Total.....      | 113 5 4      |                                   | Total.....          | 86 8 0       |

Saving 26-13 4.

**Lying in Hospital and Dispensary at Madras for the year 1864.**  
*Cost of European, East Indian, and Native Patients.*

|                                  | Aggregate num-ber of Patients for European and East Indian Patients. | Aggregate daily number of Native Patients. | Native Patient's allowance at 8 As. per diem. | Pay of Servants. | Diet ordinary and extra. | Wine, Spirits, and Malt Liquor. | Hospital Charges. |                     |                       |                          | Total.     |    | Average cost per patient (European and Native) for a month of 30 days. |
|----------------------------------|----------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------|------------------|--------------------------|---------------------------------|-------------------|---------------------|-----------------------|--------------------------|------------|----|------------------------------------------------------------------------|
|                                  |                                                                      |                                            |                                               |                  |                          |                                 | Bazaar Medicines. | Hospital Negatives. | Clothing and Bedding. | Hospital Miscellane-ous. |            |    |                                                                        |
| Expenses during the year 1864... | 4,525                                                                | 51,945                                     | 5248                                          | 2 0 1527 6       | 0 2254 4                 | 11 500 0                        | 0                 | 2335 0              | 0 1453 12             | 0 64 0                   | 0 13,146 8 | 11 | ...                                                                    |
| Cost per Patient....             | ...                                                                  | ...                                        | 0 2 0                                         | 0 06 31          | 0 7 11 71                | 0 9 11 11                       | ...               | 0 09 65             | 0 06 01               | 0 00 26                  | 0 4 632    | 8  | 79 60                                                                  |

**I.**

STATEMENT showing the present and proposed Scale of the Establishment of the Lying-in-Hospital and Dispensary at Madras.

| PRESENT.                    |     |              |       | PROPOSED.              |     |              |       |
|-----------------------------|-----|--------------|-------|------------------------|-----|--------------|-------|
| Designation.                |     | Monthly Pay. |       | Designation.           |     | Monthly Pay. |       |
|                             |     | Rs.          | A. P. |                        |     | Rs.          | A. P. |
| 1 Matron...                 | ... | 100          | 0 0   | 1 Matron...            | ... | 100          | 0 0   |
| 1 Hospital Writer (half)... | ... | 17           | 8 0   | 1 Hospital Writer...   | ... | 20           | 0 0   |
| 1 Purveyor (half)...        | ... | 7            | 0 0   | 1 Head Native Nurse... | ... | 8            | 0 0   |
| 4 Nurses...                 | ... | 24           | 0 0   | 4 Native Nurses...     | ... | 24           | 0 0   |
| 1 Nurse...                  | ... | 8            | 0 0   | Female Toties...       | ... | 16           | 0 0   |
| 4 Female Toties...          | ... | 16           | 0 0   | 1 Cook...              | ... | 8            | 0 0   |
| 1 Cook...                   | ... | 8            | 0 0   | 1 Puckally...          | ... | 8            | 12 0  |
| 1 Puckally...               | ... | 8            | 12 0  | 3 Pecottah men...      | ... | 18           | 0 0   |
| 2 Pecottah men...           | ... | 12           | 0 0   | 3 Male Toties...       | ... | 12           | 0 0   |
| 1 Lascar...                 | ... | 5            | 0 0   | 2 Washermen...         | ... | 16           | 0 0   |
| 1 Do...                     | ... | 7            | 0 0   | 1 Peon...              | ... | 7            | 0 0   |
| 2 Male Toties...            | ... | 12           | 0 0   |                        |     |              |       |
| 1 Washerman...              | ... | 8            | 0 0   |                        |     |              |       |
| Extra Washing Bill...       | ... | 9            | 12 3  |                        |     |              |       |
| Total .....                 |     | 240          | 0 3   | Saving Rupees 2-4-3    |     | 237          | 12 0  |
|                             |     |              |       | Total .....            |     |              |       |

# K.

## LUNATIC ASYLUM at Madras for the year 1864. Cost of European, East Indian, and Native Patients.

|                                                                                                               | Aggre-<br>gate num-<br>ber of<br>Diets. | Pay of<br>Servants. |               | Diet<br>ordinary<br>and extra. |               | Wine, Malt<br>Liquor and<br>Spirits. |               | Hospital Charges.    |               |                          |       |                          |               | Total.                          |               | Average cost per<br>Patient (European<br>and Native) for a<br>month of 30 days. |       | Average<br>monthly<br>cost of each<br>class of<br>Patients. |
|---------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------|---------------|--------------------------------|---------------|--------------------------------------|---------------|----------------------|---------------|--------------------------|-------|--------------------------|---------------|---------------------------------|---------------|---------------------------------------------------------------------------------|-------|-------------------------------------------------------------|
|                                                                                                               |                                         | Rs.                 | A. P.         | Rs.                            | A. P.         | Rs.                                  | A. P.         | Bazaar<br>Medicines. |               | Hospital<br>Necessaries. |       | Clothing<br>and Bedding. |               | Hospital<br>Miscella-<br>neous. |               | Rs.                                                                             | A. P. |                                                             |
|                                                                                                               |                                         |                     |               |                                |               |                                      |               | Rs.                  | A. P.         | Rs.                      | A. P. | Rs.                      | A. P.         | Rs.                             | A. P.         |                                                                                 |       |                                                             |
| For European and<br>East Indian Patients.<br>Expenditure during<br>the year 1864.....<br>For Native Patients. | 7,660<br>8,564                          | 2,744 10 0          | { 3,494 4 9 } | { 317 14 5 }                   | { 144 8 8 }   | { 70 12 4 }                          | { 441 13 2 }  | { 339 12 1 }         | { 9,498 4 7 } | 0                        | 28 48 | { 0 32 72 }              | { 0 0 08 }    | { 0 0 11 07 }                   | { 0 0 08 51 } | 17                                                                              | 9 0   | Europeans Rupees 23 3 8<br>Natives 12 7 10.                 |
|                                                                                                               |                                         |                     |               |                                |               |                                      |               |                      |               |                          |       |                          |               |                                 |               |                                                                                 |       |                                                             |
| For European and<br>East Indian Patients.<br>Cost per diet .....<br>For Native Patients.                      |                                         | 0                   | { 0 32 08 }   | { 0 0 00 }                     | { 0 0 17 11 } | { 0 0 08 }                           | { 0 0 11 07 } | { 0 0 08 51 }        | { 0 0 04 41 } | 0                        | 24 41 | { 0 0 57 0 }             | { 0 0 00 34 } | { 0 0 08 51 }                   | { 0 0 00 34 } | 17                                                                              | 9 0   |                                                             |
|                                                                                                               |                                         |                     |               |                                |               |                                      |               |                      |               |                          |       |                          |               |                                 |               |                                                                                 |       |                                                             |

**M.**  
EYE-INFIRMARY at Madras for the year 1864.  
*Cost of European, East Indian, and Native Patients.*

| Cost of European, East Indian, and Native Patients. |                                                                                         |                     |       |                                                                                                              |       |        |                                      |          |       |                                   |       |                   |       |        |       |        |       |                                                                              |                                                    |                                           |                                 |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------|-------|--------------------------------------------------------------------------------------------------------------|-------|--------|--------------------------------------|----------|-------|-----------------------------------|-------|-------------------|-------|--------|-------|--------|-------|------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------|---------------------------------|
| EXPENDITURE<br>DURING THE<br>YEAR 1864.             | Aggregate No. of diets<br>for European and East<br>Indian Patients and<br>Out-Patients. | Pay of<br>Servants. |       | Diet ordinary and extra<br>for European and East<br>Indian Patients, and<br>Native Patients' allow-<br>ance. |       |        | Wine, Malt<br>Liquor and<br>Spirits. |          |       | Arrack for<br>Native<br>Patients. |       | Hospital Charges. |       |        |       | Total. |       | Average cost per Patient<br>(European and Native)<br>for a month of 30 days. | For a European and East Indian Patient. Rs. 25 6 9 | For a Native In-Patient<br>..... " 11 7 8 | For a do. Out do. .... " 1 14 0 |
|                                                     |                                                                                         | Rs.                 | A. P. | Rs.                                                                                                          | A. P. | Rs.    | A. P.                                | Rs.      | A. P. | Rs.                               | A. P. | Rs.               | A. P. | Rs.    | A. P. | Rs.    | A. P. |                                                                              |                                                    |                                           |                                 |
| For European and East Indian Patients.              | 2,599                                                                                   | 936 0               | 0     | 1,351 5                                                                                                      | 3     | 232 8  | 0                                    | ...      | ...   | ...                               | ...   | ...               | ...   | ...    | ...   | ...    | ...   | ...                                                                          | ...                                                | ...                                       |                                 |
| For Native In-Patients.....                         | 8,765                                                                                   | ...                 | ...   | 1,095 10                                                                                                     | 0     | ...    | ...                                  | 164 2 6  | ...   | ...                               | ...   | 785 10            | 3     | 853 7  | 10    | 147 12 | 11    | 5,566 8                                                                      | 9                                                  | ...                                       |                                 |
| For do. Out do.                                     | 3,223                                                                                   | .....               | ...   | 201 12                                                                                                       | 0     | ...    | ...                                  | ...      | ...   | ...                               | ...   | ...               | ...   | ...    | ...   | ...    | ...   | 201 12                                                                       | 0                                                  | ...                                       |                                 |
| COST PER<br>PATIENT.                                |                                                                                         |                     |       |                                                                                                              |       |        |                                      |          |       |                                   |       |                   |       |        |       |        |       |                                                                              |                                                    |                                           |                                 |
| European and East Indian Patients.....              | .....                                                                                   | 0 1 3 81            | ...   | 0 8 3 83                                                                                                     | 0     | 1 5 17 | ...                                  | ...      | ...   | ...                               | ...   | 0 1 1 27          | 0     | 1 2 10 | 0     | 0 2 50 | 0     | 7 10 05                                                                      | 2                                                  | ...                                       |                                 |
| Native In-Patients.....                             | .....                                                                                   | ...                 | ...   | 0 2 0                                                                                                        | ...   | ...    | ...                                  | 0 0 3 59 | ...   | ...                               | ...   | ...               | ...   | ...    | ...   | ...    | ...   | ...                                                                          | ...                                                | ...                                       |                                 |
| Do. Out do.                                         | .....                                                                                   | ...                 | ...   | 0 1 0                                                                                                        | ...   | ...    | ...                                  | ...      | ...   | ...                               | ...   | ...               | ...   | ...    | ...   | ...    | ...   | 0 1 0                                                                        | ...                                                | ...                                       |                                 |

**N.**  
STATEMENT showing the present and proposed Scale of the Establishment of the Eye-Infirmary at Madras.

| PRESENT. |                                                              |         |    |    |     |                                |     |     |         | PROPOSED. |     |     |     |     |     |     |     |     |          |
|----------|--------------------------------------------------------------|---------|----|----|-----|--------------------------------|-----|-----|---------|-----------|-----|-----|-----|-----|-----|-----|-----|-----|----------|
| No.      | Designation.                                                 | Amount. |    |    | No. | Designation.                   |     |     | Amount. | RS.       | A.  | P.  | RS. | A.  | P.  | RS. | A.  | P.  | Total... |
|          |                                                              | RS.     | A. | P. |     |                                |     |     |         |           |     |     |     |     |     |     |     |     |          |
| 1        | Hospital Writer (Half) ...                                   | 17      | 8  | 0  | 1   | Hospital Writer and Steward... | ... | ... | 20      | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Cooly Maistry...                                             | 7       | 0  | 0  | 1   | Cook...                        | ... | ... | 8       | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Malabar Cook...                                              | 7       | 0  | 0  | 1   | 1st Class Cooly...             | ... | ... | 7       | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Leech Cooly...                                               | 6       | 0  | 0  | 2   | 2nd do. do.                    | ... | ... | 11      | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Ward Cooly...                                                | 5       | 4  | 0  | 2   | Toties...                      | ... | ... | 12      | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Toty...                                                      | 7       | 0  | 0  | 1   | Waterman...                    | ... | ... | 5       | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Waterman...                                                  | 5       | 0  | 0  | 1   | Native Nurse...                | ... | ... | 6       | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Female Ward Cooly...                                         | 4       | 0  | 0  | 1   | Toty Woman...                  | ... | ... | 3       | 8         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Sweeper...                                                   | 3       | 8  | 0  | 1   | Sweeper...                     | ... | ... | 4       | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | European Ward Cooly...                                       | 5       | 4  | 0  | 1   | For European Ward.             |     |     |         | ...       | ... | ... | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Do. Cook...                                                  | 7       | 0  | 0  | 1   | 2nd Class Cooly...             | ... | ... | 5       | 8         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
| 1        | Do. Toty...                                                  | 3       | 8  | 0  | 1   | Cook...                        | ... | ... | 8       | 0         | 0   | 0   | ... | ... | ... | ... | ... | ... | ...      |
|          | Additional amount sanctioned in the Budget.....              | 12      | 0  | 0  |     |                                |     |     |         |           |     |     |     |     |     |     |     |     |          |
|          | Half pay of a Purveyor disbursed in the Lying-in-Hospital... | 7       | 0  | 0  |     |                                |     |     |         |           |     |     |     |     |     |     |     |     |          |
|          | Total...                                                     | 97      | 0  | 0  |     | Saving Rupees...               | 7   |     | 90      | 0         | 0   | 0   |     |     |     |     |     |     |          |

|                           | Total number of Admissions. | Aggregate number of Diets. | Pay of Servants. |    |    | Diet ordinary and extra. |    |    | Wine and Spirits. |    |    | Bazaar Medicines. |     |     | Hospital Necessaries. |     |     | Clothing and Bedding. |    |     | Hospital Miscellaneous. |    |       | Total. |    |     | Cost per diet for a month of 30 days. |     |     |   |   |
|---------------------------|-----------------------------|----------------------------|------------------|----|----|--------------------------|----|----|-------------------|----|----|-------------------|-----|-----|-----------------------|-----|-----|-----------------------|----|-----|-------------------------|----|-------|--------|----|-----|---------------------------------------|-----|-----|---|---|
|                           |                             |                            | Rs.              | A. | P. | Rs.                      | A. | P. | Rs.               | A. | P. | Rs.               | A.  | P.  | Rs.                   | A.  | P.  | Rs.                   | A. | P.  | Rs.                     | A. | P.    | Rs.    | A. | P.  |                                       |     |     |   |   |
| VERERY DISPENSARY.        |                             |                            |                  |    |    |                          |    |    |                   |    |    |                   |     |     |                       |     |     |                       |    |     |                         |    |       |        |    |     |                                       |     |     |   |   |
| Cost of In-patients.....  | 629                         | 13,847                     | 620              | 0  | 0  | 3,224                    | 6  | 5  | 275               | 13 | 0  | ...               | ... | 335 | 12                    | 10  | 197 | 15                    | 0  | 670 | 15                      | 1  | 5,324 | 14     | 4  | ... | ...                                   | ... |     |   |   |
| Cost per Diet.            | .....                       | .....                      | 0                | 0  | 8  | 60                       | 0  | 3  | 8                 | 71 | 0  | 0                 | 3   | 82  | ...                   | ... | 0   | 0                     | 4  | 65  | 0                       | 0  | 9     | 30     | 0  | 6   | 1                                     | 83  |     |   |   |
| TRIPLICANE DISPENSARY.    |                             |                            |                  |    |    |                          |    |    |                   |    |    |                   |     |     |                       |     |     |                       |    |     |                         |    |       |        |    |     |                                       |     |     |   |   |
| Cost of In-patients ..... | 502                         | 6,596                      | 978              | 0  | 0  | 1,193                    | 14 | 5  | 22                | 2  | 10 | 23                | 4   | 2   | 214                   | 11  | 3   | 280                   | 11 | 8   | 428                     | 13 | 0     | 3,141  | 9  | 4   | ...                                   | ... | ... |   |   |
| Cost per Diet.            | .....                       | .....                      | 0                | 2  | 4  | 47                       | 0  | 2  | 10                | 75 | 0  | 00                | 64  | 0   | 0                     | 0   | 68  | 0                     | 0  | 8   | 17                      | 0  | 1     | 0      | 48 | 0   | 7                                     | 45  | 14  | 4 | 7 |

**P.**

**STATEMENT showing the present and proposed Scale of the Establishments of the Vepery and Triplicane Dispensaries.**

| PRESENT. |                                 |         | PROPOSED. |                               |         |
|----------|---------------------------------|---------|-----------|-------------------------------|---------|
| No.      | Designation.                    | Amount. | No.       | Designation.                  | Amount. |
|          | <i>Vepery Dispensary.</i>       |         |           | <i>Vepery Dispensary.</i>     |         |
| 1        | Leechman...                     | 10      | 1         | 1st Class Ward Cooly...       | 10      |
| 1        | Cook's Mate...                  | 3       | 2         | 2nd do. do. do.               | 11      |
| 1        | Waterman...                     | 3       | 1         | Cook ..                       | 5       |
| 1        | 2nd Class Cooly ..              | 4       | 1         | Nurse...                      | 5       |
| 1        | 2nd do. do.                     | 5       | 1         | Waterman...                   | 5       |
| 1        | 3rd do. do.                     | 5       | 1         | Washerman...                  | 8       |
| 1        | Nurse...                        | 5       | 2         | Toties...                     | 10      |
| 1        | Toty ..                         | 4       | 1         | Toty Woman...                 | 3       |
| 1        | Do. ...                         | 8       | 1         | Sweeper...                    | 3       |
| 1        | Sweeper...                      | 2       |           |                               |         |
| 1        | Extra Sweeper...                | 2       |           |                               |         |
| 1        | Average monthly Washing Bill... | 14      |           |                               |         |
| 1        | Purveyor (Half-pay)...          | 8       |           |                               |         |
|          | Total.....                      | 74      |           | Total.....                    | 61      |
|          | <i>Triplicane Dispensary.</i>   |         |           | <i>Triplicane Dispensary.</i> |         |
| 1        | Purveyor...                     | 17      | 1         | 1st Class Ward Cooly...       | 10      |
| 1        | Leechman...                     | 10      | 2         | 2nd do. do. do.               | 11      |
| 1        | Do. ...                         | 10      | 1         | Cook...                       | 5       |
| 1        | Cook...                         | 5       | 1         | Nurse...                      | 5       |
| 1        | Waterman...                     | 5       | 1         | Waterman...                   | 5       |
| 1        | Male Cooly ..                   | 4       | 1         | Washerman...                  | 8       |
| 1        | Do. do.                         | 5       | 2         | Toties...                     | 10      |
| 1        | Do. do. or Letter Carrier...    | 5       | 1         | Toty Woman...                 | 3       |
| 1        | Nurse...                        | 5       | 1         | Sweeper...                    | 3       |
| 1        | Sweeper...                      | 3       |           |                               |         |
| 1        | Toty ..                         | 6       |           |                               |         |
| 1        | Do. ...                         | 5       |           |                               |         |
| 1        | Average monthly Washing Bill... | 11      |           |                               |         |
|          | Total.....                      | 92      |           | Total.....                    | 61      |
|          |                                 |         |           | Saving Rupees 45-8-5          |         |

*Cost of European and Native Patients.*

३.

STATEMENT showing the present and proposed Scale of the Establishment of the Leper Hospital at Madras.

| PRESENT. |                                                 |         |       | PROPOSED.            |                     |         |       |
|----------|-------------------------------------------------|---------|-------|----------------------|---------------------|---------|-------|
| No.      | Designation.                                    | Amount. |       | No.                  | Designation.        | Amount. |       |
|          |                                                 | RS.     | A. P. |                      |                     | RS.     | A. P. |
| 1        | Purveyor ...                                    | ...     | ...   | 1                    | Steward...          | ...     | ...   |
| 2        | Peons ...                                       | ...     | ...   | 2                    | Peons ...           | ...     | ...   |
| 1        | Washerman ...                                   | ...     | ...   | 1                    | Cook for Europeans  | ...     | ...   |
| 2        | Cooks (one for Europeans and one for Natives)   | ...     | ...   | 1                    | Cook for Natives... | ...     | ...   |
| 3        | Ward Coolies (one for do. and two for do.)      | ...     | ...   | 3                    | Ward Coolies        | ...     | ...   |
| 2        | Ward Cooly Women (one for do. and one for do.)  | ...     | ...   | 2                    | Ward Cooly Women    | ...     | ...   |
| 1        | Toty for Europeans                              | ...     | ...   | 2                    | Toties...           | ...     | ...   |
| 1        | Toty Woman for European and Native Female Wards | ...     | ...   | 1                    | Toty Woman          | ...     | ...   |
| 1        | Extra Toty for Native Males...                  | ...     | ...   | 1                    | Washerman           | ...     | ...   |
| Total... |                                                 | 97      | 4     | Saving Rupees 5-12-0 |                     | 91      | 8     |

S.

IDIOT ASYLUM at Madras for the year 1864.

Native Patients.

|                                     | Aggregate number of Diets. | Diet ordinary and extra. |    |      | Wine, Malt Liquor, and Spirits. |     |     | Pay of Servants. |    |      | Hospital Charges. |     |     |     |                       |     |                       |    |                         |     |    |      | Total. | Cost per diet for a month of 30 days. |   |     |     |     |
|-------------------------------------|----------------------------|--------------------------|----|------|---------------------------------|-----|-----|------------------|----|------|-------------------|-----|-----|-----|-----------------------|-----|-----------------------|----|-------------------------|-----|----|------|--------|---------------------------------------|---|-----|-----|-----|
|                                     |                            |                          |    |      |                                 |     |     |                  |    |      | Bazaar Medicines. |     |     |     | Hospital Necessaries. |     | Clothing and Bedding. |    | Hospital Miscellaneous. |     |    |      |        |                                       |   |     |     |     |
|                                     |                            | Rs.                      | A. | P.   | Rs.                             | A.  | P.  | Rs.              | A. | P.   | Rs.               | A.  | P.  | Rs. | A.                    | P.  | Rs.                   | A. | P.                      | Rs. | A. | P.   |        |                                       |   |     |     |     |
| Expenditure during the year 1864... | 34,160                     | 4,903                    | 10 | 10   | ...                             | ... | ... | 753              | 0  | 0    | ...               | ... | ... | ... | ...                   | ... | 498                   | 7  | 0                       | 248 | 0  | 3    | 6,403  | 2                                     | 1 | ... | ... | ... |
| Cost per Diet...                    | ...                        | 0                        | 2  | 3 57 | ...                             | ... | ... | 0                | 0  | 4 23 | ...               | ... | ... | ... | ...                   | ... | 0                     | 0  | 2 80                    | 0   | 0  | 1 39 | 0      | 3                                     | 0 | 5   | 10  | 0   |

T.

STATEMENT showing the present and proposed Scale of the Establishment of the Idiot Asylum at Madras.

| PRESENT. |                |         |    |    | PROPOSED. |                     |         |    |    |
|----------|----------------|---------|----|----|-----------|---------------------|---------|----|----|
| No.      | Designation.   | Amount. |    |    | No.       | Designation.        | Amount. |    |    |
|          |                | Rs.     | A. | P. |           |                     | Rs.     | A. | P. |
| 2        | Peons...       | 14      | 0  | 0  | 2         | Peons...            | 14      | 0  | 0  |
| 3        | Coolies...     | 15      | 12 | 0  | 3         | Coolies...          | 16      | 8  | 0  |
| 1        | Matron...      | 5       | 4  | 0  | 1         | Native Nurse...     | 5       | 8  | 0  |
| 1        | Cooly Woman... | 3       | 8  |    | 1         | Cooly Woman...      | 4       | 0  | 0  |
| 1        | Washerman...   | 7       | 0  | 0  | 1         | Washerman...        | 7       | 0  | 0  |
| 1        | Cook...        | 5       | 0  | 0  | 1         | Cook...             | 6       | 0  | 0  |
| 1        | Waterman...    | 3       | 8  | 0  | 1         | Waterman...         | 4       | 0  | 0  |
| 1        | Toty...        | 5       | 4  | 0  | 1         | Toty...             | 5       | 8  | 0  |
| 1        | Toty Woman...  | 3       | 8  | 0  | 1         | Toty Woman...       | 3       | 8  | 0  |
|          | Total...       | 62      | 12 | 0  |           | Excess Rupees 3-4-0 | 66      | 0  | 0  |

No. 197

OFFICE OF PRINCIPAL INSPECTOR GENERAL, MEDICAL DEPARTMENT,

Bangalore, 27<sup>th</sup> June 1865.  
~~Fort Saint George,~~

From

Robert Cole Esq

Principal Inspector General, Medical Department,

Fort Saint George,

To

The Chief Secretary to Government, Public Dept.,

Fort Saint George.

SIR,

With my letter to your address No 117 dated 3<sup>rd</sup> April 1865 I forwarded my Memorandum of instructions to the Committee appointed to report on the expenditure in the Hospitals of the Civil Institutions at the Presidency. Also the Committee report on the European portion of the General Hospital. I now beg to forward their report on the Native portion of that Institution and the other Civil Hospitals at Madras.

Examiner  
Major  
C. C. Lingell  
Assistant Surgeon  
M. E. Cochrane

2. The Committee recommended a new diet scale for European Patients, and it will be observed that they now propose a new one for Native Patients in the General Hospital. The scale now in use is so defective that extras are of necessity largely used; these are expensive, and difficult to check. The Committee estimate that the proposed scale would effect a saving of Rs 64.2.9 per annum, calculating on the number of patients treated during the past year.

3. The new scale of charges for patients proposed by the Committee, the more effective

measures.

measures for recovering these sums, and the auditing of the accounts by the Medical Examiner, will all tend to enable these useful institutions to be carried on at a considerably less expense to the State than hitherto.

4. In revising the various establishments of Hospital servants, the Committee have found it necessary to recommend, in many instances, an increase of pay, but they propose to dispense with the services of some individuals now considered necessary, and the tabular statement, with which their report ends, shows that, even including the important addition of a steward for the General Hospital, there will, on the whole, be a saving effected under the head of "Establishments" of Rupees 25. 12- per annum.

5. It seems unnecessary for me to recapitulate all the suggestions made by the Committee. I fully concur in all they recommend. That portion of their report already forwarded will be found appended to my Annual Report on Civil Hospitals for 1864, and I solicit the orders of Government with a view to the improvements proposed, if approved of, being carried out without delay, and a saving

21  
saving in expenditure effected.

I have the honor to be,  
Sir,

Your most obed<sup>t</sup>. servant,

R. M. S.

Principal Chapt. Surgeon &c,  
Medical Department.

57  
By J. H. Thomson

Recd of various orders  
relating to Civil Dispensaries.  
their supply by local contracts,  
the self-supporting system.

On request made by the Commissary  
General in his letter to the Chief  
Secy. that the Commissariat Dept.  
might be relieved from the duty  
of supplying Civil Hospitals and  
Dispensaries, the Pres. Inspector  
General. M.D. was ordered  
to report on arrangements with  
a view to this.

In the order of Govt. passed on  
the letter of the Pres. Inspector  
Genl. M.D., the Medical Officers  
in charge, are directed to  
arrange for furnishing supplies  
for Civil Dispensaries by  
local contracts put up by

Competition.  
For certain institutions mentioned,  
publication in Fort St. George Gazette,  
is ordered, with a view to soliciting  
tenders.

The Govt. also approve of endeavouring  
to make all Civil Dispensaries self-  
supporting by means of local contribution.

The arrangement for procuring supplies  
was deferred till 1st May. 1860.

22nd June 1860  
No. 135.

Pro. G. No. 1601.  
9th July 1860.

Pro. G. No. 1263  
25th August 1860

26th July 1860

Para 13

Pro. G. No. 1334.  
10th Sept 1860.

June Report No. 468 of 1860.  
Pro. G. No. 1601/1860  
Pro. G. No. 1334/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860

Pro. G. No. 1601/1860  
Pro. G. No. 1334/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860

Pro. G. No. 1601/1860  
Pro. G. No. 1334/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860

Pro. G. No. 1601/1860  
Pro. G. No. 1334/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860  
Pro. G. No. 1263/1860

155-187.  
19th July 1860

\* Pro. G<sup>t</sup>. No 1376  
17<sup>th</sup> Sep. 1860.

\* 28<sup>th</sup> Feb. 1861

+ Pro. G<sup>t</sup>. 6<sup>th</sup> March 1861  
No. 330.

\* Letter 13<sup>th</sup> March 1861

/o/ Pro G<sup>t</sup>. 19<sup>th</sup> March 1861  
No 407.

++ Pro. G<sup>t</sup>. No 655  
7<sup>th</sup> May 1861.

xx Letter 10. May 1861

† Pro. G<sup>t</sup>. No 77.  
18<sup>th</sup> May 1861.

‡ Pro G<sup>t</sup>. No 1117.

1<sup>st</sup> Aug. 1861.

Simultaneously with the introduction  
of this new system the pay of  
servants attached to these  
institutions is sanctioned.

Instructions issued by the Prin-  
cipal Genl. M.D. regarding  
the carrying out of the local  
Contract system, are com-  
municated to you and recorded.

On the recommendation of the Prin-  
cipal Genl. M.D. the Govt. sanction  
a sum of 50 Rs per mensem  
to all up country civil Dispensaries  
but three.

In consequence of no tenders having  
been received the arrangement  
for supplying the dispensaries  
by local Contract is deferred  
to 1<sup>st</sup> August 1860

As requested by the Prin. Insp.  
General M.D. an advance of  
50 Rs is sanctioned on application  
of Civil Surgeons in charge of  
Dispensaries.

The Commissary General is advised  
to supply civil Dispensaries with  
small supplies of medicines required,  
on payment, by the Medical Officers  
in charge.

\* 16<sup>th</sup> July 1861 No 31.

\* Pro. G<sup>t</sup>. No. 1236  
28<sup>th</sup> August 1861.

† Pro. G<sup>t</sup>. No 1236  
6<sup>th</sup> Feb. 1862.

↑ order. No 657.

11<sup>th</sup> June 1862.

The principle of rendering the  
maintenance of patients as  
far as possible dependent on  
private charity, & putting a limit  
on Govt. expenditure is approved  
by the Sec. of State for India, & it  
is stated that anything in excess  
of this should be defrayed by local  
contributions: the regular  
charge on the Govt. being  
only that of Stationery  
& European Medicines.

These instructions were sent to  
the Prin. Insp. Genl. M.D. with  
a request he would state  
the arrangements necessary for  
carrying them out, but no  
reply was received.

Certain grants to the Chirkepat Disp. approved  
in notification drafted by the Prin.  
Insp. Genl. M.D. approved by  
Govt. & published, it is stated  
that the Govt. continuing to  
supply medical aid and  
medicines, the local public  
must provide all other necessary  
funds or the Dispensaries will  
be closed.

+ No 778.  
16<sup>th</sup> Feb. 1865.

In his letter to the Military Sec<sup>y</sup>  
Genl. Fort St. George the Sec<sup>y</sup>  
of Government of India  
+ states that in the Bengal  
Presidency Supplies required  
for the Medical Department  
for military purposes are  
obtained thro' the Commissariat  
& that diets for Civil  
Dispensaries are often  
provided from private funds  
under the supervision of the  
Supt. & Committee of the  
Dispensary, under check  
of the Deputy Insp. Genl.  
of the Circle.

The Princ. Insp. Genl. is directed  
to notice the suggestion contained  
in a Report of the Sanitary  
Commission of Bengal  
to the effect that "no charge  
should be made in districts  
native patients in Civil  
Hospitals, unless they are  
able to pay for the attendance".

\* dated 6<sup>th</sup> Feb. 1865.

Preci of the recommended  
alterations in the Dist. system  
of stoppages, establishments, &  
audit of accounts in the  
Civil Genl. Hospital Madras.

\* letter 8<sup>th</sup> April 1865.

\* dated 22<sup>nd</sup> March 1865.

+ dated 31<sup>st</sup> Jan. 1865  
No. 395.

\* The Principal Inspector General Medical  
Department, in forwarding a  
\* report drawn up, in accordance  
with the instructions issued  
in his Memorandum, by  
Doctors Mackay and Cornish  
states that he fully concurs  
in the various recommendations  
made in the report, and requests  
that the proposed dist scale  
may be introduced from the  
1<sup>st</sup> May. instant.

The alterations proposed are made  
with reference chiefly to investiga-  
tions pursued in the General  
Hospital only.

\* Report (Appendix A) II  
EXPENDITURE

|             |            |
|-------------|------------|
| 101. Civil. | R          |
|             | 40. 3. 10. |
|             | 21. 2. 9.  |
|             | 19. 1. 1.  |

\* A comparative Tabular Statement  
shows that the total monthly  
charge for a patient in the  
General Hospital  
Civil Dispensary exceeds that  
in the Military by 19. 1. 1.

This is attributed to the diet scale  
in the former being that laid  
down in 1858, at <sup>R. A. P.</sup> 11-7-55.  
the Military being only 6-7-86.

To remedy this excessive  
expenditure the Mixed Diet  
scale, as shown, is recommended.  
and "extras" are to be given  
only in exceptional cases on  
the responsibility of the prescribing  
Officer subject to the approval  
of the Controlling Authority.

2. In the present establishment of  
servants there are in the Con-  
serving Department three  
Hospital Cooks and four  
extra servants: being on an  
average one to 2 or 3  
Patients.

A fixed establishment of  
four Cooks should suffice.  
& if extra servants be occasionally  
required they should be obtained  
as in the case of extra recom-  
mended.

3. That with a view to economy of  
labour a supply of patent  
self-acting earthen closets be  
procured.

4. That  
The cost of Bedding & clothing being  
excessive as compared with  
the Military Hospital all Civil  
Patients who can afford, should  
provide their own: but the  
Physician to the Genl. Hospital  
should report the proportion  
likely to be needed, in this case,  
the stock restricted accordingly.

HOSPITAL II  
STOPPAGES  
+  
RECOVERIES

+ Per. Gt. 21<sup>st</sup> March 1862  
No. 363.

Civil Patients are charged  
according to the <sup>+</sup>scale shown.  
Sewer are charged for actual  
consumption.

All military Prisoners are  
charged 2 Annas, for a Private  
and 3 — for a Sergeant.

It is recommended that instead  
of allowing all Civil Patients  
with salaries or means under  
25 per mensem to be free  
from charges as at present

### III. ESTABLISHMENT.

to charge those with salaries or means between 15 and 25 Rs 2 Annas per diem.

And that all Patients, including Military Officers, drawing or having above 300 Rs per month should be charged 5 Rs per diem, the present charge of 2 Rs for all above 300, being inadequate to cover expenses incurred.

That all Military Prisoners drawing less than 15 Rs per month be exempted.

That 1-4 be charged to all Merchant seamen.

That more efficient means for the recovery of monies from ship owners be adopted, either by holding the Master attendant responsible for sailors' Hospital Bills, or requiring the Agents of Agency, referred to for payment to sign the order of admission.

That all monies recovered should be considered as extra income in expenditure, & the total of probable recoveries shown in the annual Budget.

+ Report (Appendix C.)

|                      |     |              |
|----------------------|-----|--------------|
| Steward              | 120 | Rs per month |
| Assist Steward       | 30  |              |
| Bill collecting Peon | 7   |              |

### IV. CONTROL OF EXPENDITURE

It is proposed that the accounts of expenditure in the Civil Hospital be <sup>submitted</sup> ~~examined~~ by the Examiner of Medical Accounts.

That all Bills for Hospital expenditure be sent thro' the Deputy Commr. Insp. Genl. <sup>of Hospital</sup> ~~to~~ to the Medical Examiner for pre-audit.

That duplicate receipts of all monies paid into the Govt. Treasury should be sent thro' Medical Examiner.

\* Letter of Prin. Insp. Genl. M.D.  
8<sup>th</sup> April 1865.

\* Further remarks on Hospital expenditure is deferred till submission of Report for 1864.

The duty of Superintendence having since the Commissariat ceased to supply the Civil Hospital fallen on the Med. Officer in charge, this Purveyor & Asst. Purveyor having no responsibility as to the custody of the stores, the establishment shown in the margin is proposed as likely in the long run to be economical: the proposed scale will, in all, exceed the present by 51 Rupees per month.

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following papers:  
 From the Off. President's Standing Committee for Bengal } (Received 4 April 1865. No. 68)  
 " Rev. & Ansp. for Rev. S. Smith ( 8<sup>th</sup> " " 1867)  
 " 2<sup>d</sup> " " " " ( 27<sup>th</sup> June 1865. No. 177)  
 " Secy. of the Government of India ( 16<sup>th</sup> February 1865. No. 776)  
 Order thereon 28<sup>th</sup> September 1865. No. 1016.

When passing orders on the reports on Civil Dispensaries for the years 1862 & 1863, the Govt found reason for remarking on the great and increasing cost of the Presidency, as compared with the Provincial Hospitals and Dispensaries.

2 The Principal Surgeon General in the beginning of the present year, deputed two Medical Officers to examine and report on the management of the Civil Hospitals at the Presidency more particularly.





regards their cost, and  
with the letters above provided,  
Do. 66 forwards the reports  
of the Committee, intimating  
that their recommendations  
have his full approbation.

3. The Committee began  
their labors with the General  
Hospital, and their report  
shows that the monthly cost  
of each patient in the Civil  
General Hospital has been  
Rs. 40 3 10 while the ex-  
penditure per patient in  
the hospital of H. M. 76 Regt  
has been Rs. 21 2 0. Speaking  
roughly, the Civilian has  
cost twice as much as the  
Soldier. This excessive ex-  
penditure the Committee  
attribute chiefly to the cost  
of diets the average of which  
is Annas 11-7-65 in the one  
case and Annas 6-7-86 in  
the other. "Diets" appear to  
have

23  
have been established, but  
"Extras" have been so generally  
prescribed as to cease to merit  
the name, having become the  
ordinary rule. The difference  
of cost from the one hospital  
being supplied by Contract  
and the other by the Government  
Hospital Department appears to  
be inappreciable, and the  
Govt considers that the present  
Contract system may be ad-  
-vised to.

4. The Govt sanction the  
introduction of the new diet  
proposed by the Committee  
into the General Hospital and  
other Civil Hospitals for  
European and East Indian  
Patients, as soon as practicable  
after the receipt of their  
Orders. The allowance of  
extras in any diet will be  
confined to exceptional cases,  
and ~~but~~ <sup>and</sup> ~~there~~ <sup>these</sup> will be ~~passed~~ <sup>passed</sup> only  
on "full explanation and"

"on ~~full~~ the responsibility  
of the presiding Officer, pending  
the approval of the Controlling  
Authority"

5. — The cost of the fixed  
establishment of servants  
excluding the Provender and  
Sack Provender has been  
Rs 230-4-0 per Annum,  
and if to this he added the  
Average charge for Extra Ser-  
vants viz Rs 67, the Expen-  
diture is raised to Rs 297-4-0  
nearly Rs 300 per Annum.  
The Committee consider that  
a larger establishment is called  
for in the case of the Civil  
than the Military Hospital  
but think that the <sup>Extra servants</sup> ~~establishment~~  
~~servants~~ were not all necessary.  
The conditions on which  
Extra diets are to be allowed,  
at the close of the last para-  
graph will apply to Extra  
<sup>Servants</sup> ~~Establishment~~. The Concurrence  
Establishment seems very

excessive, and should be  
reduced at once to 4 perma-  
nent servants. The Govt  
sadden from the remark of the  
Committee that, as the Carts  
which bring Earth and remove  
the Excreta are paid for by  
the Hospital, the person, whose  
Earth is borrowed, and return-  
ed to him a concentrated  
manure, pays nothing for  
the operation, not even the  
carriage of the manure.  
This should be looked into.  
The pondrette would seem to  
be at least worth the cost of  
supplying the Earth and pre-  
paring the pondrette when  
made. The Govt do not know  
whether the Earth Charis  
alluded to have been tried  
in this Country, if not, they  
will be prepared to sanction  
the procuring of three or four  
as an experiment. But it is  
quite possible that some

modification

modification may be necessary  
to fit them for Indian use,  
and the management of  
Indian Notes. A report on  
this subject will be at once  
submitted.

6 - Civil Patients, not  
paupers, should certainly  
provide their own clothing,  
and pay for the washing of  
their own underclothing. The  
report suggested on this sub-  
ject in para 6 of the Com-  
missioner's letter, will be for-  
warded to the Principal  
Secretary General.

7 - The important question  
of hospital stoppage is the  
next remarked upon by  
the Committee. They do not  
recommend any alteration  
of the existing rates for  
patients drawing salaries  
between Rs 25 and Rs 200  
per annum, but propose  
to <sup>but</sup> grant Civil Patients  
drawing

drawing from Rs 15 to Rs 25  
monthly, on the same footing  
as Military pensioners, who  
are placed under stoppages,  
and to exempt Military Patients  
drawing less than Rs 25. The  
Govt think that Dr Blacklock  
and the Committee have over-  
looked the fact that the  
Pensioner's pension remains  
undiminished during sickness  
while in the majority of cases,  
the Civil Patient drawing Rs  
25 or less, has to lose one half  
his pay or find a substitute  
to do his work, who will  
usually cost him half his  
pay: so that the Civil Pa-  
tient on Rs 25, really has  
only Rs 12 or 13 to depend on  
during sickness. The Govt  
however think that Military  
Pensioners drawing less than  
Rs 25, should be exempt.  
8 - The Govt also sanction  
the proposal of the Committee  
to charge all patients having

incomes exceeding Rs. 300  
per annum, Rs. 5 per diem.  
It is probable that this will  
have the effect of excluding  
persons whose cases do not  
require their entry to the  
Hospital. Seamen who are  
admitted for the convenience  
of their ship owners, may  
properly be charged Rs. 14/-  
per diem, and the Superin-  
tendent of Marine will  
take means of requiring, in  
all cases, the admission  
order to be signed by the  
Agent for the ship. The  
Supt of Marine will report  
on the large balances out-  
standing and state whether  
or not they are recoverable.  
The Hospital stoppages ~~shall~~<sup>held</sup>  
the Govt considers, be ~~considered~~  
~~and~~ to be Assets of the  
institutions incurring the  
expenditure.

A The

9- The Govt are satisfied  
that it is no longer possible  
for the Physician to undertake  
the superintendence of the ge-  
neral economy of the Hospital  
and that its domestic ar-  
rangements should be entrusted  
to some properly qualified  
person to be styled Steward.  
The recommendation of the  
Committee for the employment  
of a Steward at Rs. 120, an  
Apt Steward at Rs. 80, and  
Bum at Rs. 7, are approved  
as is the proposed scale of  
Servants in Appendix C.  
The Govt also approve the  
proposal that the Civil  
Hospital expenditure  
should be scrutinized by  
the Examiners of Medical  
Accounts in the manner  
laid down in para 11 of the  
1st report of the Committee.  
10- The Committee's second  
report contains their re-  
marks on the Native  
General

General Hospital, and the  
other Civil Hospitals in  
Madras. The cost of each  
patient in the Native part  
of the General Hospital reaches  
the large sum of Rs 17-11-14/2.  
There is no doubt, much truth  
in the remark that the persons  
admitted often require more  
-ing food as much as if just  
more than medicine, and  
that this raises the cost of  
diet. The Govt. ~~Commissioner~~

recommends the proposed diet  
and the restriction of Extras  
to Port Wine and Snack  
and trust that this will  
materially diminish  
the Cost.

11 - The admission of Privi-  
leged Native sick to a  
certain extent seems una-  
-voidable. - The points  
raised in para 3 of the  
second report will be  
considered

considered in the mili-  
tary Department. The  
discontinuance of the term  
Civil Dispensary and the  
re-arrangement of the  
charge of the Physician  
and Surgeon are approved.

12 - The proposed scale  
of servants is sanctioned  
with the restrictions laid  
down for the employment  
of extra attendants.  
Orders will be passed  
in the Military Depart-  
-ment, on the latter sanction  
of para 6: -

13 - The attention  
of the Officers in charge  
will be drawn to the  
Committee's remarks  
in the 6 and 7 paragraphs.  
The

14 - The question of  
duty in the lying  
in Hospital, is by no  
means a simple one.  
The Government have,  
in their orders on the  
Dispensaries remarked  
that it would seem  
that a Hospital of this  
kind is above all others  
one in which a regular  
system of fees is properly  
chargeable, and this  
opinion is in no way  
contravened by the Com-  
mittee. The Government  
considers that the poor  
may still be received  
without charge, an  
allowance at the rate  
proposed viz Rs 2  
being

being made to each pa-  
-per patient, but that  
others should be ena-  
-bled to provide for themselves.  
With the system in use,  
and with that proposed,  
this will be easy, since  
it will merely be neces-  
-sary to inform those  
whose circumstances  
are such as to enable  
them to support them-  
-selves that no allow-  
-ance will be made  
them, altho they will  
receive the benefits  
of the Hospital without  
charge. For European  
or East Indian women  
who are necessarily  
dictated

dicted in the hospital,  
the diet scale already  
sanctioned will be  
introduced. The Go-  
vernment consider that  
the limitation propo-  
sed with regard to  
the services of Soldiers  
is a proper one and  
motion its introduc-  
tion. With respect  
to the <sup>gratuitous</sup> supply of medicines  
and advice to persons  
able to pay for them, the  
Committee make no recom-  
mendation, as they mention  
it as an evil. Any well con-  
sidered scheme to meet the diffi-  
culty, the Governor in Council  
will be prepared to sanction.  
The

15 The Committee propose a  
alteration in the dietary of the  
Lunatic Asylum but advise alter-  
ation in the Establishment. They  
propose, a Steward on Rs 20 in  
place of the Purveyor whose services  
are divided between the Asylum  
and Vepery dispensary, and the  
Native Head Keepers to class the  
permanent Keepers, Sascars, and  
Civil Sascars all as Keepers and  
employ a permanent Sailor. The  
Government sanction these propo-  
sitions. They do ~~not~~, however,  
consider that the Keepers, ~~one~~  
of whom will draw more than  
Rs 8 a month, can be admitted  
to pension.

16 The Eye Infirmary the  
Committee consider to be on the  
whole economically managed but  
recommend the abolition of al-  
lowances and the discharging of  
in-patients. As an experimental  
measure the Government sanction  
this, subject to report after a  
trial

trial of 6 months.

The alteration in the establishment is also sanctioned and the introduction of the stoppage scale passed for the General Hospital, in the case of Civil Patients.

17 The Deputy and Triplicate Dispensaries do not need extended notice. The Government concurs with the Committee in considering that the Purveyor's services may be dispensed with.

18 The Lepor Hospital is stated to be economically managed but the Purveyor seems to be an unnecessarily expensive servant. The Committee's proposal to employ a steward on R. 12 in place of a Purveyor on R. 20 is approved and also the proposed establishment.

19 The establishment of the Idiot Asylum will be arranged as proposed by the Committee.

The

20 The Government are of opinion that Messrs Mackay and Cornish have performed the work assigned to them with judgment, and after a careful consideration of all the recommendations made by them, which are, necessarily somewhat summarily alluded to above, they think that the plans in <sup>their</sup> ~~the~~ entirety may be carried out with advantage - and accordingly give their sanction to any minor details which have not been specifically noticed in previous parts of this order.

Edw.

*[Signature]*

To the Principal Secy Genl. Med Dept.  
" Military Dept.  
" Secy Genl. al  
" Examiners of Claims  
" Superintendent of Prisons

dec 20/9

Public 1865 Depart.

Nov 16

Pro. of Court

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