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Public DEPARTMENT.
G.O., DATED 24-8-94
No. 617

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[Despatch Abstract.]

*Indian Historical Dept.
Replying to letter from
the Govt of India asking
for an expression of
opinion on certain "con-
clusions" arrived at by
that Govt on the proposed
unification of the
Historical Department
on the abolition of the
Presidential Army
system.*

8-12-07
19-12-07
27-11-05
25-8-09 ✓
29/11/12 ✓
21-2-13 ✓
26/1/14 ✓
8-7-14 ✓
11-2-19 13 ✓
19-11-20 ✓
12-3-25 ✓
13-12-44 ✓

READ AGAIN ORDER OF GOVERNMENT, DATED
18 No.

PAPER, No.

OTHER PAPER, No.

274

re Unification of
Int Med Dept

1031 of 95 102
1070 of 95 102
11-4

713

24-9-94

ENCLOSURES.

CURRENT No.

STATEMENT WITH FITTO.

ORDER, &c., OF GOVERNMENT—A.

PAPERS KEPT OUT OF FILE FOR DESPATCH IN ORIGINAL
(not paged).

NUMBER OF COPIES REQUIRED. { Order complete. 20
Letter only. 30
Order complete with Letter. 30

N.B.—

A = Print in full.
B = Not to be printed.
P = Print abstract only.
Q = Print heading only.
R = Print, but not for monthly volume.

Department.
Organisation.

It is requested
that the above head-
ing, with number and
date of this communi-
cation, may be quoted
in any subsequent cor-
respondence on the
subject.

No. 285 G.

GOVERNMENT OF INDIA,
MILITARY DEPARTMENT.

Fort William, the 31st March 1894.

To—

THE SECRETARY TO THE GOVERNMENT OF MADRAS,
MILITARY DEPARTMENT.

SIR,

I AM directed to state, for the information of His Excellency the Governor in Council, that in connection with the question of abolishing the Presidential Army System, the Government of India in their despatch, dated the 2nd November 1892, recommended that the Military Medical Departments should be amalgamated and placed under the Principal Medical Officer, Her Majesty's Forces, as proposed in a draft General Order of 1888. In reply the Secretary of State observed as follows:—

"That order, however, dealt only with Military Medical Administration, and it is evident that the amalgamation of the Bengal, Madras, and Bombay branches of the Indian Medical Service must also involve a revision of the Civil Medical Administration of the local Governments and of the Government of India. The latter was not dealt with in the draft Order of 1888, which in Statement F allowed for the saving caused by the abolition of the Surgeon-Generals, Madras and Bombay, but provided no substitute for the Civil Medical Administration, such as is allowed for the Governments of Bengal, North-West Provinces, &c.

"It seems also absolutely necessary that the Indian Medical Service, which is nearly twice as numerous as the Army Medical Staff in India, should have a distinct head on a different footing from that now held by the Surgeon-General with the Government of India."

2. The Government of India pointed out that in the draft General Order of 1888 it was not proposed to abolish the posts of Surgeon-General with the Governments of Madras and Bombay, but those of the Surgeon-General, Her Majesty's Forces, Madras and Bombay, recasting the Military Medical establishment as therein laid down, with one Surgeon-General under the Commander-in-Chief, and a Surgeon-General for each of the four armies; but that the actual amalgamation of the three Indian Medical Services would undoubtedly involve a revision of the Civil Medical administration.

3. The question of amalgamating the three Indian Medical Services and revising the existing system of Civil Medical Administration has been very carefully considered by the Government of India, and I am now to request that

you will be good enough to move His Excellency in Council to favor the Government of India with a very early expression of his opinion on the conclusions which have been provisionally arrived at on the subject. These conclusions are—

- (I). That the Government of India should take over the direct departmental administration of the Indian Medical Service in the Madras and Bombay presidencies.
- (II). That the present Surgeon-Generals with the Governments of Madras and Bombay and their successors in office should, for the present, retain their claim to rank, pay, and pensions under existing rules, and to the title of Surgeon-Major-General, Madras or Bombay.
- (III). That these officers should in future be restricted to the exercise of the functions of Administrative Medical Officer and Civil Inspector-Generals of Hospitals in respect of the Civil Medical Staff and Civil Medical Institutions in the presidencies of Madras and Bombay.
- (IV). That since the duties of the Surgeon-Major-Generals under the proposed scheme will be the same as those of Inspector-Generals of Civil Hospitals, the post of Secretary to the Surgeon-Major-General in each presidency should be abolished.
- (V). That the Surgeon-Major-Generals should cease to exercise any control over those sections of the existing Medical Establishments of Madras and Bombay which are composed of officers employed with the Army, or over the residue of twenty-five per cent., the administration of which should in future, be conducted directly under the orders of the Government of India.
- (VI). That all unemployed officers of whatever rank or presidency who, for the time being, are not filling sanctioned appointments in the Civil or Military Department, should, while so unemployed, be at the disposal of the Government of India for duty in any part of India or its dependencies.
- (VII). That though the Government of India do not consider it desirable to effect at once a complete unification of the Medical Services and would continue recruitment for the three presidencies as at present, it is proposed to ask the Secretary of State to warn all future candidates that, though ordinarily they will be employed in the presidency which they elect or are attached to, the Government of India has the right to employ them in any other presidency or province according to the exigencies of the public service, and further that a clause should be inserted in the commissions granted to officers that although they may be allotted to a particular presidency they shall be bound to serve wherever they are required to serve.
- (VIII). That Brigade-Surgeon-Lieutenant-Colonels of the three presidential Lists shall be eligible for administrative posts in any of the presidencies or provinces.

- (IX). That promotion to the offices of Surgeon-General with the Government of India, and of Surgeon-Major-General in Madras and Bombay, shall be open to Surgeon-Colonels on the three presidential Lists, to be selected according to seniority, coupled with ability and merit, but they must complete a tour of five years' full-pay service in those positions, including eight months' furlough under Article 689 of Vol. I, Part I of the India Army Regulations, before becoming eligible for the extra pension of £350 a year. Surgeon-Major-Generals will also be eligible for promotion to the office of Surgeon-General with the Government of India.
- (X). That all existing orders and regulations as affecting the pay, pensions, furloughs, promotions, rights, and privileges generally of the Indian Medical Service, not incompatible with the foregoing proposals, should remain in force as hitherto.

I am,

Sir,

Your most obedient servant,

H. J. King
Secretary to the Government of India.

MILITARY (1894) DEPARTMENT

Current Number. 2122

From

THE GOVERNMENT OF INDIA

No. 284 A.

Dated 31 March 1894

Received 7 April 1894

Registered 7 April 1894

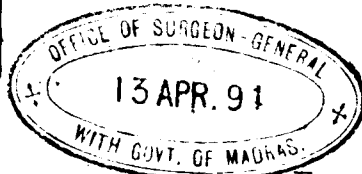
Recd. by Ref. Dept.

Disposed of by do.

ENCLOSURES.

P.G., No. , dated

In re the amalgamation of the three
Indian Medical Services.



Former papers.

N.B.—THIS MATTER SHOULD TAKE
PRECEDENCE OF EVERYTHING BUT
REALLY URGENT BUSINESS OF OTHER
KINDS—VIDE O.G. (MILITARY), No. 5385
Dated 9th OCTOBER 1882.
REQUESTED TO BE RETURNED
WITH REPLY.

No. 2204

Referred to the
Public Secretary
9. APR. 1894

Off. Secy. to Govt.
Dmly. sept

For. Secy. to Govt.
9 April 1894
Recd. 9-4-94

9 12 April 1894 No 713
Endorsement.

Forwarded to the
Surgeon General
with the Govt. for
very Early Expression
of opinion on the
proposals contained
in para 3.

Redmichie
Chief Secretary

RETURNED
WITH REPLY.

Office of Surgeon-General

Government of Madras

Ootacamund. 17 May 1894

SECRETARY
17. MAY. 1894
GOVERNMENT OF MADRAS

No. 798

From

Surgeon Major General W. J. de Labeck. M.D.

Surgeon General - Govt. of Madras.

Ootacamund.

To

The Honble the Chief Secretary to Government

Public Department.

Sir.

With reference to your Endorsement No. 713
dated 12 April 1894 on letter from the Government
of India No. 284/9 dated 31st March 1894 herewith
returned, I have the honor to offer the following
remarks. The skeleton draft or as they are
called "provisional conclusions" are so scant
in detail and open up so many possibilities,
that to deal with the subject matter fully and
satisfactorily is I find simply impossible.
Such remarks therefore as I now offer must
be considered subject to material amplification,
revision, or retraction, on complete details
of the scheme being disclosed. As I am on
the eve of retiring from the service,
Government will I trust agree with me

that it is in every way ~~advisable~~ that any
successor in the office (who will practically
come under the working of the new scheme)
should be called upon for his opinion on the
letter under reference; ^{as also} any further com-
munication that may be received (should
Government think fit) on the subject of
Indian Medical Unification. Though the
scheme proposes to deal not only with the
amalgamation of the three Presidential services
and the revision of the existing system of
Civil Medical Administration little is said
regarding the latter; but what is contained
in the first part Section 9 para 3. To deal
with the several sections of this para 3 provision.

(I) It is not at all clear what is intended
by this section. If the Government
of India should deal only with the
Military Establishment it appears
to me consistent with what follows;
but it is not in my opinion at all
advisable that the Government of
India should undertake the Civil
Administration of the Madras

Medical Service while the Local Govt
is competent to deal with it. It should
be clearly stated that all local civil posts
should be held by Madras Officers. It
may appear unnecessary to Govt. that
such a proviso should be made it being
so self evident; but I need only point to
the instance of Residency Surgeon Hyderabad
Civil Surgeons Nagpore, and Rangoon,
to show how Bengal Officers have absorbed
the best and most coveted appointments
formerly held by Madras Officers and
which in my opinion should still be
held by them.

(II) The expression "for the present" is
certainly vague, not to say paradoxical,
dealing as it does with my successors
in office. There is an ambiguity as
regards the words "rank" and "title"
"Surgeon General with the Government"
being a title not a rank; and "Surgeon
Major General" being a rank and
not a title. Though it is stated
distinctly that "for the present" the
Officer under reference shall retain his
pay and pension under existing rules,
no mention whatever is made as to
what the pay and pension of the future

"Inspector General of Civil Hospitals" ^{will} ~~ought~~
~~to~~ be hereafter. I infer that in the near
future the head of the Local Medical
Department will be styled Inspector
General Civil Hospitals, if such change
occur, and the pay and pension be affected
(which appears more than probable) the
Principal Medical Officer's post of the
Southern Army should be held by a
Madras officer until such time as
those now on the list are absorbed.
This would be but a reasonable com-
pensation for the abolition of the
most lucrative post in the Department.

(III) This appears to be inconsistent with
(I), so far as the question of Ad-
ministration is concerned. I would
ask, is this Officer (Inspector General
of Civil Hospitals) to be under the
direct orders of the Government of India
or the Local Government (which latter
is apparently ignored); and in what
relation will he stand in respect to
the Local Government or the Govt.
of India in respect to recommendations
for the higher grades in the Department?

(IV) A comparison evidently made ~~has~~ between
the Civil Medical Administration in the
Provinces already under Civil Inspectors
General, and that of the Madras Presidency.
It is apparently taken for granted that
the duties are equally extensive and similar
in kind. Any such assumption would
be erroneous. I believe I am correct in stating
that the number of our Civil Medical In-
stitutions in the Presidency is vastly in
excess of the Provinces referred to; as
regards similarity in kind I need only
refer to the fact that the District Surgeons
of this Presidency embody in themselves
not alone the duties of Civil Surgeons
and Superintendents of jails but also
those of Sanitary Officers in general,
vaccination &c. As regards the conclusion
that the post of Secretary should be
abolished it must be distinctly re-
cognized that the Inspecting Medical
Officer (Surgeon General with the post)
does not enjoy the same facilities for
travelling through the Presidency as
are at the command of corresponding
Officers in the Northern Provinces.

(The same remarks hold good in the case of District Surgeons) the result being that during the absence of the head of the Department, a large portion of the work on tour the work of the Office must be left in the hands of his Secretary; who must therefore be not only a professional man capable of dealing promptly ^{with} departmental questions and disposing of them as they arise; duties which no layman can possibly be expected to perform satisfactorily. A high class layman might be competent to deal with ordinary questions; but practically there will be no saving to Government as regards pay; and a certain loss of efficiency would accrue.

(V) It is only too evident that much delay and inefficiency must result if this "Conclusion" were carried into effect. Govt. are well aware the time it takes and the trouble it involves in keeping Civil appointments filled. In cases of furlough or other leave, emergencies, epidemics, deaths requiring officers to be made available ^{at} short notice, applications would have to be made to the Govt. of India which would lead to constant

delay and confusion. There might not be any difficulty as regards Officers Employed with the Army ~~but~~ in respect to the reserve of 25 per cent which is distinctly provided for local requirements it should ~~be~~ ^{be} at present at the disposal of the Local Medical Dept. Military and Civil.

(VI) Comparing this with the foregoing section of para 3 its purport or necessity is not obvious. As practically in the Madras Presidency unemployed officers over and above the reserve do not exist.

(VII) There is something apparently behind this long section, so that without further information I am utterly at a loss to offer any opinion upon it. The conditions referred to have existed and are now in force; every officer being bound to serve wherever Govt. may call on him to do so. Taking this scheme as a whole, (assuming the scheme of unification to be adopted) I would deprecate most strongly any Presidential recruitment of Medical Officers in future. Let all be enlisted from this time for ~~and~~ a United Indian Medical Service. Officers in the Presidential services have claims on Govt; having entered under certain agreements which

cannot be ~~likely~~ brushed aside, and to which candidates entering the service hereafter can have no possible claim. I am aware that all officers agreed to conform to such changes that may be made from time to time; but in equity, this condition cannot be applied properly to what practically amounts to the effacement of the Local Presidential service, and the creation of a new ~~one~~; be the change ever so gradual.

(VIII) I understand from this, that Brigade Surgeon Lt. Col. shall be borne on their Presidential list as at present that is to say the Madras Department to have ^(IX) its share Brigade Surgeon Lt. Col. recruited from the Madras service alone and eligible to all existing privileges. It is not stated under what authority promotion to this grade is to be effected. No other system can be acceptable other than that now in force as the local authorities alone are capable of judging of the eligibility of officers for this rank. The final sanction of the Govt. of India might be admitted but the power of selection should certainly ~~be~~ ^{be} as at present; but ~~this~~ ^{they} should be laid down in far more precise and definite terms. Excluding

the Administrative Officer holding the post of Surgeon Major-General Madras or Surgeon General Civil Hospitals, as he may be styled (of whom more hereafter) there does not appear to be any objection to the general spirit, as I read it, of this section. It is stated that Brigade Surgeon Lt. Col. are "eligible". This term is too elastic, and the interests of the Local service are not sufficiently protected. It is absolutely necessary to have it distinctly laid down that the minimum number of Administrative posts to be held by officers now in the Madras list shall remain equal in number to those they now hold viz 4

(IX) With reference to the first part of this section which states that "Surgeon Colonels of the three Presidential list" are eligible for the post of Surgeon Major-General of Madras and Bombay I can speak with no uncertain sound. I have to say that so far as Madras is concerned I know no language strong enough to condemn this proposal. In the interests first of the public service at large, the proposal is as obnoxious a one as could well be made. For example an officer who

has spent his service day in the Punjab amidst a Hindustanee population amidst a people who are practically foreigners as compared with Dravidians, whose work is in many important respects different from that obtaining in this Presidency; who is totally unacquainted with the respective merits of, and out of sympathy with the Medical Officers and subordinates of the Madras Presidency; who is unknown to the Local Govt., may be appointed as Head of the Civil Medical Administration Madras. Could he under any circumstances be as capable of carrying out his duties, as an officer who has spent all his service in this Presidency, and is conversant with the customs and prejudices of the people, concordant with the abilities of and in sympathy with the officers and subordinates known to the Local Government?

There can be but one answer to this question, and that is, a most emphatic negative. I would here mention, that Madras Officers, have for some time looked forward to a unification scheme with no small alarm, as affecting their promotion to the Administrative grades.

Madras Officers on the whole have had a somewhat more rapid flow of promotion to the Administrative grades than those of Bengal. For this reason many officers have elected Madras in preference to the other Presidencies. The generality of officers electing for Bengal on account of the very large number of its lucrative appointments; the varied character of its service (Political employ &c.) It is not therefore to be wondered at that when by a unification scheme the promotion in all 3 Presidencies is supposed to be equalized to the detriment of Madras, and without any compensatory advantages; that the Medical Officers of this Presidency should look forward to such a scheme with distrust and even despair. Turning now to the interests of the whole Madras Medical Department any officer who has spent the whole years of his service in this Presidency, whose whole official and private associations have been connected with it; would naturally look forward to the possible time when he might reach the highest post in his Department, and would prefer such a position in his own Presidency to a similar one in either Bengal or Bombay.

Though there may be a strong but pardonable
element of sentiment in this remark, it is
no less strong. Again how is the
Surgeon General & Govt. of India the
official adviser of that Govt. to hold
the scales of justice impartially between
the 3 Presidencies? His already extremely
onerous duties, very much increased as
they must be under the proposed scheme
must prevent his acquiring any but
the most superficial knowledge of the
respective merits of the officers of the
Madras or Bombay Depts.

Even
assured to him a certain knowledge,
which practically he cannot possess.
Under these circumstances the knowledge
of the points which should decide between
three admittedly eligible men will be
absent; and one can at once predict
that the selection will fall in the
majority of cases on a Bengal Officer,
who has been long known to the Surgeon
General & Govt. of India rather than
on one of the Madras or Bombay Presidencies
who is to him relatively unknown quantity.
It is unnecessary for me to point
out to Govt. that those qualities which

constitute administrative capability can
only become known to those who are in
constant official touch, and personally
acquainted with the Officers exercising
them. How then is the Govt. of India
to decide on the mere dictum of their
official advisers, with regard to men whom
he has probably never come in contact
with, and possibly never heard of. A
point to be borne in mind is, that the
numbers of officers in the Bengal service
is more than equal to that of Madras
and Bombay united - by from 60 to 70
officers. As a set off it may be said
that under this section Officers of Madras
and Bombay services are "eligible" for the
Surgeon Generalship & Govt. of India. I have
no hesitation in saying that the chances
of a Madras or a Bombay officer attaining
this high post will seldom or never advance
beyond eligibility.

Government will also note that although
the Surgeon Colonels of Bengal are eligible
for the position of the Head of the Local
Civil Departments Madras & Bombay
that nothing is said about the eligibility
of a Madras and Bombay Officer the

corresponding promotion in Bengal. Public
interests ~~then~~ ^{are} running hand in hand as
they do with those of the whole Department
will I feel sure induce Govt. to give its
most strenuous opposition to the proposals
under reference in their present form. I
can foresee with certainty if these conclusions
are adopted so far as the interests of
the Madras Med. Dept. are concerned
a grievous wrong will fall upon its officers.
If unification must take place, the
only equitable arrangement in my opinion
would be that so far as the Surgeon-
Generalship & Govt. of India is concerned,
it should be distinctly laid down that
this appointment shall be held strictly
in rotation (Presidentially) by the
officers now on the list who may in future
hold the position of Surgeon-Major-General-
Surgeon-Col. or Inspector-General Civil
Hospitals or whatever title or rank the
Administrative Officer may hold.

(X) All existing orders and regulations
as affecting pay, promotion, ~~rights~~ ^{rights} &
privileges so far as they refer to Madras
are so incompatible with the proposals
contained in the letter under consideration

that it is impossible to take these points
seriously into consideration & but and all of them
being vitally affected. In conclusion I
have to say that the scheme amounts to the
effacement of the Madras Med. Service
and it is not too much to say the ef-
facement of one of the landmarks of
British Dominion in India. I would
strongly urge in justice to my Department
this large and momentous question should
be placed in the hands of a Committee
composed of at least 3 officers conspicuous
for their ability and experience of the
Madras Medical Service with 2 Civilians
of this Presidency and with Surgeon-Genl.
^{British} Govt. of Madras as its President.

In this connection I would respectfully
remind Govt. that in 1867 when the re-
arrangement of appointments, pay & of
the Madras Med. Dept. was considered
a Committee constituted on these lines was
appointed. Much more important questions
are now at stake, questions which I
consider cannot properly be left to any
individual officer to deal with & present
his recommendations be it either to the
Local or the Supreme Government.
As a retiring officer, the scheme cannot
in any way affect me. I cannot however,

help feeling the greatest sympathy and com-
miseration for the Officers now in the Madras
Med. Dept. and that they whose interests are so
vitally affected should in some way have a
voice in the matter. I believe I am expressing
the opinion of the officers generally of the Dept.
when I say that the majority of them would
far prefer to have their existing privileges &
granted to them and endure such ills as
may pertain to the "Brightened Presidency"
rather than risk the shadowy advantages
held out to them under this Unification
scheme. I can foresee such a change can
only be injurious to the interests of the public
service and the Madras Medical Dept.;
calculated to cause discontent, distrust
and despair; which must lead to con-
fusion, delay and inefficiency, and
which appears to me to be utterly im-
practicable.

I have the honor to be
Sir,
Yours Most Obedt. Servant.

W. H. Sturt
Surgeon Major General
Surgeon-General & Secy. of Madras

Public (1894) Dept.

From

Surgeon Maj. Genl. M. J. de F. de S. de S.
Surgeon Genl. & Govt. of Madras
Cotacamund.

No. 9/98.

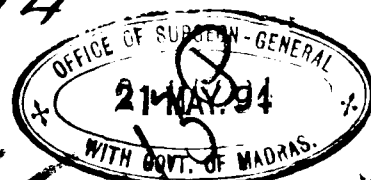
Dated 17th } May 1894.
Recd.

Recd. 18/5
Encl. But no 1073 returned.

90

Subject

Submits remarks re.
the amalgamation of the
three Indian Med. Services.

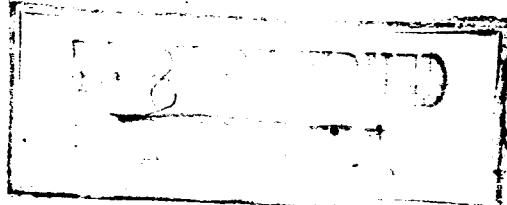


Endno. 1010

Forwarded to Surgeon
Major General Sib.
Thorpe for his remarks
to be submitted at
an early date.

13/5/94
14/5/94
A. Hatterworth
for Chief Secy

Cotacamund
19th May 1894



OFFICE OF SURGEON-GENERAL
WITH THE GOVERNMENT OF MADRAS,

No. 373
Encl.
From

Madras, 25 May 1894

C. S. Thorpe

SURGEON MAJOR-GENERAL

SURGEON-GENERAL WITH THE
GOVERNMENT OF MADRAS,
Madras,

To
THE HONORABLE THE CHIEF SECRETARY TO GOVERNMENT,
Public Department,

SIR,

With reference to your endorsement
no: 1010 dated 19th May 1894 on the file
regarding the Government of India
Military Department no: 284 G. dated
31st March 1894 to the Secretary to
Government of Madras Military Depart.
ment on the question of the amalgama-
tion of the three existing Establishments
of the Indian Medical Service and the
necessary revision of the Civil Medical
Administration, I wish to submit the
following remarks:-

Conclusion I - Necessary if the proposed
amalgamation is to be carried out, but
this will reduce the Madras Government
to the position of the local Governments
in the Bengal Presidency vide para 27
Army Regulations India Volume VI Medl.
I consider the Government of India

happ

have determined to carry out this amalgamation as the Indian Medical Service is the last of the military services formed of three Establishments. All the rest have been already centralized under the Government of India. For the Indian Medical Service as a whole I think the amalgamation will be to the advantage of the Public Service and the Medical Profession, but I am doubtful of the advantage to individual medical officers in Madras or Bombay of changing the personal knowledge of their Excellencies the Governors in questions of selection for promotion for the impersonal knowledge of His Excellency the Viceroy.

Conclusion III. Yes, as regards their Rank, Pay and Pension, but I consider the title should remain as it is, it has the sanction of custom for some years and is understood, there appears to me no necessity to bring in the Military Rank at all into the title of the Office. I would strongly deprecate the reduction of the status of the Chief Medical Officer with the Madras Government to the position of a so-called Inspector General of Hospitals. The administration of the Hospitals is only one of his many important

important duties.

There will be ample work for the one Officer under the proposed change but what about the duties mentioned in Army Regulation India Volume VI Medical paras 25 and 235 regarding medical storekeepers and para 235 regarding medical subordinate Establishment.

If these duties are left on him he will be in a very different position from the Inspector-Generals of Civil Hospitals with other Local Governments.

Conclusion IV - Please note above. His duties will be much larger than any of the Inspector Generals referred to. The number of Civil Districts in Madras ~~is 22~~ 22. The number of larger towns which should be inspected by him ^{is about} 70. The number of Civil Hospitals under his control in Madras ~~is 8~~ 8. Up country ^{there} are 489; Police Hospitals ~~number~~ 19; Lunatic Asylums ^{and 2} 3, Medical Store Depôts. ~~various~~

Medical

* See line 10
1063 under the circular
of G.O. of India
See para 203 and 1117
G.O. - 1117
Army/med. system
15/11

Medical Commissioned Officers in Civil
Employ. ————— 57.
Medical Warrant Officers ————— 24
Assistant Surgeons ————— 24
Civil apothecaries. ————— 152
and Hospital Assistants ————— 333

The Correspondence passing through
his office in Receipt & Issues
1892 amounted to ————— 21050.
1893 ————— 20942.

Considering how much of the time of
the Head of the Medical Service must
be passed away from his office on
touring duty and that in this Presidency
any way it is most desirable
that all Rosters of Service should be
kept by a Commissioned Medical Officer
I consider the retention of a Com.
missioned Medical Officer as
Secretary absolutely necessary
to the good working of the Depart-
ment. His place could only be
taken by a lay officer whose pay
would, if a desirable man's services
were retained, be nearly as high
as that of a Medical Officer.

and

and such a lay officer would be
quite unfit to check requisitions for
medicines, deal with medical statistics
or correspondence on professional
subjects.

Conclusion V This would necessarily
be accepted if conclusion ~~was~~ ^I was
adopted.

The question of dealing with the
Reserve of officers by the local
Government to the extent of ten per
cent is referred to in the correspond-
ence ending with my letter no. 367
dated the 22nd May 1894.

Ten per cent would be scarcely enough
to meet all the temporary requirements
of the Civil Department. If the Govern-
ment of India has to be applied to
it means delay which may some-
times prove disastrous not only to
the officers concerned but to the Service
at least twenty per cent should
be at the disposal of the Madras
Government and this would save
expense in transferring officers
from one Presidency to another.

Conclusion VI

647 1874.
under disposal.
Ind. P.G. Part 385
2.6.94.

Conclusion VI. This would in my opinion be necessary.

Conclusion VII. This would ~~be~~ ^{be} considered be a mistake. I think Medl. Officers enlisted after a particular date should be on one list for ^a General Service in India but with a promise that as far as the exigencies of the Service permitted ^{would} they be allowed to serve in the part of the Country which they elected for after arrival in India, it would then be the duty of the Government of India to see that the available Officers were fairly distributed to all the local Governments so that the present system of allowing the men who pass highest on the list to choose the parts of India where they wish to serve would to a certain extent be put a stop to and no part of India would then be condemned to take the men who pass lowest in the Competitive Examinations. I do not see the necessity of the proposed change in our Commissions which are now in "Her Majesty's Land Forces" and

I take it, we are bound to serve wherever we are sent as has often happened with Medl. Officers of all three Establishments. I have never known of any opposition being raised by a Medl. Officer when ordered anywhere in or out of India. Under an old rule Medl. Officers of the Indian Medl. Service are enlisted for service in India but according to present rules they draw Indian pay and allowances wherever they are sent on duty and as long as this rule exists I imagine that any such order to proceed on such duties will be as welcome as it has been in the past.

Conclusion VIII. Would be very necessary but as a rule Officers should be sent to serve in the parts of India where most of their experience has been gained.

Conclusion IX. These proposals are but fair.

Conclusion X. I think the less changes that are made the better.

I have the honor to be,
Sir,

Yours most obedt. servant

Chittampel
Surgeon Major General
Surgeon General
with the Govt. of Madras

Public (1894) DEPARTMENT.

From

SURG. MAJOR-GEN. *W. F. DRAKE, M.D.*

SURGEON-GENERAL WITH THE

GOVERNMENT OF MADRAS,

Madras,

To

188
Endorsement n. 1239

Transferred to the Military
Department ~~with correspondence~~
~~Department of the Madras Government~~

No. 373

ENCLOSURES.

Dated

25 May 1894.

Recd.

Rep 28/5/94

No.

Encl. P.C. 1073
+ 1501 re. 1073

UNDER SECRETARY
27 MAY 94
SECRETARY

Kudrichhice

Chief Secretary
18 June 94

To the Military Dept
[with copy of note by the
Hon'ble Mr. Bliss. C. S. E.]

+ work

Subject.

Submits remarks
re. the amalgamation
of the three Indian
Medical Services

19/6

MILITARY (1894) DEPARTMENT.

Current Number. 3704

From

19 JUN 94
Public Department

No.

1239

Dated 18th

Received

Registered

Recd. by Ref. Dept.

Disposed of by do.

ENCLOSURES.

P.G., No. , dated

Transferring letter from The Surgeon General with the Govt. of Madras Submitting the remarks of that Officer on the proposed amalgamation of the 3 Indian Medical Services.

REQUESTED TO BE
RETURNED WITH REPLY.

Diary No. 748

Recd 22 JUN 1894

Branch.

Military Department
Cotacumun of the 21st June

No 3812

Referred for favor of the early remarks of His Excellency the Commander-in-Chief.

By order,

J. L. Wood Colonel
offg. Secretary to Government

The Principal Medical Officer, Madras
through Adjutant General.

36

Former papers

D 2204, D 3477
94 94

C 3364

P. 4 6. 6. 94 - 3488 A.
P. 4 17. 5. 94 - 2795 A.To England us 23
94

P. 4 29. 11. 92 - 6428.

" 12. 10. 81 - 5395.

" 24. 8. 81 - 4549.

" 18. 5. 81 - 2695.

" 20. 1. 81 - 330 A.

" 9. 2. 81 - 802 A.

" 3. 2. 81 - 647.

" 3. 2. 81 - 646.

" 13. 8. 80 - 5114.

" 8. 5. 80 - 2882.

" 1. 2. 81 - 1337.

" 22. 3. 79 - 1006.

P. H.

22 JUN 94

Heading.

Medical Department
Organization.

No. 1278

HEAD-QUARTERS, MADRAS ARMY,

Medical Division,

Cotacumun of the 21st June 1894.

From

Major T. Wood
SURGEON-GENERAL

PRINCIPAL MEDICAL OFFICER, H. M.'S FORCES IN MADRAS, Ceylon

To

THE

Secretary to Government.

Military Department

SIR,

Cotacumun.

With reference to your endorsement herewith returned. No 3812 dated. Cotacumun 21st June

1894 referring for the records of H. S.

The Commander in Chief letter from

the late & present Surgeon General with

the Government of Madras together

with Government of India Military

Department No 2849. dated Lord William

31st March 1894. I am directed to offer

the following remarks.

1. The conclusions provisionally arrived at by the Government of India in their Military Department No 2849.

have been dealt with in detail in

the present correspondence by the late
& present heads of the Madras Medical
Service as to the measures in which
they affect the Madras Government;
the future position of the Surgeon Major
General Madras, and of the officers of
the Madras Medical Service generally.

It only remains for H.E. to observe on
all the Conclusions as they
affect the Army and the proposed
abolition of the Presidency Commands.

Conclusion I. seems desirable
and necessary as all other military
establishments have been already
centralized under the Government of India.

Conclusion II, III, & IV. - It does not
seem to be within the Commission in
Chief's province to offer any remarks.

Conclusion V. H.E. agrees that the
Surgeon Major General Madras should
have no control whatever over existing
medical establishments of Madras
consisting of officers employed with
the Army or over the Reserve.

Conclusion VI. - This is only right &
proper. u p

Conclusion VII. - The remarks of
Surgeon Major General Pitt Rivers seem
worthy of consideration.

Conclusion VIII. It is presumed
that there will continue to be a
Presidency List of 18th Surgeon Lt.
Colonels to which only officers of
the Presidency will be promoted,
as otherwise the amalgamation will
affect the promotion of officers of the
Madras Medical Service injuriously.

Subject to this there can be no
objection to the Conclusion.

Conclusions IX, & X, are commended
in.

I have the honor to be
Sir

Your Most Obedient Servant

W. A. S.

Surgeon Major General
Principal Medical Officer
Madras Army.

Number of spare copies
sent to Government - 10

Military (1894) Department

Current No 4231

From

DM
13 JUL 94
THE PRINCIPAL MEDICAL OFFICER,

~~H. M. T. GORDON~~ IN MADRAS, Army

To

THE Secretary to Govt
Military Department
Madras.

Received 12th July 94
No 1278

13/7.
Madras, 10 July 1894.

Submits remarks
regarding the amalgamation
of the three Indian Medical
Services.

23812
24
P. 4 2.7.85. 3571 P
" 16.2.91. 988.
" 4.10.92. 6227.
" 25.1.93. 546.
" 18.5.94. 3035
" 2.6.94. 385 (Public)
" 19.5.94. 3082/3
" 24.5.94. 3193/4 P.
" 30.5.94. 2646 P.
" 18.6.94. 3739.

2,500-28-2-94.

urgent.

No. 4793.

Government of Madras.

GOVERNMENT OF
CHIEF SECRETARY
3. AUG. 1894
GOVERNMENT OF

MILITARY DEPARTMENT,

Madras, the 2^d August 1894.

the original notes of His
Excellency the Governor and
Honorable Members.

Retransmitted to the Public Department for
of early disposal, the Government of India having sent a
reminder.

2. The remarks of His Excellency the Commander
in Chief with reference to conclusions I, VI, VIII, IX and X
are concurred in in this Department.

3. This Department accepts the views of His
Excellency the Commander in Chief on Conclusion I
so far as regards the control over medical officers employed
with the Army or in administrations under the Govern-
ment of India, and over the reserve of 25 Per cent on
that number, being exercised directly by the Government
of India; the question of the authority which is to control the
reserve of 25 Per cent on the sanctioned number of medical
officers employed in the Civil Department, Madras, is
one for consideration in the Public Department.

4. As regards the future position of Medical Store-
keepers referred to in Surgeon Major General Sibthorpe's

letter of 25th May last, it is understood that all Medical
Store Depôts will on the abolition of the Presidential Army
System be under the control of the Government of India, -
the Surgeon General with the Government of Madras
corresponding with the Surgeon General with the
Government of India in respect to all matters con-
- nected with the management of the Medical
Store Depôts at Madras and Rangoon.

5. As regards the control to be exercised in future
by the Surgeon General with the Government of Madras
over the Subordinate Branches of the Indian Medical
Department in this Presidency, attention is requested
to the proposals of the Government of India as set
forth in Military Department No 3036. D dated 5 July
1854. This subject is at present under reference to the
Surgeon General with the Government of Madras.

Recd no. 11/11/11
+ copy enclosed

J. L. L. L. Colonel
offg. Secretary to Government

The Public Department
with original notes.

2224

Public Department

From

The Military Dept.

No. 4793

Dated 2/8 }
Recd 3/8 } 1894

Encl. - Pub. C No 1073,
1501 + 1601 returned

Subject

Regarding the amalgamation
of the three medical services
on the abolition of the Presidential
Army System.

Unification I.N.D.

The Currents.

Whether, the case, I should like to know, forwarding a file of this kind, by post, sending it by a special messenger, who waits for an answer? Am I to be supposed to dispose of an important portion of this int. while a man is waiting?

30/5/94

~~Young. Genl. Ed. Thorpe refers several
letters to the Army Regts, India,
Vol VI. Ind. - Missions~~
BR
11/29/94

The questions raised in the letter from India are of very great importance, affecting, as they do, the future efficiency of the civil medical adminⁿ in this ~~Presy~~ and the prospects of the ^{serving} officers of the Madras Medical Service, both of which this Gov^t is bound most carefully to cherish & protect.

I think the following is
 the most correct
 and the most
 correct
 and the most
 correct

When first studying the papers I was of opinion that the scheme of the Govt of India was ~~for~~ of doubtful expediency. It seemed to me that it would impair the control of this Govt over the civil and military administration, would deprive it of the power of maintaining discipline therein.

Currents 1501 & 1601

For orders as to the
remarks to be made
by the Public Dept:
when transferring
these two reports to
Military.

AD

23/5/54

28/v

I sh^d say the transfer to
Kutz could be made with
merely a copy of my note

ko

16/6/29

and would be highly inju-
dicial to the professional
prospects of the officers belonging
to the Madras Med. Service.

But after much consideration,
& after fully committing Surg. M.
Guth to the subject, I have come to the
conclusion that, subject to cer-
tain modifications, and on the
assumption, which I grant, that
the amalgamation of the three
Med. Services is a necessary
concomitant to the abolition of
the Presidential Army system,
it will not be unsafe to accept
the "conclusions" at which the
S. of India has arrived.

To take the "conclusions" se-
parately:—

(I) It should, I think, be stipu-
lated that the local S. of India should
retain its present ~~complete~~ powers
of complete control over the officers
employed in the Civil Medical
dept., so far as such control
is compatible with the general
departmental admin. by the S. of India.
As matters at present stand,
there are no limitations in
practice on the powers of the
local S. of India in regard to promotions
of Surg.-Lt. Col. to Brigade Surg.-
Lt. Col., of the latter to Surg.-Lt. Col.,
and of the latter to the rank of
Surg.-Maj. Genl., save the ceremonial
power, barely a necessity in such
cases, of the S. of India to
S. of India to overrule the local
S. of India. In future, it may be needed,
in cases of making promotions.

Proposed for the
S. of India

E

How: Mr. P. H. S. S. S.

carefully examined by the
S. of India. ~~It should be~~
S. of India will not, however, be
any means of knowing the
merits & qualifications of those
medical officers who are employed
in the Civil dept. under the S. of India
there will therefore be the greatest
probability of their just claims
being overlooked. Still, being
myself therefore in my opinion to the
fact that, before passing over,
the making of such promotions to the
ranks above named, any officer
in Civil employ, the S. of India will find
this fact an opportunity of going
the claims of such officers. Indeed
I am not sure that I would not
go further! The Med. officers in
Civil employ ~~from the~~ ^{number of the} ~~more than~~
~~enough~~ and think of the whole
body of the officers of the Madras
Med. dept. I think the S. of India might
be asked to undertake that, unless
fit men should at any time not
be forthcoming, i.e. if there are
third of the superior appts. to be
promotion is made by selection shall
always be held by officers in a
Civil employ. Without some such
stipulation there will be a grave
risk of injury to individual in-
terests and of consequent discontent
and of the inefficiency which is al-
most sure to follow in discontent.

at all times, and especially

Surg. Maj. Genl.	1
Col.	4
Brig. Sur. Lt. Col.	11
	<u>16</u>

Subject to these conditions —
that the powers of the Local S. of India over
the Civil Med. Dept. be maintained
and that arrangements be made
whenever the claims to promotion of
the Med. officers in Civil employ
will be fully recognized, the
"Conclusion" (1) may be accepted.

Then considered, I may say, that
we should also ask that the Surg.
Genl. should always be an officer
from the Civil Medical S. of India.
I think not. I would not even ask
that he should always be a
Madras officer. He might
be that we should

be examined before any
officer was appd. Surg. Genl.
here; and so reasonable
report would no doubt be
readily granted. But I don't
think we should ask for more.
~~Supposed~~ If there were at the
time of vacancy, an officer
of the Mad. Med. Svt. competent
to fill the appd. of Surg. Genl. &
sufficiently senior, I have little
doubt that the S. of I. would
appoint him. But I don't
know that it wd. be for the
advantage of the public ser-
vice that it should be the
rule that the Mad. Surg. Genl.
shd. ^{always} be taken from the Mad. Civil
Med. Svt. or even from the Mad. Med. Svt. As time goes on, & the
numbers of officers belonging to the
Mad. Med. Svt. decrease,
it will become increasingly difficult
to find among the remainder a
man fit for the appd. of Surg. Genl.
Even at present, if a sudden
vacancy occurred, it wd. be ne-
cessary, unpleasant at the best, to
search through the S. of I. to
find a competent successor to
Surg. Genl. Dithorpe.

(II) The words "in the present"
should be omitted from this con-
clusion. So long as there remain
in any office of the Mad. Med. Svt.
to service, I think they are entitled
of (unless unfit) to claim, & succeed
to the appd. of Surg. Genl., the maintenance
of which was one of the inducements
to them to enter the service.

(III) I don't think it matters in
the least whether the official designa-
tion of the officer (Surg. Major Genl.
in rank) at the head of the Civil Med. Svt.
is "Surg. Genl. with the S. of Mad." or
"Surg. Genl. of Civil Hospitals, Madras".
The latter, by the way, is the

(3)

old style of years gone by, or
nearly so. As to the officer's duties,
~~however~~ it is of no importance
whether he, or the Civil Surgeon
Genl. (or whatever he may be called)
controls the Med. Stores. ~~in~~
In either case, both Dept. (the
original & Civil) will draw their
medicines, & from the same stores.
It is a mere matter of convenience
which Dept. keeps the accounts
& bills the other Dept. for its
supplies. As regards the Med. Svt.
subordination, it seems to me
that the Civil Surg. Genl. must,
as at present, be responsible
not only for the discipline & of
those men who are serving under
him, but also for the recruitment
& education of the men who are
serving in the Med. Svt. The latter Dept. wd. in-
crease year by year, however many
recruits would be required to
join the Civil Dept. ^{there} (or
is it four?) years ^{later}; & the
Civil Surg. Genl. wd. select &
educate them & then make
them over. I don't think the Govt.
of India will distribute the
recruitment & education of sub-
alternates among the different
provinces. This point should
however be mentioned.

Secy: to S. G.

(IV) Entirely agree with Dr.
De Z. & S. that a Secretary
is essential - indeed, better
perhaps is now allowed & the
Secretary should be provided
in the future, so that there
may be no impediment to
the execution of the office by a
Surg. Major.

(V) The Civil Surg. Genl. should take
charge of newly arrived Surg. Lts &
put them into the Surg. Hospitals.

I learned their work & read
 the languages for six months
 or so, according to ~~their~~
 proposals (or rather Dr.
 de F.'s, with which I find
 Dr. S. fully agrees), which
 are now before India. He
 will also be entitled to
 retain the 10% reserve
 which has recently been
 suggested (vide India letter
 in the file [at the top]), the
 S.G.'s consent to the proposals
 in which was in circ. the
 other day). This 10% reserve,
 by the way, must not be taken
 as meant to meet ~~vacancies~~
 from leave among the med. officers
 in civil employ, which run to
 25% ^{or more} on the number of appts
 to be filled. It merely must be
 taken to mean that when men
 transferred to civil employ
 are temporarily without speci-
 fic appts, they may be retained
 in civil employ, up to the limit
 of 10%, while waiting for vacancies
 in civil employ, in which they
 may again be employed, &
 need not, as at present, be
 formally re-transferred to mil.
 while so waiting. Such cases
 will not, however, be numerous,
 & the limit of 10% will rarely, if
 ever, be reached.

4) I would enlist all future
~~to~~ general ~~in~~

distributing them however,
among the Pres cies in the
the same way as is now done
with selected candidates
for the ~~the~~ Indian C.S., so
that, while ^{the required} ~~the~~ supply
may be kept up in all
parts of the country, no one
part may get a monopoly
of the mine at the top of
the list of successful ~~and~~
competitors.

(X) There should, I think, be a provision that (cases of unfitness for promotion excepted) the administrative appointments (and Commure in the rank of Brigade Surg. Lieut. Col. should be distributed among the officers of the three Presidential lists in the same proportion (as possible) as among the

	Comp.	Med.	Phys.
g. Major Genl	1	1	1 = 3 ^x
g. Colonel	9	4	3 = 16 ^o
g. Surg. Lt. Col	21	11	9 = 41
	<u>31</u>	<u>16</u>	<u>13 = 60</u>

prospects of the officers of
Madras Med. Service, & may
therefore be accepted.
Should there be, however, any
objection to this point, there is another
launch which has occurred & may
be the end in view could be
secured, no doubt at some
small increase of expense. This
follows:— I can make out, the

as follows:-
So far as I can make out, the
total number of Civil Medical Of-
ficers in the Presy (counting
instruments in the Presy (counting
therein list I Civil Stations only)
is 45, which must be added 2
for the new appts in the Genl Hospital
which will be needed when the W.O.
C. Hospital is transferred there
and the proposed new professional
hospital arrangements carried
out, one patient in each of the
~~Civil Medical Officer~~
~~stations~~. The total
will then be 47. Add 11 as reserve
at 25% and we get 58.

will then be 1/4 get 58.
at 25% and we get 58.
I would, I think, split the
fort perfectly well if then 58 officers
were handed over to it, in full, it
might seem, full remained, subject
but undertaking body, they would
occurred in, the transfer of officers
be filled by the transfer of officers
from the
to such going Capt.) from the
to such going Capt.) from the

The papers regarding this scheme
went to the D. P. I. some time back
& I don't know if they have
been returned.

(51)

promotion would be needed
straight be secured, in the
cases stated, at small increase
of cost, thus: - The number
of civil med. officers ~~based~~
retained under this fort being 58,
there would remain 101 to pass
under the direct control of
the J. of P. of the 58, namely
(the J. of P.) wd. be of the administrative
grade; of the 101, four (the four
Surgeons) would be of that grade.
As 58 is a good deal more than one
third of the total (159) this ~~to be~~
division of the adms. appt. wd.
not be equitable; the civil branch
would clearly be entitled to one
Sur. Colonel, with its extra
pension of £250 p.a., and as
the fort of India have lately
been contemplating that four Surg.
Cols of the Madras Med. Service
are not needed for military duties,
it may be assumed that one
appt. of this rank could be
spared for transfer from ^{the} mil.
to the civil branch of the Service.
Let this be done and it would
then be possible to restore the appt.
of Sanitary Commr. to its former
position as an adms. appt.,
which is what it actually
is - The only objection ~~to this~~
that I can see, would be ~~that~~
the ~~salary~~ ^{pay} of the Sanitary Commr.
Rs 1200-1250-1500, is not
suitable to an adms. officer.
This is so. Its average, however,
on the usual system of calcu-
lation is Rs 1600, a only Rs.
200 below the usual rate
(Rs 1800) of the pay of a
Surg. Col. All, therefore, that

would be needed to restore the
 appt. of San. Comr. to his former
 admsn rank would be an
 addl expenditure of Rs 200
 p. m. which, with the accom-
 panying addl pension of £250
 p. a. would leave the ^{proportion of the} Madras
 head. officers now in civil employ
 in practically their present, or
 perhaps in a slightly ^{better} position. That is, 56 officers in the
 Civil dept. would have 2 admsn
 appts on Rs (2500 + 1800) 4300, with extra
 pensions of £ (350 + 250) 600, to look
 forward to, while 98 officers in
 the mil. dept. would have 3 admsn
 appointments on Rs (3x800) 2400,
 with extra pensions of £ (3x250)
 750, to reward their exertions +
 a certain chance of the appt. of
 Surgeon Genl. to an Army Corps.
 The Govt. of India might argue
 that so small a dept. as the
 Civil Medical does not need
 so expensive a head as a Surg.
 Genl. on Rs 2500. But I could
 not immer with such a view. (The
 dept. is a most important one
 & every day grows more important,
 in relation both to expenditure
 and to the staff employed. It
 might also be argued that the
 work of the San. Comr. is not suf-
 ficient to warrant his having
 Rs 1800 p. m. with admsn rank
 at the prospect of an addl pension
 of £250 p. a. - To this the answer
 is simple. The S. G. has much
 more inspection work than he
 ought to get through, than it would
 be possible for him to accomplish
 if he travelled 6 months every
 year. Let the San. Comr. be where
 the Imp. Genl. of Hospitals and
 assist the S. G. in his inspections
 of Hospitals, & make plans & have sketched
 I believe such a plan & work exceedingly well - J. J.
 18/6/94

In this Presy attached,

C. No 1073, 1501 & 1601

Recd. No. 1239 dt 18th June '94

I referred to the Military
 Dept. (with copy of note by the
 Hon. Mr. Blair C.I.E.) -

Note by the Hon. Mr. Blair C.I.E.
 dated 16th June 1894

The questions raised in the letter
 from India are of very great
 importance, affecting, as they do,
 the future efficiency of the Civil
 Medical Administration in this
 Presidency, and the prospects of the
 existing Officers of the Madras
 Medical Service, both of which this
 Government is bound most carefully
 to cherish and protect.

When first studying the
 papers I was of opinion that
 the Scheme of the Government of
 India was of doubtful expediency.
 It seemed to me that it would
 impair the Control of this
 Government over the Civil
 Medical Administration, would
 deprive it of the power of main-
 taining efficient discipline
 therein, and would be highly
 prejudicial to the professional
 prospects of the Officers belonging
 to the Madras Medical Service.
 But after much Consideration, and
 after fully Consulting Surg. Major
 General Sibthorpe, I have come to
 the

the Conclusion that, Subject to certain modifications, and in the assumption, which I fear, that the amalgamation of the three Medical Services is a necessary Corollary to the abolition of the Presidential Army System, it will not be unsafe to accept the "Conclusions" at which the Government of India has arrived.

To take the Conclusions Separately

(I) It should, I think, be stipulated that the local governments should retain its present powers of complete control over the officers employed in the Civil Medical Department, so far as such control is compatible with the general departmental administration by the Government of India. As matters at present stand, there are no limitations in practice on the powers of the local Government in regard to the promotions of Surgeon Lieutenant Colonels to Brigadier Surgeon Lieut Colonels, the latter to Surgeon Col, and of the latter to the rank of Surgeon Major General, save the reserve general

general power, scarcely or never exercised, of the Government of India and the Secretary of State to overrule the local Government. In future, it may be conceded, this power of making promotions can only be exercised by the Government of India. The Govt of India will not, however, have any means of knowing the merits & qualifications of those Medical Officers who are employed in the Civil Department under this Government, and there will therefore be the greatest probability of their just claims being overlooked. It will be necessary, therefore, in my opinion to stipulate that at all times, and especially before passing over, in the making of promotions to the ranks above named, any Medical Officers in Civil employ, the Government of India will give this Government an opportunity of making the claims of such Officers. Indeed, I am not sure that I would not go farther. The Medical Officers in Civil employ number rather more

more than one-third of the whole body of the officers of the Madras Medical Department. I think the Government of India might be asked to undertake that, unless fit men should at any time not be forthcoming, not less than one-third of the Superior appointments, to which promotions are made by Selection, shall always be held by officers in or from Civil employ. Without some such stipulation there will be a greater risk of injury to individual interests and of consequent discontent and if the inefficiency which is almost sure to follow our discontent is not removed.

Subject to these conditions that the powers of the local Government over the Civil Medical Department be maintained, and that arrangements be made whereby the claims to promotion of the medical officers in Civil employ will be fully recognised. I think 'Conclusion' may be accepted. I have considered, I may say, whether we should also ask that the Surgeon General should always be

Surg. Maj. Genl	1
Col.	4
Brig. Surg. & Col.	11
	<u>16</u>

3 Sur 103 8883
1959

be an officer from our Civil Medical Establishment. I think not. I would not even ask that he should always be a Madras Officer. We might ask, I think, that we should always be consulted before any officer was appointed Surgeon General here, and so reasonable a request would no doubt be readily granted. But I do not think we should ask for more. If there were at the time of a vacancy an officer of the Madras Medical Establishment competent to fill the appointment of Surgeon General and sufficiently senior, I have little doubt that the Govt of India would appoint him. But I do not know that it would be for the advantage of the public service that it should be the rule that the Madras Surgeon General should always be taken from the Madras Civil Medical Establish-

ment, or even from the whole Madras Medical Establishment. As time goes on, and the number of officers, who belong to the Madras Medical Service decreases, it will become increasingly difficult to find among

among the ~~members~~ remainder
a man fit for the appointment
of Surgeon general & even at
present. As sudden vacancy
occurred, it would be necessary
as a glance at the list will show
to go a long way down to find
a competent successor to
Surgeon general Sibthorpe. (See
II) The words "for the present"
should be omitted from this
"Conclusion". So long as there
remain any officers of the Madras
Medical Service & think they are
entitled (in a sense) to claim
to succeed to the appointment
of Surgeon general, the existence
of which was one of the induc-
ements to them to enter the
Service. (III) I do not think it matters
in the least, whether the
official designation of the officer
(Surgeon major in rank) at the
head of the Civil Medical
Department is "Surgeon general"
with the Government of Madras
or "Inspector general of Civil
Hospitals, Madras Presidency".
The latter, by the way, is the
old

old style of years gone by, or
nearly so. As to the officer's
duties it is of no importance
whether he, or the Military Surgeon
general (or whatever he may be
called) controls the medical
stores. In either case, both
departments (Provincial & Military)
will draw their medicines &c
from the same stores. It is a
mere matter of convenience
which department keeps the
accounts and bills, the other
department for its supplies. As
regards the medical subordinates,
it seems to me that the Civil
Surgeon general must, as at
present, be responsible not only
for the discipline &c of those men
who are serving under him, but
also for the recruitment and
education of the men who are
wanted for service in the Military
Department. The latter depart-
ment should intimate, year by
year, how many recruits would
be required to join the Military
Dept. three (or is it four?) years
later; and the Civil Surgeon
general would enlist and
educate

them and then make them
over. No doubt the Govt. of
India will distribute the
enlistment and education of
subordinates among the
different provinces. This point
should, however, be mentioned.

(IV) I entirely agree with
Dr. De Saubert & Sibthorpe that a
Secretary is essential. Indeed,
better pay than is now allowed
to the Secretary should be pro-
vided in the future, so that there
may be no impediment to the
retention of the office by a
Surgeon major.

(V) The Civil Surgeon general
should take charge of new ships
arrived Surg. Lieut. & put them
into the general Hospital to
learn their work & read the
languages for six months or so,
according to our proposals (or
rather Dr. De Saubert's, with which
I find Dr. Sibthorpe fully concurs),
which are now before India.
He will also be entitled to retain
the 10% reserve which has
recently been suggested (vide
India letter in the file [at the top]
the

See P. 9. Part 385

2/1/94

the Surgeon general also assent
to the proposals in which
was in circulation the other day.
His 10% reserve, by the way,
must not be taken as meant
to meet vacancies from
leaving among the medical
officers in civil employ,
which number 25% or
nearly so, on the number
of appointments to be filled.
It merely must be taken
to mean that when men
transferred to civil employ
are temporarily without
specific appointments, they
may be retained in
civil employ, in which
they may again be
employed up to the limit
of 10%, while waiting for
vacancies in civil employ,
in which they may again
be employed and need
not, as at present, be
formally re-transferred
to Military while so
waiting. Such Cases
will not, however, be
numerous, and the
limit

limit of 10% will rarely, if ever, be reached.
 (VI) & (VII). I see nothing to object to in these conclusions.
 (VII). I would attach all future Surgeon Disbursers for general service in India distributing them, however, among the Presidentials in much the same way as is now done with selected candidates for the Indian Civil Service, so that, while the required supply may be kept up in all parts of the country, no one part may get a monopoly of the men at the top of the list of successful competitors.

(IX)

	Beng.	Med.	Bom.	
Surg. maj. genl.	1	1	1	= 3 x
Surg. Col	9	4	3	= 16 @
Bri. Surg. Lt. Col.	21	11	9	= 41
	31	16	13	= 60
Carry an additional pension of £ 350 per annum				after 5 years' service in the rank.
" " " " £ 250				

IX. Apparently there is an accidental omission in this "Conclusion": The words "and of Inspectors General of Civil Hospitals" should obviously be inserted after the words "Madras and Bombay" in order to make matters equal as between the officers on the three Presidential lists.

X. There should, I think, be a provision that (except in cases of unfitness for promotion excepted) the administrative appointments and Commissions in the rank of Brigade Surgeon Disbursing Colonel should be distributed among the Officers of the three Presidential lists in the same proportion (as nearly as may be) in the future as in the present, so long as any Officers enlisted under present conditions remain in the service. Otherwise it is obvious that Bengal might absorb an undue share of these superior appointments.

Given the amendments and assurances above suggested, I think the "Conclusions" of the Government of India will not be injurious either to the administrative efficiency of the Civil Medical Department, or to the prospects of the

the officers of the Madras Medical Service and may therefore be accepted. Should there be, however, any doubt on this point, there is another plan, which has occurred to me. Hereby the ends in view could be secured, no doubt, at some small increase of expense. It is as follows:

So far as I can make out, the total number of Civil Medical appointments in the Presidency (counting therein 1 Civil Station only) is 45, to which must be added 2 for the new appointments in the General Hospital which will be needed when the Women and Children's Hospital is finally transferred thereto, and the proposed new professional and hospital arrangements are carried out. The total will then be 47, add 12 as reserve at 25% and we get 59.

It would, I think, suit this Government perfectly well, if these 59 officers were handed over to it, in full, it may be said, of all demand subject to any undertaking that

that, as vacancies occurred in this body, they would be filled by the transfer of officers (say of the rank of Surgeon Captain) from the Military Medical Department, to which would belong (1) all Madras Medical Officers now employed both in the Military Department and also under the Government of India in the Political and Financial Departments and in Civil employ in Burma, the Contd. Provinces and elsewhere, as well as (2) all officers joining the Indian Medical Service in future years. It would however be asked to expect contentment and efficiency from a body of 58 Medical Officers, 57 of whom would have but one administrative appointment (that of Surgeon General) to look forward to as the reward of good work. Better prospects of promotion would be created and might be secured, in the circumstances stated, at small increase of cost, thus:—

The number of Civil Medical Officers retained under this Government being 59, there would remain 100 to pass under the direct control of the Government of India. Of the 58, one only (the Surgeon General) would be of the

The administrative grade, of the
10th rank (two four Surgeon Colonels)
would be of that grade Rs 58 in
a good deal more than one-third of
the total (659) this division of the
administrative appointments
^{not} would be equitable; the Civilian
branch would clearly be entitled
to one Surgeon Colonel, with its
extra pension of £250 per annum,
and as the Government of India
have lately been understanding that
^{four} Surgeon Colonels of the Madras
Medical Service are not needed
for Military duties, it may be
assumed that one appointment
of this rank could be spared for
transfer from the Military to the
Civil branch of the Service and
this be done and it would then
be possible to restore the appoint-
ment of Sanitary Commissioner
to its former position as an admin-
istrative appointment, which
is what it actually is the only
objection to this that I can see,
would be that the pay of the
Sanitary Commissioner, Rs 1200-1200-
1800, is not suitable to an
administrative Officer. This is so.
It

The average amount on the usual
system of calculations is Rs 1600,
or only Rs 200 below the usual rate
(Rs 1800) of the pay of a Surgeon
Colonel. All, therefore, that
would be needed to restore the
appointment of Sanitary Com-
missioner to its former administrative
rank would be an additional
subsidy of Rs 200 per annum,
which, with the accompanying
additional pension of £250 per
annum would leave the prospects
of the Madras Medical Officers now
in Civil employ in practically their
present, or perhaps in a slightly
better position. That is, 56 Officers
in the Civil department would
have 2 administrative appoint-
ments on an aggregate of Rs
(2500 + 1800) 4300, with extra aggregate
pensions of £(350 + 250) 600, to look
forward to, while 98 Officers in
the Military department would
have 3 administrative appointments
on an aggregate of Rs (3 x 1800) 5400,
with extra aggregate pensions of
£(3 x 250) 750, to reward their
exertions + a certain chance of
the

the appointment of Surgeon General to an army Corps. The Government of India might argue that so small a department as the Civil Medical does not need so expensive a head as a Surgeon General or Rs 2500. But I could not concur with such a view. In this Presidency at least the department is a most important one and every day grows more important, in relation both to expenditure and to the staff employed. It might also be argued that the work of the Sanitary Commissioner is not sufficient to warrant his drawing Rs 1800 per mensem with administrative rank and the prospect of an additional pension of £250 per annum. To this the answer is simple. The Surgeon General has much more inspection work than he ought to get through ~~that~~ it ~~could~~ be possible for him to accomplish if he travelled six months every year. Let the Sanitary Commissioner be made Deputy Inspector General of Hospitals and assist the Surgeon General in his inspections of Hospitals. I believe such a plan as I have sketched might be made to work exceedingly

[illegible]

Unification of the
Indian Medical Service

1st Lt. India
2nd Lt.

M. D.

FOR ORDERS.

Letter No.

Unification of Med. Dept

From G. India

No. 284 G dated 31. March 1894.

The letter of the Genl. India was referred to the Pub. Dept. on the 9th April and transferred to the Med. Dept. on the 19th June with letters from the Secy and present Surg. General with the Govt. of Madras & with a copy of a letter by the Hon. Mr. P. M. S.

It was then referred to H.E. the C-in-C under date 21st June and has not been returned by the P.M.O. Madras Army.

It is submitted that, as the points dealt with and the proposals made by the S. Genl. with the Govt. of Madras, and by the Hon. Mr. P. M. S. are almost entirely connected with the future civil ^{medical} administration, it would be correct and desirable, that after submission to H.E. the Govt. and the Hon. Mr. P. M. S. the papers should be transferred to the Public Dept. with a memo. containing the opinion of the Secy to the Med. Dept. on the one or two points connected with the Military Medical administration. It would then be referred to the Pub. Dept. to dispose of the reference of the Govt. of India which is primarily connected with the

approved
24/7

26/7/94

1 Aug.

FOR ORDERS.

Unification filed D. 24th

Current Number 2/22. of 94

H. E. ✓

The Hon. Mr. Grose.

See note on introduction of the

note

24/7

H. E. the Gen. notes make
found in the tabular note
prepared by the Hon. Mr. Grose.

Medical Department
: Organization

No. 1190

Ootacamund,

22nd June 1894.

FROM

THE OFFICIATING ADJUTANT GENERAL,

MADRAS ARMY.

To

The Assistant Adjutant General, Royal Artillery.

The Colonel on the Staff, Royal Artillery.

The Chief Engineer, Military Works Department.

The Deputy Judge Advocate General.

The Inspecting Veterinary Officer, Madras Army.

The Military Secretary to H. E. the Commander-in-Chief.

✓ The Principal Medical Officer, Madras Army.

The Quarter Master General.

(Through District.)

For necessary action and return.

✓ Forwarded for information.

Proceedings of a Court-Martial on

are returned.

Re-enclosed with reference to

Referred for favor of remarks.
report.

Returned as requested.

Return requested

Transferred for disposal

ELPHINSTONE BEGBIE, COLONEL,

Officiating Adjutant General.

C 13/7 C 20/7 C 25/7.
R 20/7 R 25/7. A 27/7.

1.20
 End

INDIAN TELEGRAPHS

Month.
 Number.

To (Office) *Madras* From (Office) *Government*
 Words *17.3* Day *1* Hour *14* Minute *1* Official Instructions *21 AUG 1904*

To (Person) *Chief Secretary* From (Person) *Asst. Secy*
to Government of India

Your telegram including 2/10/04

Recd. from *LN.* Sent to *LN.*
 Hrs. *11.45* Mts. by *11.45* At *11.45* Hrs. *11.45* by *11.45*
 S. P. Co.—No. 363T.—6-3-93—40.00,000.

001ACMUND 21-8-04

Heater



PROCEEDINGS OF THE MADRAS GOVERNMENT.

Read the following paper:—

Current No. 2378

Public DEPARTMENT.

From

Telegram

The Surgeon General

No.

Dated 21/8

Received 2/1/8

Red
Enclosures *2 2/8*

Received 21/8 } 1894
Recd 22/8 }
Enclosures

SUBJECT.

Stating that the number of Commissioned Medical officers for Civil appointments in this Presidency is 46 including two jail appointments.

617 PUBLIC.

T M E N T

THE GOVERNMENT OF
FORT ST. GEORGE,

GOVERNMENT OF INDIA,
MILITARY DEPARTMENT.

G., dated 31st March 1894, which was Local Military department on the 2nd ~~ed to forward~~ an expression of opinion Government of India on the proposed the abolition of the Presidential Army

~~2. In order to place the Government of India in possession of the individual papers of His Excellency the Commander-in-Chief and the present and late Sarons General, copies of the letters marginally noted are attached.~~

her reply are of very great importance, the Civil Medical Administration in this members of the Indian Medical department, the Government of Madras is of amalgamation of the three branches of the Corollary to the abolition of the Presidency at by the Government of India may provisions which are set out below. It will " *seriatim*."

take over the direct departmental administration of the Madras and Bombay Presidencies.

sal, this Government would stipulate that control over the officers employed in its school is compatible with the general departmental administration by the Government of India. The power of making promotions between the ranks marginally noted would rest with the Government of India, but as that Government would deal with the merits and qualifications of the Department, this Government is strongly before superseding an officer in the ranks unity of urging the just claims of officers Government that as the officers in civil employ one-third of the whole Medical department, appointments, to which promotion is made by

Notes

Notes
 4 found under the corner of the
 on the ground 2 ditto
 14 for small add.

Ditto
with two small additions at the end of
conclusion IV & para 9. 6

24 Aug

2/
scattered upon foot

...to

note
~~For orders~~ whether copies of these
letters should be sent etc.
If they should note this para will be struck
out of the original.

But and the late report
I should be decidedly against the admission
of any of these letters - B. & Faber's letter is of
none, even the others have treated the
matter in a very sketchy way, taking conclusion
by conclusion, but not treating the subject in
a broad & statesmanlike way. 1877

2

Handwritten signature: *Handwritten signature*

106 His Rectory

Madras

...employ, unless indeed fit and
 ...made in the interests of efficiency
 ...there would seem to be a grave risk
 ...discontent and inefficiency among
 ...regard to promotion to the rank of
 ...only request that it may be consulted
 ...sure that, considering the important
 ...will be readily conceded to by the

the Governments of Madras and
 present, retain their claim to rank, pay
 of Surgeon-Major-General, Madras or

"for the present" should be elimi-
 ngly that so long as there remain any
 department who are fit for the position
 ppointment of Surgeon-General, the
 to them to enter the service.

restricted to the exercise of the functions
 ctor-Generals of Hospitals in respect of
 ions in the Presidencies of Madras and

the official designation of the Surgeon-
 Department. In regard to the duties
 ention of the Government of India that
 ol, the Surgeon-Major-General commu-
 Government of India in respect to all
 depôts at Madras and Rangoon. To this
 ver the Subordinate Medical establish-
 ent letter, No. 3036-D., dated 5th July
 ernment of India will be held directly
 branches. This will not, however, in
 asibilities of the local Surgeon-Major-
 l establishments in this Presidency.

Major-Generals under the proposed scheme
 Civil Hospitals, the post of Secretary to
 should be abolished.

to this proposal which it is convinced
 at the sacrifice of efficiency and to the

been instituted by the Government of
 Inspectors-General and Madras as it
 ernment cannot believe that the details
 re before the Government of India and

Agency.	22
by the Surgeon-Major-	70 (about)
sidency town	8
.. ..	489
.. ..	19
.. ..	3
.. ..	2
ploy	57
.. ..	21
.. ..	24
.. ..	152
.. ..	333
It's office in 1892 ..	21,050
in 1893 ..	20,942

8

7/15/94
I am not sure whether it is intended
that this position of his note should be
included in the draft or not. *yes*

The G in C has no objection to being -
586 d/ 9-8-94 -
/the G & J's letter,

note
This is a preliminary account & it is the number of officers in
Civil appts and on leave with leave on
such appts as has last quarter Army/Post

H. List

...demonstrate the ~~absolute~~ necessity that
extended and frequent tours in order to
action it should be remarked that the
facilities for travelling by railway as
other parts of India. During his
the work of his office has to be left in
pointed out above result in serious
at head-quarters capable of dealing
being of them as they arise. It is also
be kept by a Commissioned Medical
Secretary's work could be done by a
much of it could not—such for example
the compilation of medical statistics
ssional subjects.

an officer of standing

...ment with the ~~absolute~~ necessity for
ty and experience that I am to submit,
t of India, that the pay of the appoint-
should not be fixed at Rs. 800 * as
ent, but should be so regulated so
enable a Surgeon-Major to hold the
pointment without loss of pay. At
ined the necessary experience to enabling
ent manner he receives rank promotion
to prevent loss of pay. This is of course
ment, particularly if his successor takes
eral on an extended tour.

...secretary to the Surgeon-General render
per and experience, and that he should
ulations and usages of the service. It
officer holds the appointment the more
he present consolidated pay, however,
an officer for any length of time, and
g the term of office of the late Surgeon-
of officers conducting the duties of his

as pointed out above

...sirable for a very junior officer to hold
ence with officers of high rank holding
h of it being of a confidential character.
cease to exercise any control over those
Madras and Bombay which are composed
erve of twenty-five per cent., the admin-
directly under the orders of the Govern-

...ese proposals, but considers that the
d of the Civil Medical Department
uld take charge * of newly arrived Sur-
n-Lieutenants and attach them to the
pitals at the Presidency town for six
maculars before they are detailed for
itary duty. He should also have
ontrol over the ten per cent. † reserve of
eers thrown temporarily out of civil
ploy, instead of their being at once
id be rare and the limit would seldom
rse be quite distinct from the twenty-
of the Government of India to meet
ices, &c.

in the opinion of this Post

rank or Presidency who, for the time being, is in the Civil or Military Department, should, if appointed to India for duty in any part of

this proposal, provided it is not put forward as above.

not consider it desirable to effect at once and would continue recruitment for the time being. The Secretary of State to warn all officers employed in the Presidency which they have the right to employ them in any capacities of the public service, and further to grant to the officers that although they will be bound to serve wherever they are

preferable to at once fix a date after which the Indian Medical Service. Surgeons should be appointed among the Presidencies in much the same way as while the required supply might be obtained by getting a monopoly of the men who pass

Colonels of the three Presidential Lists in the Presidencies or Provinces.

that the present number of Brigades in each Presidency should be maintained and the existing establishment have been increased. Officers would have good reason for objecting to existing appointments, which may be increased, and for which they are diligently

General with the Government of India, Bombay shall be open to Surgeon-Colonels according to seniority, coupled with ability to perform the duties of full-pay service in those positions, as provided in Volume I, Part I, of the India Act, 1919, extra pension of £ 350 a year. Surplus of the office of Surgeon-General

proposal so long as it is consulted before. It would, however, stipulate that no officer appointed to be head of the Civil Medical Establishment have been absorbed, and no officer considered competent by this Surgeon-General of Civil Hospitals" have the words "Madras and Bombay" in

as affecting the pay, pensions, furloughs, and Indian Medical Service, not incompatible with the service as hitherto.

210 16

For the - for the

Right

14 cases
to be

For the

and considered fit for this advancement

the most of
to attain which they look forward.

ould be a provision that—cases of unfit-
ness for promotion
excepted—the ad-
ministrative appoint-
ments and commis-
sions in the rank of
Brigade - Surgeon-
Lieutenant - Colonel
should be distributed
among the officers of
the three Presiden-
tial lists in the same

Bombay.	Total.
1	3 (a)
3	16 (b)
9	41
13	60

service in the rank.
do.

re as in the present, so long as any officers
the service.

alternative scheme for the future Civil
or the consideration of the Government of

appointments for Commissioned Medical
or the additional duties consequent on the
dren's to a wing of the General Hospital.
ould be 59. This Government would be
in full of all demands for civil adminis-
trancies occurred they would be filled up
rgeon-Captain from the Military Medical
bottom of the list. The 2 existing

the following officers:—

employed in the Military Department and
a in the Political and Financial Depart-
ma, the Central Provinces and elsewhere.
ical Service in future years and posted

consequent inefficiency which would be
y the one administrative appointment of
f good work, this Government would
nelcies—which it is understood the
requirements—should be transferred
Civil Department. This would
wo * administrative appointments
civil officers under this Govern-
as against three † for 97 military
s under the Government of India.
would be only a fair proportion.

sanitary Commissionership to its former
it actually is; and, with this object,
ing an additional expenditure of only

epartment would not require so expen-
I am to refer to the figures given in
f the duties of control and inspection
ivil Medical Department in this Presi-
ce in relation both to expenditure and
with the increase in the number of hospitals under his supervision, and with the increase
Commissioner's duties do not warrant
to suggest that as the inspection work
up—if efficiently performed—at least
sioner should be appointed Deputy

ness for promotion
excepted—the ad-
ministrative appoint-
ments and commis-
sions in the rank of
Brigade - Surgeon-
Lieutenant - Colonel
should be distributed
among the officers of
the three Presiden-
tial lists in the same

Hospital

recruitment would be made at the
bottom of the list, that is, that

for propose that

of 46 officers includes only 2 for the Tail
dept but this number will gradually
be increased to 4 - vide File: 2 Com:
dept. Ex: - 5362, d/ 11. Dec. 93. The
eventual strength will therefore be
4 + 2 + 2 + 2 = 10

as/-

with the increase in the number of hospitals under his supervision, and with the increase
in population.

NOTE
I think this shd. be
brought out, as there is
no doubt this increase
must be provided for. It is
idle to expect that the
civil medical expenditure
can remain stationary.

T. Rajagopal

geon-General of the work
his capacity as Sanitary
penditure incurred by the

ngly commend the alter-
favorable consideration of
he urge upon that Govern-
local officers when passing
Medical Department.

encour to be;

ir;

obedient servant,

Chief Secretary.

22/8/94

(cc)

Unification I.II

✓ The notes.

Welsh

pages but
better

Concurred in

W
JG

The administrative appoint
~~committee~~ ~~member~~ of the
did he distributed amongst of
of 3 has no other prospects as
present

If the amendments to the
have suggested are given the
scheme may be accepted

Another scheme would be as
follows:

The total no of Civil Med
appointments in List I is 45, 2
have been added for the Gen Hosp
the total will then be 47. With the
2-5 7, revenue it will be 58

These 58 men should be handed
over to the Gen Hosp. The other 20 take
that vacancies should be filled up
by European Captains, 1 for Military
Med Dept, as well as officers going
to the Med Dept in future years

If this is done better promotion
must be offered. Of the 58 men,
one only the 1st would be of administrative
Grade. Of the other 101 the 40
Cots would be of that grade. Hence
the Civil Branch would be established
by the European Colonelcy with its
extra price of £200 per annum
I could probably be spared for transfer
for Military service. Let this be
done that it be given to
Surrey Comm. Object is that
pay 1200-120-1000 is not high
enough. But an add. expenditure
of £1000 a month would remedy this
this would give him high pay which
he might be a dep. 2 of hospital

All known and officers now
employed in the Dept under
Govt in the East & Finance
Dept have Civil employ in
Burma, the Central Bureau
is known here

I like the proposal
too, but I doubt if
it will be accepted
of the 8-1.

W
JG
dearly in saying
the number against
them all though.
some in pencil
fair copy of my
which was sent to
W. Sept.

I approve most
cordially in the
hon. Mr. St. John's
alternative proposal.
59 being substituted
for 58. It being
distinctly understood
that commitment
should be made from
the bottom.

W
JG
26 July

26/7/94

8 of 3

Dr. Farnick

Luoth

VIII B Camp Limit Co
of 3 Presidencies who
are eligible for admin. posts
in any of the Presidencies
or provinces.

Dr. Farnick to S & G
who S & G & S Major G
in Madras & Bombay
open all Surgeon Colonels
as the 3 Pres. limits, but
they must serve 5 yrs
in those posts. The
study & was too long
with the experience
of £ 350 a year. They
will be eligible for
promotion W.S. & G.

I suppose the Madras
Chall will have 11 B & P
Lieut Colon eligible to
all existing privileges
Local Govt. and promote
to this grade subject per
haps to final result
of S & G. This will be
laid down precisely &
and is laid down that
the minimum number of
administrative posts the
held by officers now in
the Madras will shall be
ways be 4

I endorse proposal
strongly. Officers who have
served in other provinces
do not know the language,
the service in the
Madras will be of great
to those who are not
to work. Govt. and not
the Madras will have looked
forward to this place. They
get better promotion &
show that no accident
the Bengal has announced
service. They will prefer
the place in Madras to
that in another province.
The S & G could not judge
when the 3 Presidencies
generally the act the
will fall in a Bengal officer
a known man Madras
officers are said to be
eligible for S & G but
they will never be ap-
pointed. If appointments
must take place the
appointments of S & G will be
held by the 3 Presidencies
in rotation

Necessary
officers and
serve in the
Madras when
experience
is gained

The proper
fair.

Go 9

III The post of being
by the P. Major
- should be abolished

Dr. Fabrick

The number of our Civil
Med. Institute is really
in excess of those of
provinces we have been
confronted with. Other
things are not any Civil
Europeans but Capt. of
Darts & Sanitary offi-
cers. The hospital of
France has more diffi-
culty in travelling to
Morocco than to the
have to Europe.
During the absence of
the Chief Officer the
work must be done
by a Person who shall be
a professional to deal
with professional ques-
tions. Major Class Layman
who could deal with
or discuss questions
as much

Delay & inefficiency
and waste for necessary
refer to the in case
of leave, deficiencies,
problems

Not necessary now if
unemployed officers do
not exist in Madras

Any officer is wanted
to serve wherever sent by
and him I propose to
procure recruits in future

Lib 1

The Chief
more work
I. G. of hospital
Madras 182
we have had
70 Civil Hos-
pitals 19
of 3 the
2 Med Comd
Med War and
about Europe
Civil Hospital
Hospital at
Compendium
+ James 32
20942 the
be away for
by time. To
where a Civil
officer as
necessary

Necessary
10% of the
necessary time
in Civil Supp
left at disposal
Govt.

Necessary

A mistake
Proc. recruitment
present of the
who find the place
and be put in the
expended time
in duty on 28

V They should cease to
control officers and
pay in the Army as
the revenue of
25% & 8 of 2 had
control of the

VI Unemployed officers
of any rank or class.
Should be at disposal
of G. of I.

VII Recruitment for the 3
provinces may be
continued as at present
but candidates should be
warned that they may be
unemployed any where

II Madras & Bombay
S & S & their successors
and for the present who
claim to make pay &
pension & title

"For the present" vague
to Ambiguity as to
"rank & title". S & S make
Gen of Madras as a
title not a rank. Surg.
Major Gen is a rank
not a title. What should
be pay & pension of
future Inspector Gen
of Civil Hospitals if
change occurs? If it
does occur & the pay &
pension are affected the
Rank should be held by a
Madras officer. Inspector
Gen is absorbed

The title
as it is. There
is no doubt
the title. As
reduced to
Inspector Gen
he has to do
unfavourable
hospitals
Med. Gen
Inspector Gen
deals with the
is difficult
for S & S's use
Gen

III May and he instructed
to the function of Admin
Med. O. & Civil Inspector
General of Hospitals

he connected with I
as reports administered
to the S. & S. of hospitals
were under denotation
of S & S or Local Gen?
How will he stand with
regard to his
recommendation for
promotion when higher
grades?

As above

G of I 31 Mar 94

In conclusion with absolute
of the army by them
G of I recommended that
the military med depts
should be amalgamated
& placed under the O of
the force.

The C of State has
been involved a number
of Civil Medical Admin
to have the whole service
(Military & Civil) should
have a distinct head
on a different footing
for the European & Indian
med G of I

The conclusions pro
posed are as follows

1. G of I should have
direct administrative
of Indian med in Madras
& Bombay.

In Feb 17 May 94

The conclusions are
opposed to my observation
may have been suggested
numbered or concluded
where they are made
more distinct. Little
can be asked.

G of I should deal with
military admin but
not with civil admin.
He should be
instructed that all local
civil posts should be held
by Madras officers

Letter for 25 Mar 94

Reviewing of the conclusions
is carried out, that
it induces Madras G of I
posts of local G of I in
the Bengal M. The
local med service is a
whole the service is
a good but I doubt if it is
good as regards individual
officers of the Madras &
Bombay services

Walter 10 July 94

The conclusions
have dealt with by
the Subcom & the
as regards the way in
which the conclusions affect
the Madras G of I, future
posts of European & Indian
Madras, top medical
officers Madras C in
C has any influence
on conclusions so far
as they affect army
& boards of
military commands

Advisable to see
as all other military
establishments have been
localized

16 June 94

Subject Warbani no
duplicates, taking into
the amalgamation of the
& medical services is a
necessary condition
of the Indian Army the
conclusions may be accepted

It should be stipulated that
local G of I retains control
over Civil Med depts, so far
as such control is concerned
with the general depart-
mental admin of G of I

Promotion of S. Lt Col to
R.S. Lt Col, of B.S. Lt Col to
S. Col & of S. Col to S. Major
General should be left with G of I
but it should be stipulated that
this G of I shall have a previous
opportunity of voicing his claims
of his division also, perhaps this
it should be stipulated that if
few more are for the same not in
the 1/3 of selected superior ap-
ointments should be held by officers
in or from Civil employ

We should not ask that the
should be asked that the

1. I do not suppose it worth while disputing the advisability or otherwise of one general
list for the Indian Medical Service - so it follows as a matter of course on the
centralization of the whole Indian Army, etc. is now decided upon.
All that I think we should ask is that the "direct administration" of the officers
of the I.M.S. employed in civil work should be under the local Govt with whom they are employed.
This is not clear from the wording of conclusion I.

I think we must stipulate for G of I to have
a previous opportunity of voicing his claims of
undesirable before promotion or appointment
by the Hon Sec. Sec. J. G. 15

Watch

Drum

no necessity

rank into

each

the of an

hospital

under the

division

up to

if he

he will

be asked

in other

This in C does not
consider it within
from a to officer
remarks

as above

side 89
the 2nd
to 303 5 7 5
2
now under
in the 4th

we we should ask how much
any officer was appointed.
number in the medical line
will diminish. Even now
it will be difficult in case of
vacancy to find a suitable
replacement

For the present and as
of II. So long as there are
any officers of the medical line
they are entitled to promotion
to succeed as I say. They depend
upon when they enter the service

I thoroughly accept the hon. Mr. Byles' view.
So do I
EG

The designation of the chief
officer does not matter. His office
importance whether he is the
Principal Surgeon General or Medical
Director. The medical chief must
be responsible for discipline, over-
sight of the medical department
service whether wanted for civil or
military duties. The military department
will make a number of requests
wanted Civil G. S. and what he
has to say, the G. S. will
doubtless be satisfied with the
education of subordinate and
among the different branches he
must be noticed.

I agree to
EG

Watch

As above

have and
a more
No of
superior
breeds
in studies
power
also a
one of the
57
21
24
152
333

Receipts
150 23
has to
for a
proper
to call
reasonably
of 1000
is
in 1000
to be
weal

HE agrees as regards
existing and about
in Army

v. I agree with
this
w
So do I
JG

Right & proper

Littlebury's remarks
are good.

Notes

re. Littlebury is concerned in
and he is more important than
a Surgeon Major or might hold the
post

This point will have to be considered.
The 2. Surgeon Genl. have given very good reasons
for retaining the Secretary.
Their arguments shd. be reproduced and
stress shd. be laid on the importance of
difficult pay being given, so as to enable
the post to be held by a Surgeon Major.
Recent events have convinced me of the
importance of this. I did not previously attach
so much weight. The lengthened absence of
the S.G. necessitated by his tour and inspection
in a country but ill supplied by railways
shd. be dwelt on.

JG

The S.G. shd. take charge of new
Surgeon Genl. & put this into General
order as to leave work circumstances
for 6 mos or so. He shd. also control
his 1072 reserve. I must not interfere
as much as I have done to leave
to arrange his officers in Civil
employment. He was to 1072, namely 20
He must be taken that 1072 may be
kept working in Civil employ, not
transferred to Military employ.
I see nothing to object to.

I wd collect future Surgeon Genl.
for general review & distribute this
among the 1000 Americans who had been Civil
Surgeons. So that no one may get a
monopoly of the highest rank.

in order
to
of
in
him

Watch
There should be a
Providence but as
otherwise his as-
malgamas will appear
his promotion of
Madras appears in
provisionally

Continued in

This seems to me all we
can stipulate for.
JG

+

Bills

No objection

Yes - but we should press for the proportion
allotted to Madras being kept up -
until all the officers at present on
the list are absorbed. It would be very
unfair if the present officers were not
to be allowed to obtain these - the
plumes of their profession - & towards
wh. they are anxiously looking. In future
years, they can do as they like.
I agree with Mr

JG

Report Madras to Bombay
words that are necessary to be kept
inspection General of Police, Madras

I have no objection - so long as the local
posts are consulted first.
I am inclined to agree with S. G. de Sabeck, as
if we are saddled with an S. G. absolutely
new to the Presidency, I fancy he would
make but a poor adviser to the Govt. on
medical affairs. Still his arguments
might be taken to read the other way - &
India might say, the same - viz. that as
local S. G. would be only provincial in
his knowledge & views, & w. therefore
be incapable of accepting the post of S. G.
to the Govt. of India.

I think we might say that we have no
objection, but think that no outsider
shd. be appointed S. G. to the Govt. of Madras,
until the present officers are absorbed,
always provided that there is on the list
an officer considered competent by the Govt.

Log 2

just garden as to
from from
rights privileges of the
to members who
have no other down
in force

member

Dr. Tuback

Ex 11

They are incomplete
into no other

The power
are made

The scheme involves
the appointment of
members and officers.
There was a committee
of 3 medical officers &
2 civilians appointed
as to President. The
majority of medical and
officers who appear to
have special knowledge
of the advantages of the
unification scheme

24TH AUGUST 1894

PUBLIC DE

LETTER—from

THE CHIEF SECRETARY

To

THE SECRETARY TO THE

SIR,

I am directed to reply to letter No. finally transferred to this department by August, in which this Government is requested on certain "conclusions" arrived at by unification of the Indian Medical department system.

and
d/
~~From the Principal Medical Officer, Madras Army, No. 1278, dated 10th July 1894.~~
~~From Surgeon-Major-General W. F. Ho-~~
~~Esbeck, No. O 98, dated 17th May 1894.~~
~~From Surgeon-Major-General C. Sibthorpe,~~
~~No. 373, dated 25th May 1894.~~

2. 8. The questions raised in the letter affecting, as they do, the future efficiency Presidency, and the prospects of the existing service in it. After careful consideration opinion that, taking it for granted that the Indian Medical department is a necessary part of the Army system, the "conclusions" be safely accepted subject to certain modifications. It is convenient to remark on the various

I. That the Government of India should consider the Indian Medical Service in the

While concurring generally in this, it should retain its present powers of control over the Civil Medical department, so far as such

Surgeon-Lieutenant-Colonel to Brigade-Surgeon-Lieutenant-Colonel to Surgeon-Colonel to Surgeon-Major-General.

not have the means of becoming acquainted with the officers serving in the Madras Civil Medical Department. It is of opinion that at all times, and especially in times of emergency, it should be given the opportunity of being consulted on all matters of importance. It further appears to this Government that in this Presidency number rather more than one-third of the superior

I should say 'as' as/
/by id

W. S. S. S.

	Bengal.
Surgeon-Major-General	1
Surgeon-Colonels	9
Brigade-Surgeon-Lieutenant-Colonels ..	21
Total ..	31

proportion, as nearly as may be, in the f
enlisted under present conditions remain

5. The present number of sanctioned Officers is 25. To this must be added to approaching transfer of the Women and With a reserve of 25 per cent. the total ~~satisfied if 50 officers~~ ^{summed the} ~~be handed over~~ ^{be} ~~tration, subject to an undertaking that as~~ ^{be} ~~by the transfer of officers of the rank of~~ ^{be} ~~Department, recruitment being made free~~ ^{be}

(1) All Madras Medical Officers under the Government of Madras, and in civil employ in

(2) All officers joining the Indian to this Presidency.

7. In view to obviate the discontent and caused had these 60 Civil Medical Officers Surgeon-General to look forward to as a proposal propose that one of the Military Surgeons Government of India considers to be in ex-

* Rs. 2,500 + 1,800 = 4,300 with extra pensions of £350 + 250 = 600.

† Rs. $1,800 \times 3 = 5,400$ with extra pension
of £ $250 \times 3 = 750$.

It would then be possible to restore the status of an administrative appointment, the pay would be raised to Rs. 1,800, Rs. 200 *per mensem* at the most.

9. In case it might be urged that so small a head as a Surgeon-General on Rs. 2 paragraph 3 (iv) *supra* which convey an which are expected from that officer. The tendency is a most important one, and its imp to the staff employed is continually incre-

40. Should it be considered that the Sanitary Commission's drawing the pay of a Surgeon-Colonel, of the Surgeon-General is so heavy as to six months of each year, the Sanitary Co

NOTE
For 46 vide telegram
in Bureau 2378 -
The details are -
Surgeon Genl. _____ 1
Secy to S.G. _____ 1
Sanitary Commr. _____ 1
Hyg. Commr. _____ 1
Secy to H.E. the Govt. _____ 1
Medl. College appts. _____ 9
Residence Surgeons _____ 4
Sanitary Inspectors _____ 1
Physician to H.H. the
Maharaja of Travancore _____ 1
Civil Surgeons _____ 24
Rail Dept. _____ 2

to make account from
building today captures
the figure 10

annually /
receiving 9

VI. That all unemployed officers of whom being, are not filling sanctioned appointments while so unemployed, be at the disposal of the India or its dependencies.

21 The Government sees nothing to object in force in reference to the ten per cent. rule.

VII. That though the Government of India once a complete unification of the Medical Service in three Presidencies as at present, it is proposed that future candidates that, though ordinarily they elect or are attached to, the Government of other Presidency or Province according to the that a clause should be inserted in the commission that may be allotted to a particular Presidency the required to serve.

It appears to this Government to be for which recruitment should be for one general Lieutenants on appointment should be distributed the same way as Indian Civil Servants are maintained in each case, no Presidency should be highest at the examinations.

VIII. That Brigade-Surgeon-Lieutenants shall be eligible for Administrative posts in and

The Government is strongly of opinion that Surgeon-Lieutenant-Colonels allotted to the reserved for its officers, until all those are absorbed. It seems to this Government the discontent were they deprived of any of the ~~looked upon as the plums of their professional working.~~

IX. That promotion to the offices of Surgeon-Major-General in Madras and on the three Presidential Lists, to be selected and merit; but they must complete a tour of including eight months' furlough under Article Army Regulations, before becoming eligible for Surgeon-Major-Generals will also be eligible for with the Government of India.

The Government has no objection to the any appointment to this Presidency is made officer from another Presidency should be Department until the officers now serving always provided that there is on the list Government. The words "and of Inspector" apparently been inadvertently omitted at this "conclusion."

X. That all existing orders and regulations, promotions, rights, and privileges generally of with the foregoing proposals, should remain in

1200 selection, should be held by officers taken
suitable men/were not forthcoming. This
and good order, as without some such guar-
of injury to individual interests and of con-
the officers of the Civil Medical Department
Surgeon-Major-General, the Government w
before any such promotion is made, and it
local interests involved, ~~in many cases~~
Government of India.

27 II. That the present Surgeon-General
Bombay and their successors in office should, for
and pensions under existing rules and to the
Bombay.

The Government considers that the w
nated from this "conclusion." It feels ver
officers of the existing Madras Civil Medic
they are entitled to claim to succeed to t
existence of which was one of the induceme

III. That these officers should in future
of Administrative Medical Officer and Civil
the Civil Medical Staff and Civil Medical Ins
Bombay.

This Govt. attaches ~~no~~ special importance ~~need be attached~~
Major-General at the head of the Civil Med
of that officer, it is understood that it is the
all medical store depôts ~~will~~ be under its co
nating with the Surgeon-General with t
matters connected with the management of

In regard to the control to be exercise
ments, it is observed from Military Depar
1894, that the Surgeon-General with the
responsible for recruitment for the milit
any way affect the existing duties and re
General in regard to Civil Subordinate Me

IV. That since the duties of the Surge
will be the same as those of Inspector-Gener
the Surgeon-Major-General in each Presiden

This Government is strenuously oppos
could only be carried out in this Presiden
detriment of the medical administration.

It seems probable that a comparison
India between Provinces already under C
would be under a similar head. But this
should on which such a comparison ~~could~~ be bas
the following figures are therefore furnish

Madras

Civil districts
Large towns which should be insp
General
Civil hospitals under his control at th
Do. in the rest of the Presi
Police hospitals
Lunatic asylums
Medical Store depôts
Commissioned Medical Officers in Civil
Medical Warrant Officers in Civil em
Assistant Surgeons
Civil Apothecaries
Hospital Assistants
Receipts and issues in the Surgeon-G
Do. do.

1 of copy furnished

10

11. The alternative scheme

sketched in the preceding paragraphs
would cause a slight increase of expenditure.

And this Govt. is convinced that the
creation of the officers of the Madras
Civil Medical depôts into ~~independent~~
practically independent body, provided
with its own adequate arrangements
for the reward of merit, could not fail
greatly to ~~improve~~ ^{improve} the efficiency;
in administration, and that a slight
increase of expenditure would therefore
be fully justified. It therefore strongly
commends this scheme to the favorable
consideration of the Govt. of India.

23/8/94

Inspector-General of Civil Hospitals and
of inspection at ~~certain~~ stations which he
Commissioner, and thus obviate the waste of
double visit. ~~on these lines~~

15. In conclusion, the Government of Ma
native scheme sketched in the foregoing para
the Government of India, and would also
ment the necessity for respecting the interest
final orders on the scheme for the unification

23/8/94

(No 11)



Unification I.M.D.

*India has decided
to do it*

G.M. and ...

*See by C.
24/8/94*

24TH AUGUST 1894, No. 637, PUBLIC.

GOVERNMENT OF MADRAS.

PUBLIC DEPARTMENT.

READ—the following papers :—

From Colonel M. J. KING HARMAN, Secretary to the Government of India, Military Department (Medical Department—Organization), to the Secretary to the Government of Madras, Military Department, dated Fort William, the 31st March 1894, No. 284-G.

I am directed to state, for the information of His Excellency the Governor in Council, that in connection with the question of abolishing the Presidential Army System, the Government of India, in their despatch, dated the 2nd November 1892, recommended that the Military Medical Departments should be amalgamated and placed under the Principal Medical Officer, Her Majesty's Forces, as proposed in a draft General Order of 1888. In reply the Secretary of State observed as follows :—

“That order, however, deals only with Military Medical Administration, and it is evident that the amalgamation of the Bengal, Madras, and Bombay branches of the Indian Medical Service must also involve a revision of the Civil Medical Administration of the local Governments and of the Government of India. The latter was not dealt with in the draft order of 1888, which in statement F allowed for the saving caused by the abolition of the Surgeon-Generals, Madras and Bombay, but provided no substitute for the Civil Medical Administration, such as is allowed for the Governments of Bengal, North-West Provinces, &c.

“It seems also absolutely necessary that the Indian Medical Service, which is nearly twice as numerous as the Army Medical Staff in India, should have a distinct head on a different footing from that now held by the Surgeon-General with the Government of India.”

2. The Government of India pointed out that in the draft General Order of 1888 it was not proposed to abolish the posts of Surgeon-General with the Governments of Madras and Bombay, but those of the Surgeon-General, Her Majesty's Forces, Madras and Bombay, recasting the Military Medical establishment as therein laid down, with one Surgeon-General under the Commander-in-Chief, and a Surgeon-General for each of the four armies; but that the actual amalgamation of the three Indian Medical Services would undoubtedly involve a revision of the Civil Medical Administration.

3. The question of amalgamating the three Indian Medical Services and revising the existing system of Civil Medical Administration has been very carefully considered by the Government of India, and I am now to request that you will be good enough to move His Excellency in Council to favour the Government of India with a very early expression of his opinion on the conclusions which have been provisionally arrived at on the subject. These conclusions are—

(I) That the Government of India should take over the direct departmental administration of the Indian Medical Service in the Madras and Bombay Presidencies.

(II) That the present Surgeon-Generals with the Governments of Madras and Bombay and their successors in office should, for the present, retain their claims to rank, pay, and pensions under existing rules, and to the title of Surgeon-Major-General, Madras or Bombay.

(III) That these officers should in future be restricted to the exercise of the functions of Administrative Medical Officer and Civil Inspector-Generals of Hospitals in respect of the Civil Medical Staff and Civil Medical Institutions in the Presidencies of Madras and Bombay.

(IV) That since the duties of the Surgeon-Major-Generals under the proposed scheme will be the same as those of Inspector-Generals of Civil Hospitals, the post of Secretary to the Surgeon-Major-General in each Presidency should be abolished.

(V) That the Surgeon-Major-Generals should cease to exercise any control over those sections of the existing Medical establishments of Madras and Bombay which are composed of officers employed with the army, or over the reserve of 25 per cent, the administration of which should, in future, be conducted directly under the orders of the Government of India.

(VI) That all unemployed officers of whatever rank or Presidency who, for the time being, are not filling sanctioned appointments in the Civil or Military Department, should, while so unemployed, be at the disposal of the Government of India for duty in any part of India or its dependencies.

(VII) That though the Government of India do not consider it desirable to effect at once a complete unification of the Medical Services and would continue recruitment for the three Presidencies as at present, it is proposed to ask the Secretary of State to warn all future candidates that, though ordinarily they will be employed in the Presidency which they elect or are attached to, the Government of India have the right to employ them in any other Presidency or Province according to the exigencies of the public service, and further that a clause should be inserted in the commissions granted to the officers that although they may be allotted to a particular Presidency they shall be bound to serve wherever they are required to serve.

(VIII) That Brigade-Surgeon-Lieutenant-Colonels of the three Presidential Lists shall be eligible for administrative posts in any of the Presidencies or Provinces.

(IX) That promotion to the offices of Surgeon-General with the Government of India, and of Surgeon-Major-General in Madras and Bombay, shall be open to Surgeon-Colonels on the three Presidential Lists, to be selected according to seniority, coupled with ability and merit; but they must complete a tour of five years' full-pay service in those positions, including eight months' furlough under Article 689 of Vol. I, Part I of the India Army Regulations, before becoming eligible for the extra pension of £350 a year. Surgeon-Major-Generals will also be eligible for promotion to the office of Surgeon-General with the Government of India.

(X) That all existing orders and regulations as affecting the pay, pensions, furloughs, promotions, rights, and privileges generally of the Indian Medical Service, not incompatible with the foregoing proposals, should remain in force as hitherto.

No. 2204.

Referred to the Public Department.

FORT ST. GEORGE,
9th April 1894.

(Signed) D. J. S. McLEOD, Colonel,
Offg. Secy. to Govt., Military Department.

Endorsement No. 713.

Forwarded to the Surgeon-General with the Government for very early expression of opinion on the proposals contained in paragraph 3.

12th April 1894.

(Signed) J. F. PRICE,
Chief Secretary.

From Surgeon-Major-General W. F. DEFABECK, M.D., Surgeon-General with the Government of Madras, to the Chief Secretary to Government, dated Ootacamund, 17th May 1894, No. O-98.

With reference to your endorsement, No. 713, dated 12th April 1894, on letter from the Government of India, No. 284 G., dated 31st March 1894, herewith returned, I have the honour to offer the following remarks:—The skeleton draft, or as they are

called "provisional conclusions," are so scant in detail and open up so many possibilities, that to deal with the subject-matter fully and satisfactorily, I find, simply impossible. Such remarks therefore as I now offer must be considered subject to material amplification, revision, or retraction, on complete details of the scheme being disclosed. As I am on the eve of retiring from the service, Government will, I trust, agree with me that it is in every way advisable that my successor in the office (who will practically come under the working of the new scheme) should be called upon for his opinion on the letter under reference, as also any further communication that may be received (should Government think fit) on the subject of Indian Medical unification. Though the scheme proposes to deal not only with the amalgamation of the three Presidential services and the revision of the existing system of Civil Medical Administration little is said regarding the latter but what is contained in the first part of section 9, paragraph 3. To deal with the several sections of this paragraph 3 *seriatim*.

(I) It is not at all clear what is intended by this section. If the Government of India should deal only with the Military establishment, it appears to me consistent with what follows, but it is not in my opinion at all advisable that the Government of India should undertake the civil administration of the Madras Medical Service while the Local Government is competent to deal with it. It should be clearly stated that all local civil posts should be held by Madras officers. It may appear unnecessary to Government that such a proviso should be made, it being so self-evident, but I need only point to the instance of Residency Surgeon, Hyderabad, Civil Surgeons, Nagpore and Rangoon, to show how Bengal officers have absorbed the best and most coveted appointments formerly held by Madras officers and which in my opinion should still be held by them.

(II) The expression "for the present" is certainly vague, not to say paradoxical, dealing as it does with my successors in office. There is an ambiguity as regards the words "rank" and "title," "Surgeon-General with the Government" being a title not a rank and "Surgeon-Major-General" being a rank and not a title. Though it is stated distinctly that "for the present" the officer under reference shall retain his pay and pension under existing rules, no mention whatever is made as to what the pay and pension of the future "Inspectors-General of Civil Hospitals" will be hereafter. I infer that in the near future the head of the Local Medical Department will be styled Inspector-General, Civil Hospitals, if such change occur, and the pay and pension be affected (which appears more than probable) the Principal Medical Officer's post of the "Southern Army" should be held by a Madras officer until such time as those now on the list are absorbed. This would be but a reasonable compensation for the abolition of the most lucrative post in the department.

(III) This appears to be inconsistent with (I) so far as the question of administration is concerned. I would ask, is this officer (Inspector-General of Civil Hospitals) to be under the direct orders of the Government of India or the Local Government (which latter is apparently ignored), and in what relation will he stand in respect to the Local Government or the Government of India in respect to recommendations for the higher grades in the department?

(IV) A comparison is evidently made here between the Civil Medical Administration in the Provinces already under Civil Inspectors-General and that of the Madras Presidency. It is apparently taken for granted that the duties are equally extensive and similar in kind. Any such assumption would be erroneous. I believe I am correct in stating that the number of our Civil Medical institutions in the mofussil is vastly in excess of the Provinces referred to; as regards similarity in kind I need only refer to the fact that the District Surgeons of this Presidency embody in themselves not alone the duties of Civil Surgeons and Superintendents of Jails but also those of sanitary officers in general, vaccination, &c. As regards the "conclusion" that the post of Secretary should be abolished, it must be distinctly recognized that the Inspecting Medical Officer (Surgeon-General with the Government) does not enjoy the same facilities for travelling through the Presidency as are at the command of corresponding officers in the Northern Provinces (the same remarks hold good in the case of District Surgeons), the result being that during the absence of the head of the

department, a large portion of the year on tour the work of the office must be left in the hands of his Secretary, who must therefore be not only a professional man capable of dealing promptly with departmental questions and disposing of them as they arise, — duties which no layman can possibly be expected to perform satisfactorily. A high class layman might be competent to deal with ordinary questions, but practically there will be no saving to Government as regards pay, and a certain loss of efficiency would accrue.

(V) It is only too evident that much delay and inefficiency must result if this "conclusion" were carried into effect. Government are well aware the time it takes and the trouble it involves in keeping civil appointments filled. In cases of furlough or other leave, emergencies, epidemics, deaths requiring officers to be made available at short notice, application would have to be made to the Government of India which would lead to constant delay and confusion. There might not be any difficulty as regards officers "employed with the army." In respect to the reserve of 25 per cent. which is distinctly provided for local requirements, it should continue as at present at the disposal of the Local Medical Departments, Military and Civil.

(VI) Comparing this with the foregoing section of paragraph 3, its purport or necessity is not obvious, as practically in the Madras Presidency unemployed officers over and above the reserve do not exist.

(VII) There is something apparently behind this long section, so that without further information I am utterly at a loss to offer any opinion upon it. The conditions referred to have existed and are now in force, every officer being bound to serve wherever Government may call on him to do so. Taking this scheme as a whole (assuming the scheme of unification to be adopted), I would deprecate most strongly any Presidential recruitment of medical officers in future. Let all be enlisted from this time for a United Indian Medical Service. Officers in the Presidential services have claims on Government, having entered under certain agreements which cannot be lightly brushed aside, and to which candidates entering the service hereafter can have no possible claim. I am aware that all officers agreed to conform to such changes that may be made from time to time; but in equity, this condition cannot be applied properly to what practically amounts to the effacement of the local Presidential service, and the creation of a new one, be the change ever so gradual.

(VIII) I understand from this that Brigade-Surgeon-Lieutenant-Colonels shall be borne on their Presidential list as at present, that is to say, the Madras department to have its 11 Brigade-Surgeon-Lieutenant-Colonels recruited from the Madras service alone and eligible to all existing privileges. It is not stated under what authority promotion to this grade is to be effected. No system can be acceptable other than that now in force as the local authorities alone are capable of judging of the eligibility of officers for this rank. The final sanction of the Government of India might be admitted, but the power of selection should certainly lie as at present; but this should be laid down in far more precise and definite terms. Excluding the administrative officer holding the post of Surgeon-Major-General, Madras, or Inspector-General, Civil Hospitals, as he may be styled (of whom more hereafter) there does not appear to be any objection to the general spirit, as I read it, of this section. It is stated that Brigade-Surgeon-Lieutenant-Colonels are "elegant." This term is too elastic, and the interests of the local service are not sufficiently protected. It is absolutely necessary to have it *distinctly laid down that the minimum number of administrative posts to be held by officers now in the Madras list shall remain equal in number to those they now hold, viz., 4.*

(IX) With reference to the first part of this section which states that "Surgeon-Colonels of the three Presidential list" are eligible for the post of Surgeon-Major-General of Madras and Bombay I can speak with no uncertain sound. I have to say that so far as Madras is concerned I know no language strong enough to condemn this proposal. In the interests first of the public service at large, the proposal is as obnoxious a one as could well be made. For example, an officer who has spent his service, say in the Punjab amidst a Hindustani population amidst a people who are practically foreigners as compared with Dravidians, whose work is in many

important respects different from that obtaining in this Presidency, who is totally unacquainted with the respective merits of, and out of sympathy with the medical officers and subordinates of the Madras Presidency, who is unknown to the Local Government, may be appointed as Head of the Civil Medical Administration, Madras. Could he under any circumstances be as capable of carrying out his duties as an officer who has spent all his service in this Presidency, and is conversant with the customs and prejudices of the people, conversant with the abilities of and in sympathy with the officers and subordinates known to the Local Government?

There can be but one answer to this question, and that is a most emphatic negative. I would here mention that Madras officers have for some time looked forward to a unification scheme with no small alarm as affecting their promotion to the administrative grades. Madras officers on the whole have had a somewhat more rapid flow of promotion to the administrative grades than those of Bengal. For this reason many officers have elected Madras in preference to the other Presidencies; the generality of officers electing for Bengal on account of the very large number of its lucrative appointments, the varied character of its service (Political employ, &c.). It is not therefore to be wondered at that, when by a unification scheme the promotion in all 3 Presidencies is supposed to be equalized to the detriment of Madras, and without any compensatory advantages, that the medical officers of this Presidency should look forward to such a scheme with distrust and even despair. Turning now to the interests of the whole Madras Medical Department, any officer who has spent the whole years of his service in this Presidency, whose whole official and private associations have been connected with it, would naturally look forward to the possible time when he might reach the highest post in his department, and would prefer such a position in his own Presidency to a similar one in either Bengal or Bombay. Though there may be a strong but pardonable element of sentiment in this remark, it is no less strong. Again, how is the Surgeon-General with the Government of India—the official adviser of that Government—to hold the scales of justice impartially between the three Presidencies? His already extremely onerous duties, very much increased as they must be under the proposed scheme, must prevent his acquiring any but the most superficial knowledge of the respective merits of the officers of the Madras or Bombay Departments. I even assume to him a certain knowledge, which practically he cannot possess. Under these circumstances the knowledge of the points which should decide between three admittedly eligible men will be absent, and one can at once predict that the selection will fall in the majority of cases on a Bengal officer who has been long known to the Surgeon-General with the Government of India rather than on one of the Madras or Bombay Presidencies who is to him relatively an unknown quantity. It is unnecessary for me to point out to Government that those qualities which constitute administrative capability can only become known to those who are in constant official touch, and personally acquainted with the officers possessing them. How then is the Government of India to decide on the mere dictum of their official adviser, with regard to men whom he has probably never come in contact with and possibly never heard of. A point to be borne in mind is that the number of officers in the Bengal service is more than equal to that of Madras and Bombay united—by from 60 to 70 officers. As a set-off it may be said that under this section officers of Madras and Bombay services are "eligible" for the Surgeon-Generalship with the Government of India. I have no hesitation in saying that the chances of a Madras or a Bombay officer attaining this high post will seldom or never advance beyond eligibility.

Government will also note that although the Surgeon-Colonels of Bengal are eligible for the position of the Head of the Local Civil Departments, Madras and Bombay, that nothing is said about the eligibility of a Madras and Bombay officer for the corresponding promotion in Bengal. Public interests then, running hand in hand as they do with those of the whole department, will, I feel sure, induce Government to give its most strenuous opposition to the proposals under reference in their present form. I can foresee with certainty if these conclusions are adopted, so far as the interests of the Madras Medical Department are concerned, a grievous wrong will fall upon its officers. If unification must take place, the only equitable arrangement in my opinion

would be that so far as the Surgeon-Generalship with the Government of India is concerned, it should be distinctly laid down that this appointment shall be held in rotation (Presidentially) by the officers now on the lists who may in future hold the position of Surgeon-Major-General, Surgeon-Colonel or Inspector-General, Civil Hospitals, or whatever title or rank the Administrative officer may hold.

(X) All existing orders and regulations as affecting pay, promotion, rights and privileges so far as they refer to Madras are so incompatible with the proposals contained in the letter under consideration that it is impossible to take them into serious consideration, one and all of them being vitally affected. In conclusion, I have to say that the scheme amounts to the effacement of the Madras Medical Service and it is not too much to say the effacement of one of the landmarks of British domination in India. I would strongly urge in justice to my department this large and momentous question should be placed in the hands of a committee composed of at least three officers conspicuous for their ability and experience of the Madras Medical Service with two Civilians of this Presidency and with the Surgeon-General with the Government of Madras as its President. In this connection I would respectfully remind Government that in 1867, when the re-arrangement of appointments, pay, &c., of the Madras Medical Department was considered, a committee constituted on these lines was appointed. Much more important questions are now at stake—questions which I consider cannot properly be left to any individual officer to deal with and present his recommendations, be it either to the Local or the Supreme Government. As a retiring officer, the scheme cannot in any way affect me. I cannot, however, help feeling the greatest sympathy and commiseration for the officers now in the Madras Medical Department and that they whose interests are so vitally affected should in some way have a voice in the matter. I believe I am expressing the opinion of the officers generally of the department when I say that the majority of them would far prefer to have their existing privileges, &c., granted to them and endure such ills as may pertain to the "Benighted Presidency" rather than risk the shadowy advantages held out to them under this unification scheme. I can foresee such a change can only be injurious to the interests of the Public Service and the Madras Medical Department; calculated to cause discontent, distrust and despair, which must lead to confusion, delay and inefficiency, and which appears to me to be utterly impracticable.

No. 1010.

Forwarded to Surgeon-Major-General Sibthorpe for his remarks—to be submitted at an early date.

OOTACAMUND,
19th May 1894.

(Signed) J. F. PRICE,
Chief Secretary.

From Surgeon-Major-General C. SIBTHORPE, Surgeon-General with the Government of Madras, to the Chief Secretary to Government, dated Madras, 25th May 1894, No. 373.

With reference to your endorsement, No. 1010, dated 19th May 1894, on the file regarding the Government of India, Military Department, No. 284-G., dated 31st March 1894, to the Secretary to Government of Madras, Military Department, on the question of the amalgamation of the three existing establishments of the Indian Medical Service and the necessary revision of the Civil Medical administration, I wish to submit the following remarks:—

Conclusion I.—Necessary if the proposed amalgamation is to be carried out, by this will reduce the Madras Government to the position of the Local Governments, the Bengal Presidency—*vide* paragraph 27, Army Regulations, India, Volume VI, Medical. I consider the Government of India have determined to carry out this amalgamation as the Indian Medical Service is the last of the Military services formed of three establishments. All the rest have been already centralized under the Government of

India. For the Indian Medical Service as a whole I think the amalgamation will be to the advantage of the Public Service and the medical profession, but I am doubtful of the advantage to individual medical officers in Madras or Bombay of changing the personal knowledge of their Excellencies the Governors in questions of selection for promotion for the impersonal knowledge of His Excellency the Viceroy.

Conclusions II and III.—Yes, as regards their rank, pay and pension, but I consider the title should remain as it is; it has the sanction of custom for some years and is understood; there appears to me no necessity to bring in the military rank at all into the title of the office. I would strongly deprecate the reduction of the status of the Chief Medical Officer with the Madras Government to the position of a so-called Inspector-General of Hospitals. The administration of the hospitals is only one of his many important duties.

There will be ample work for the one officer under the proposed change, but what about the duties mentioned in Army Regulations, India, Volume VI, Medical, paragraphs 25 and 1117, regarding Medical Storekeeper and paragraph 235 regarding Medical Subordinate Establishment. If these duties are left on him he will be in a very different position from the Inspector-Generals of Civil Hospitals with other Local Governments.

Conclusion IV.—Please see note above. His duties will be much larger than any of the Inspector-Generals referred to. The number of Civil districts in Madras is 22. The number of larger towns which should be inspected by him is about 70. The number of Civil hospitals under his control in Madras is 8, up-country there are 489; Police hospitals 19; Lunatic Asylums 3, and 2 Medical Store Depôts; Medical Commissioned Officers in civil employ, 57; Medical Warrant Officers, 21; Assistant Surgeons, 24; Civil Apothecaries, 152; and Hospital Assistants, 333.

The correspondence passing through his office in—

							Receipts and Issues.
1892 amounted to	..	..	..	..	..	..	21,050
1893 do.	..	..	..	..	..	..	20,942

Considering how much of the time of the Head of the Medical Service must be passed away from his office on touring duty and that in this Presidency any way it is most desirable that all rosters of service should be kept by a commissioned medical officer, I consider the retention of a commissioned medical officer as Secretary absolutely necessary to the good working of the department. His place could only be taken by a lay officer whose pay would, if a desirable man's services were retained, be nearly as high as that of a medical officer and such a lay officer would be quite unfit to check requisition for medicines, deal with medical statistics or correspondence on professional subjects.

Conclusion V.—This would necessarily be accepted if Conclusion I was adopted.

The question of dealing with the reserve of officers by the Local Government to the extent of ten per cent. is referred to in the correspondence ending with my letter, No. 367, dated the 22nd May 1894.

Ten per cent. would be scarcely enough to meet all the temporary requirements of the Civil Department. If the Government of India has to be applied to it means delay, which may sometimes prove disastrous, not only to the officers concerned, but to the service. At least 20 per cent. should be at the disposal of the Madras Government, and this would save expense in transferring officers from one Presidency to another.

Conclusion VI.—This would, in my opinion, be necessary.

Conclusion VII.—This would, I consider, be a mistake. I think medical officers enlisted after a particular date should be on one list for General service in India but with a promise that, as far as the exigencies of the service permitted, they would be allowed to serve in the part of the country which they elected for after arrival in India; it would then be the duty of the Government of India to see that the available officers were fairly distributed to all the Local Governments so that the present system

of allowing the men who pass highest on the list to choose the parts of India where they wish to serve would to a certain extent be put a stop to and no part of India would then be condemned to take the men who pass lowest in the competitive examinations. I do not see the necessity of the proposed clause in our commissions which are now in "Her Majesty's Land Forces" and I take it, we are bound to serve wherever we are sent as has often happened with medical officers of all three establishments. I have never known of any opposition being raised by a medical officer when ordered anywhere in or out of India. Under an old rule medical officers of the Indian Medical Service are enlisted for service in India, but according to present rules they draw Indian pay and allowances wherever they are sent on duty, and as long as this rule exists, I imagine that any such order to proceed on such duties will be as welcome as it has been in the past.

Conclusion VIII.—Would be very necessary, but as a rule officers should be sent to serve in the parts of India where most of their experience has been gained.

Conclusion IX.—These proposals are but fair.

Conclusion X.—I think the less changes that are made the better.

No. 1239.

Transferred to the Military Department.

OOTACAMUND,
18th June 1894.

(Signed) J. F. PRICE,
Chief Secretary.

To the Military Department, with copy of note by the Hon'ble Mr. Bliss, C.I.E.

No. 3812.

Referred for favour of the early remarks of His Excellency the Commander-in-Chief.

(By order)

OOTACAMUND,
21st June 1894.

(Signed) D. J. S. McLEOD, Colonel,
Offg. Secretary to Government.

To the Principal Medical Officer, Madras Army (through Adjutant-General).

From Surgeon-Major-General T. WALSH, Principal Medical Officer, Madras Army, to the Secretary to Government, Military Department, dated Ootacamund, 10th February 1894, No. 1278.

With reference to your endorsement No. 3812, dated Ootacamund, 21st June 1894, referring for the remarks of His Excellency the Commander-in-Chief letters from the late and present Surgeon-General with the Government of Madras, together with Government of India Military Department No. 284-G., dated Fort William, 31st March 1894, I am directed to offer the following remarks.

2. The conclusions provisionally arrived at by the Government of India in their Military Department No. 284-G. have been dealt with in detail in the present correspondence by the late and present heads of the Madras Medical Service as to the manner in which they affect the Madras Government, the future position of the Surgeon-Major-General, Madras, and of the officers of the Madras Medical Service generally. It only remains for His Excellency to observe as follows on the "conclusions" as they affect the army on the proposed abolition of the Presidency Command.

Conclusion I.—Seems desirable and necessary as all other Military establishments have been already centralized under the Government of India.

Conclusions II, III and IV.—It does not seem to be within the Commander-in-Chief's province to offer any remarks.

Conclusion V.—His Excellency agrees that the Surgeon-Major-General, Madras, should have no control whatever over existing Medical establishments of Madras consisting of officers employed with the army or over the reserve.

Conclusion VI.—This is only right and proper.

Conclusion VII.—The remarks of Surgeon-Major-General Sibthorpe seem worthy of consideration.

Conclusion VIII.—It is presumed that there will continue to be a Presidency List of Brigade-Surgeon-Lieutenant-Colonels to which only officers of the Presidency will be promoted, as otherwise the amalgamation will affect the promotion of officers of the Madras Medical Service injuriously. Subject to this there can be no objection to the conclusion.

Conclusions IX and X are concurred in.

G.O., dated 2nd August 1894, No. 4793, Military.

Order—dated 2nd August 1894, No. 4793, Military.

Retransmitted to the Public Department for favour of early disposal, the Government of India having sent a reminder.

2. The remarks of His Excellency the Commander-in-Chief with reference to conclusions I, VI, VIII, IX and X are concurred in in this department.

3. This department accepts the views of His Excellency the Commander-in-Chief on conclusion V so far as regards the control over medical officers employed with the army or in administrations under the Government of India, and over the reserve of 25 per cent. on that number, being exercised directly by the Government of India; the question of the authority which is to control the reserve of 25 per cent. on the sanctioned number of medical officers employed in the Civil Department, Madras, is one for consideration in the Public Department.

4. As regards the future position of Medical Storekeepers adverted to in Surgeon-Major-General Sibthorpe's letter of 25th May last, it is understood that all medical store depôts will, on the abolition of the Presidential Army system, be under the control of the Government of India, the Surgeon-General with the Government of Madras corresponding with the Surgeon-General with the Government of India in respect to all matters connected with the management of the medical store depôts at Madras and Rangoon.

5. As regards the control to be exercised in future by the Surgeon-General with the Government of Madras over the subordinate branches of the Indian Medical Department in this Presidency, attention is requested to the proposals of the Government of India as set forth in Military Department, No. 3036-D., dated 5th July 1894. This subject is at present under reference to the Surgeon-General with the Government of Madras.

(True Extract.)

(Signed) D. J. S. McLEOD, Colonel,
Offg. Secretary to Government.

To the Public Department, with original notes.

LETTER—to the Secretary to the Government of India, Military Department, dated Ootacamund 24th August 1894, No. 617, Public.

I am directed to reply to letter, No. 284-G., dated 31st March 1894, which was finally transferred to this department by the local Military Department on the 2nd August, and in which this Government is called upon for an expression of opinion on certain "conclusions" arrived at by the Government of India on the proposed unification of the Indian Medical Department on the abolition of the Presidential Army system.

2. The questions raised in the letter under reply are of very great importance, affecting, as they do, the future efficiency of the Civil Medical Administration in this Presidency, and the prospects of the existing members of the Indian Medical Department serving in it. After careful consideration, the Government of Madras is of opinion that, as the amalgamation of the three branches of the Indian Medical Department is a necessary corollary to the abolition of the Presidential Army system, the "conclusions" arrived at by the Government of India may be safely accepted by it subject to the modifications set out below. It will be convenient to remark on the various "conclusions" *seriatim*.

I. That the Government of India should take over the direct departmental administration of the Indian Medical Service in the Madras and Bombay Presidencies.

While concurring generally in this proposal, this Government would stipulate that it should retain its present powers of complete control over the officers employed in its Civil Medical Department, so far as such control is compatible with general departmental administration by the Government of India. The power of making promotions between the ranks marginally noted would then rest with the Government of India, but as that Government would not

have the means of becoming acquainted with the merits and qualifications of officers serving in the Madras Civil Medical Department, this Government is strongly of opinion that at all times, and especially before superseding an officer of this Presidency in the ranks enumerated, it should be given the opportunity of urging the claims of officers concerned. It further appears to this Government that as the officers in civil employ in this Presidency number rather more than one-third of the whole Madras Medical Department, not less than one-third of the superior appointments, to which promotion is made by selection, should be held by officers taken from civil employ, unless fit and suitable men are not forthcoming. This proposal is made in the interests of efficiency and good order, as without some such guarantee there would seem to be a grave risk of injury to individual interests and of consequent discontent and inefficiency among the officers of the Civil Medical Department. In regard to promotion to the rank of Surgeon-Major-General, the Government would only request that it may be consulted before any such promotion is made, and it feels sure that, considering the important local interests involved, this request will be readily assented to by the Government of India.

II. That the present Surgeon-Generals with the Governments of Madras and Bombay and their successors in office should, for the present, retain their claim to rank, pay and pensions under existing rules and to the title of Surgeon-Major-General, Madras or Bombay.

The Government considers that the words "for the present" should be eliminated from this "conclusion." It feels very strongly that so long as there remain officers of the existing Madras Medical Department who are fit for the position, they are entitled to claim to succeed to the appointment of Surgeon-General, the of which was one of the inducements to them to enter the service.

III. That these officers should in future be restricted to the exercise of the functions of Administrative Medical Officer and Civil Inspector-Generals of Hospitals in respect of the Civil Medical Staff and Civil Medical Institutions in the Presidencies of Madras and Bombay.

This Government attaches no special importance to the official designation of the Surgeon-Major-General at the head of the Civil Medical Department. In regard to the duties of that officer, it is understood that it is the intention of the Government of India that all medical store depôts shall be under its control, the Surgeon-Major-General communicating with the Surgeon-General with the Government of India in respect to all matters connected with the management of the depôts at Madras and Rangoon. To this the Governor in Council has no objection to urge.

regard to the control to be exercised over the Subordinate Medical establishments. It is observed from the Government of India's letter, Military Department, 5036-D., dated 5th July 1894, that the Surgeon-General with the Government of India will be held directly responsible for recruitment for the military branches. This will not, however, in any way affect the existing duties and responsibilities of the Surgeon-Major-General in regard to Civil Subordinate Medical establishments in this Presidency.

IV. That since the duties of the Surgeon-Major-Generals under the proposed scheme will be the same as those of Inspector-Generals of Civil Hospitals, the post of Secretary to the Surgeon-Major-General in each Presidency should be abolished.

This Government is strenuously opposed to this proposal which it is convinced could only be carried out in this Presidency at the sacrifice of efficiency and to the detriment of the medical administration.

It seems probable that a comparison has been instituted by the Government of India between Provinces already under Civil Inspectors-General and Madras as it would be under a similar head. But this Government cannot believe that the details on which such a comparison should be based were before the Government of India and the following figures are therefore furnished:—

Madras Presidency.		22
Civil districts	.. .. .	70 (about)
Large towns which should be inspected by the Surgeon-Major-General	.. .. .	8
Civil hospitals under his control at the Presidency town	.. .. .	489
Do. in the rest of the Presidency	.. .. .	19
Police hospitals	.. .. .	3
Lunatic asylums	.. .. .	2
Medical Store depôts	.. .. .	57
Commissioned Medical Officers in Civil employ	.. .. .	21
Medical Warrant Officers in Civil employ	.. .. .	24
Assistant Surgeons	.. .. .	152
Civil Apothecaries	.. .. .	333
Hospital Assistants	.. .. .	21,050
Receipts and issues of correspondence in the Surgeon-General's office in 1892	.. .. .	20,942
Receipts and issues of correspondence in the Surgeon-General's office in 1893	.. .. .	

The foregoing figures will sufficiently demonstrate the necessity that exists for the head of the department making extended and frequent tours in order to carry out the work of inspection. During his necessarily long absences from head-quarters the work of his office has to be left in the hands of his Secretary, and it would result in serious consequences were there not an officer of standing at head-quarters capable of dealing promptly with departmental questions and disposing of them as they arise. It is also most desirable that all rosters of service should be kept by a Commissioned Medical Officer. It might be argued that much of the Secretary's work could be done by a non-professional man, but, on the other hand, much of it could not—such for example as the checking of requisitions for medicines, the compilation of medical statistics and the carrying on of correspondence on professional subjects.

Recent events have so impressed this Government with the absolute need for having as Secretary to the Surgeon-General a Medical Officer of ability and experience that I am to submit, for the favorable consideration of the Government of India, that the pay of the appointment should not be fixed at Rs. 800 * as at present, but should be so regulated as to enable a Surgeon-Major to hold this post without loss of pay. At present it frequently happens that just as an officer has gained the experience enabling him to conduct the duties in a thoroughly efficient manner he receives rank promotion and has to be transferred to other employment to prevent loss of pay. This

* Home Department Notification, No. 361, dated 30th July 1886.

is of course prejudicial to the administration of the department, particularly his successor takes charge during the absence of the Surgeon-General on an extended tour.

The peculiarly independent duties of the Secretary to the Surgeon-General render it imperative that he should be a man of tact, temper and experience, and that he should have acquired a thorough knowledge of the regulations and usages of the service. It will be apparent therefore that the longer an officer holds the appointment the more useful and valuable will his services be. The present consolidated pay, however, as pointed out above, militates against the appointment being held by an officer for any length of time, and it may, as an instance, be mentioned that during the term of office of the late Surgeon-General there were no less than seven changes of officers conducting the duties of Secretary.

It should also be observed that it is undesirable for a very junior officer to hold the appointment as he has to conduct correspondence with officers of high rank holding important appointments in the department, much of it being of a confidential character.

V. That the Surgeon-Major-Generals should cease to exercise any control over those sections of the existing Medical establishments of Madras and Bombay which are composed of officers employed with the Army, or over the reserve of twenty-five per cent., the administration of which should, in future, be conducted directly under the orders of the Government of India.

The Government agrees generally in these proposals, but considers that the head of the Civil Medical Department should take charge* of newly arrived Surgeon-Lieutenants and attach them to the hospitals at the Presidency town for six months or so in view to their becoming acquainted with their work and acquiring the vernaculars before they are detailed for military duty. He should also in the opinion of this Government have control over the ten per cent.† reserve of officers

* Vide letter from the local Military Department, No. 3194, dated 24th May 1894.

thrown temporarily out of civil employ, instead of their being at once transferred to military duty. These cases would be rare and the limit would seldom, if ever, be reached. This reserve would, of course, be quite distinct from the twenty-five per cent. to be maintained under the control of the Government of India to meet casualties, leave vacancies, emergencies, epidemics, &c.

VI. That all unemployed officers of whatever rank or Presidency who, for the time being, are not filling sanctioned appointments in the Civil or Military Department, should, while so unemployed, be at the disposal of the Government of India for duty in any part of India or its dependencies.

The Government sees nothing to object to in this proposal, provided it is not put in force in reference to the ten per cent. reserve referred to above.

VII. That though the Government of India do not consider it desirable to effect at once a complete unification of the Medical Services and would continue recruitment for the three Presidencies as at present, it is proposed to ask the Secretary of State to warn all future candidates that, though ordinarily they will be employed in the Presidency which they elect or are attached to, the Government of India have the right to employ them in any other Presidency or Province according to the exigencies of the public service, and further that a clause should be inserted in the commissions granted to the officers that although they may be allotted to a particular Presidency they shall be bound to serve wherever they are required to serve.

It appears to this Government to be far preferable to at once fix a date after which recruitment should be for one general Indian Medical Service. Surgeon-Lieutenants on appointment should, it considers, be distributed among the Presidencies in much the same way as Indian Civil Servants are to be, so that while the required supply might be maintained in each case, no Presidency should get a monopoly of the men who pass highest at the examinations.

VIII. That Brigade-Surgeon-Lieutenant-Colonels of the three Presidential Lists shall be eligible for Administrative posts in any of the Presidencies or Provinces.

The Government is strongly of opinion that the present number of Brigade-Surgeon-Lieutenant-Colonels allotted to this Presidency should be maintained and reserved for its officers, until all those on the existing establishment and considered fit for this advancement have been absorbed. It seems to this Government that such officers would have good reason for discontent were they deprived of any of the existing appointments, to the attainment of which they justly look forward.

IX. That promotion to the offices of Surgeon-General with the Government of India and of Surgeon-Major-General in Madras and Bombay shall be open to Surgeon-Colonels on the three Presidential Lists, to be selected according to seniority, coupled with ability and merit; but they must complete a tour of five years' full-pay service in those positions, including eight months' furlough under Article 689 of Volume I, Part I, of the India Army Regulations, before becoming eligible for the extra pension of £350 a year. Surgeon-Major-Generals will also be eligible for promotion to the office of Surgeon-General with the Government of India.

The Government has no objection to this proposal so long as it is consulted before any appointment to this Presidency is made. It would, however, stipulate that no officer from another Presidency should be appointed to be head of the Civil Medical Department until the officers now serving on the establishment have been absorbed, always provided that there is on the list an officer considered competent by this Government. The words "and of Inspectors-General of Civil Hospitals" have apparently been inadvertently omitted after the words "Madras and Bombay" in this "conclusion."

X. That all existing orders and regulations as affecting the pay, pensions, furloughs, provisions, rights, and privileges generally of the Indian Medical Service, not incompatible with the foregoing proposals, should remain in force as hitherto.

The Government considers that there should be a provision that—cases of unfitness for promotion excepted—the administrative appointments and commissions in the rank of Brigade-Surgeon-Lieutenant-Colonel should be distributed among the officers of the three Presidential lists in the same

	Bengal.	Madras.	Bombay.	Total.
Surgeon-Major-General	1	1	1	3 (a)
Surgeon-Colonels	9	4	3	16 (b)
Brigade-Surgeon-Lieutenant-Colonels ..	21	11	9	41
Total ..	31	16	13	60

(a) Carry an additional pension of £350 after five years' service in the rank.
(b) Do. do. £250 do. do.

proportion, as nearly as may be, in the future as in the present, so long as any officers enlisted under present conditions remain in the service.

3. Having dealt with the "conclusions" mentioned in your letter under reply, I am now directed to submit the following alternative scheme for the future Civil Medical Administration of this Presidency for the consideration of the Government of India, in lieu of the somewhat complicated system which would result from the adoption and application of the "conclusions" formulated by the Government of India.

4. The present number of sanctioned civil appointments for Commissioned Medical Officers in this Presidency is 46. To this must be added two for the additional duties consequent on the approaching transfer of the Women and Children's Hospital to a wing of the General Hospital. With a reserve of 25 per cent. the total would be 60. This Government would propose that 60 officers should be handed over (in full, as it may be said, of all demands) for civil administration, on the understanding that as vacancies occurred recruitment would be made at the bottom of the list, that is, that they would be filled up by the transfer of officers of the rank of Surgeon-Captain from the Military Medical Department. The existing establishment

of 46 officers includes only 2 for the Jail Department, but this number will gradually be increased to 4—*vide* Finance and Commerce Department No. Ex. 5362, dated 11th December 1893. The eventual strength will therefore be $46 + 2 + 2 + 13$ (reserve) = 63.

5. The Military Department would then, directly or indirectly, control the following officers:—

(1) All Madras Medical Officers now employed in the Military Department and under the Government of India in the Political and Financial Departments, and in civil employ in Burma, the Central Provinces and elsewhere.

(2) All officers joining the Indian Medical Service in future years and posted to this Presidency.

6. In view to obviate the discontent and probable consequent inefficiency which would be caused if these 60 Civil Medical Officers had only the one administrative appointment of Surgeon-General to look forward to as a result of good work, this Government would propose that one of the Military Surgeon-Colonels—which it is understood the Government of India considers to be in excess of requirements—

should be transferred to the Civil Department. This would give two * adminis-

* Rs. 2,500 + 1,800 = 4,300 with extra pensions of £350 + 250 = 600.

trative appointments for 58 civil officers under this Government as against three †

† Rs. 1,800 × 3 = 5,400 with extra pensions of £250 × 3 = 750.

for 98 military officers under the Government of India. This would be only a fair proportion.

7. It would then be possible to restore the Sanitary Commissionership to its former status of an administrative appointment, which it actually is; and, with this object, the pay should be raised to Rs. 1,800, entailing an additional expenditure of only Rs. 200 *per mensem* at the most.

8. In case it may be urged that so small a department would not require so expensive a head as a Surgeon-General on Rs. 2,500, I am to refer to the figures given in paragraph 3 (iv) *supra* which convey an idea of the duties of control and inspection which are expected from that officer. The Civil Medical Department in this Presidency is a most important one, and its importance in relation both to expenditure and to the staff employed is annually advancing with the increase in the number of hospitals under his supervision, and with the increase in population.

9. Should it be considered that the Sanitary Commissioner's duties do not warrant his receiving the pay of a Surgeon-Colonel, I am to suggest that as the inspection work of the Surgeon-General is so heavy as to take up—if efficiently performed—at least six months of each year, the Sanitary Commissioner should be appointed Deputy Inspector-General of Civil Hospitals and should thus relieve the Surgeon-General of the work of inspection at those stations which he has to visit in his capacity as Sanitary Commissioner, in this way obviating the waste of time and expenditure caused by the double visit.

10. The alternative scheme sketched in the preceding paragraphs would cause a slight increase of expenditure. But this Government is convinced that the formation of the officers of the Madras Civil Medical Department into a practically independent body, provided with its own adequate arrangements for the reward of merit, could not fail greatly to simplify the administration and thus to increase its efficiency; and that a slight increase of expenditure would therefore be fully justified. It therefore strongly commends this scheme to the favorable consideration of the Government of India.

J. F. P.
Chu