

BACK PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

FURTHER PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

Public (1898) Department.

CURRENT No. 1446

From

The Ag. Protector of Immigrants
Madras

Order

No. 225

Dated 25th May 90

Received 726

Registered

Enclosures/

Spare copies -

SUBJECT.

Requesting that the ^{republic} duties
and responsibilities of the
Depot Surgeon and the Madras
Inspector of Immigrants may
be definitely laid down.

Medicine Inspectors and Report of the Inspectors during September, October and November 1891.

Chief Inspector:—

23rd September.

27th Sanitary men kept in the Quarantine. A temporary shed has not yet been erected for the purpose on day and night but the work is going on immediately attention the Agents. I have sent 28th 9. & 30th October about 100. The shed ought to be ready this day.

13th 11th 12th 13th 14th 15th 16th 17th 18th 19th 20th 21st 22nd 23rd 24th 25th 26th 27th 28th 29th 30th 31st

4th September

Inspection. I think that the rice should not be given to the babies of Collyer's Hall. Since since the stoppage of it Collyer has been and it should be kept if any more is needed for in a few weeks time it will be

23rd September

5th September

1 woman and baby in Hospital; five of these with diarrhoea. No Collyer case since we have 28th 9. it would be judicious to detain the Collyer who wish to re-enter, in No 2 Hospital for a few days and I have directed Mr. Brown to do so. Should no more cases of Collyer, we shall be able to discharge the extra staff which we had at the end of the month.

8th September

Inspected. Report clean, bread good. Two women and three men in Hospital during the week.

10th September

Leaves not far clear as they ought to be. It would not be safe yet to be back in the ordinary diet.

12th September

Inspected none in Hospital.

15th September

Inspected: all clean, none in Hospital. I agree with Dr. C's remarks of yesterday more: regarding the bread and coffee.

17th September

Inspected: clean: only one woman in Hospital by Saturday.

19th September

Inspected: clean: only one woman in Hospital by Saturday.

21st September

Inspected: clean: only one woman in Hospital by Saturday.

23rd September

Inspected: clean: only one woman in Hospital by Saturday.

25th September

Inspected: clean: only one woman in Hospital by Saturday.

27th September

Inspected: clean: only one woman in Hospital by Saturday.

BACK PAPERS.

Date.	Department.	No.	G.O.

FURTHER PAPERS.

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too much.

S. H. Brown

20th October. Visited the Report. Continued the examination of the present lot of Collier - Total population 258.

S. H. Brown M.D.

31st October

Inspection of Report

24th October. Visited Report. Population 333. 3 sick in Hospital. 2 from Fever and 1 from Bone and Catarrh. 4 cases of itek and 3 from Bone Sepsis in the same Hospital. S. H. Brown M.D.

28th October

Visited Report. Population 334. Two and a half women with slight fever in

the same Hospital. S. H. Brown M.D.

30th October

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

31st October

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

1st November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

2nd November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

3rd November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

4th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

5th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

6th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

7th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

8th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

9th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

10th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

11th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

12th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

13th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

14th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

15th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

16th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

17th November

Visited Report. 3 men and 1 woman in Hospital and 8 in the same Hospital. S. H. Brown M.D.

No. 225

OFFICE OF THE PROTECTOR OF EMIGRANTS,
Madras, 25th May 1898.

From J. N. Atkinson Esq.

AG. PROTECTOR OF EMIGRANTS,
Madras,

To The Honble Mr. A. T. Arundel

CHIEF SECRETARY TO GOVERNMENT,
PUBLIC DEPARTMENT,
Fort St. George,

SIR,

A question having recently arisen in regard to the respective duties and responsibilities of the Depot Surgeon and the Medical Inspector of Emigrants, I have the honor to address Government in view to its being definitely decided whether or not the latter Officer's duties include supervision of both the medical treatment of Emigrants and the sanitation of the depot premises.

2. Section 18 of the Emigration Act provides for the appointment of a Medical Inspector by Government, and Section 37 of the Rules for that of a Depot Surgeon by the Emigration Agents. The duties of the former are laid down in Section 49 of the Rules, while those of the latter are

by Govt.
This is original
M

CHIEF SECRETARY
26 MAY 1898
GOVERNMENT OF MADRAS

Tendency to diarrhoea has not been increased in the last three days. (as seen by the Resident Apothecary in his visit to the labring & have directed to watch this tendency and report on it before the 27th inst.)

6th November. Written report. Population 450. 8 men and 1 woman in hospital with fever. The tendency to diarrhoea as noted on the 4th increased on the 5th but has ceased today.

10th November. Written report. Population 479. The tendency to diarrhoea noted on 4th under treatment, but there are a good many cases of slight fever prevailing among the coolies has fluctuated a good deal. On the whole there is a good deal of fever observable.

21st November. Written report. Population 682 souls. 6 cases in hospital.

24th November. Written report. 4 cases of fever and 2 of Bronchitis in hospital. Population 652 a good deal of fever is present.

J. N. Atkinson
Asst. Protector of Emigrants

nowhere defined, apparently because he is the Agent's medical adviser, and is not recognized by Government. Indeed the Depot Surgeon is only mentioned three times, in Sections 37 and 68 and at the foot of Form No. 14. The two officers have hitherto worked harmoniously, and no difference ever arose in regard to their respective duties. The present Medical Inspector

Surgeon. Dr. Col. Lee however has framed a set of rules

(marginally noted) for the guidance of the Depot Surgeon

involving the performance of various duties and contends

that the Depot Surgeon "shall exercise supervision and control

over the Resident Apothecary and issue instructions to

him, in respect to the treatment of the Sick and the performance

of his professional duties generally". Surgeon Dr. Col. Lee

Rules for the guidance of the Depot Surgeon

1. The Depot Surgeon shall be the medical and sanitary adviser of the Emigrant Agents.

2. He shall exercise general supervision and control over the Resident Medical Officer at the Depot and issue instructions to him in respect to the treatment of the Sick and the performance of his professional duties generally.

3. He shall keep a diary at the Depot wherein he shall record for the information of the Protector and of the Medical Officer of Emigrants, notes regarding the number in each article and in the Hospital, the condition of the Sick, the nature of their ailments and the character of the prevailing diseases.

4. In the event of the occurrence of any unusual sickness or of any epidemic disease, he shall visit the depot as frequently as may be necessary to check the course of the outbreak.

He shall submit a weekly Hospital Report in Colonial Emigration Form No. 14 through the Emigration Agents for the information of the Medical Inspector.

Contends that the Depot Surgeon is responsible for the treatment of the Sick, his own duties being, as he says, entirely sanitary. Dr. Walker who

was, till recently, Depot Surgeon, repudiated, according to his agreement with the Emigrant Agents any duty or obligation other than the medical examination of recruits for physical fitness for work in Natal, but as, at the instance of the Medical Inspector he was called upon by the Agents to perform the duties enumerated by Surgeon Dr. Col. Lee he resigned the office.

The Medical Inspector's contention that the Depot Surgeon should be held responsible for the treatment of Sick emigrants apparently originated in his objection to receiving Sick emigrants into his Hospital. In para 4 of my Administration Report dated 25th March 1898, No 117, I have mentioned this matter and have therein given my opinion, which I still hold, that the long existing custom of sending serious cases of sickness to the Native Dispensary for treatment should not be changed. It is obvious that Surgeon Dr. Col. Lee having objected to the reception of Sick emigrants in his Hospital, it was incumbent on him to see that they received proper treatment in the

Depôt; and thus he apparently proposed to do not by looking after them himself, but by throwing the duty on the Depôt Surgeon.

3. The present Medical Inspector observes that the practice of previous Depôt Surgeons, as also the common sense view of the question, support his contention that the Depôt Surgeon should be responsible for the treatment of the sick, and refers to the remarks of the Depôt Surgeon during the months of September, October and November 1891 in regard to previous practice. I have read through the remarks (Copy enclosed) of both the Depôt Surgeon and the Medical Inspector for the three months referred to, but fail to see anything in them in support of Dr. Lee's statement. The remarks of both the officers are on very much the same lines, except that the former records the number of Emigrants examined by him for physical fitness during his visit. The remarks as to numbers in Hospital are such as are ordinarily made by all inspecting officers. Depôt Surgeon, Medical Inspector, or Protector. None of the diaries for periods other than the three months specially relied on by the present Medical Inspector in any way support his argument. The common sense view of the matter is undoubtedly against Dr. Lee's contention. The Depôt Surgeon as such

is purely a private practitioner: he may have inferior qualifications; or indeed, the agents may prefer not to appoint a Depôt Surgeon at all. It cannot have been intended that the medical treatment of the emigrants should be left to the supervision of an individual, who might have no existence in fact. On the other hand Government cannot be indifferent in the matter, and the Medical Inspector is obviously the officer, as he is the only officer who can be immediately responsible to see that proper treatment is accorded to sick emigrants.

5. In these circumstances, I request that, if it sees fit, Government will lay down clearly that the duties of the Medical Inspector as defined in Section 49 of the Rules include the superintendence of and responsibility for the treatment of sick emigrants.

I have the honor to be
Sir
Your most obedt Servant
J. H. Atkinson
as Protector of Emigrants

[G.]
26

500 27-1 18.

Shd C. 7. 6. 98
MT 8. 6. 28

PUBLIC DEPARTMENT.

C. No. 1776

~~HIS EXCELLENCY THE GOVERNOR.~~

THE HON'BLE SIR HENRY BLISS, K.C.I.E.

THE HON'BLE MR. GROSE, C.I.E.

SUBJECT.

Duties of the Emigration Depot
Surgeon and the Medical Inspector
of Emigrants

FOR ORDERS.

The Protector of Emigrants sub-
mits for orders the question of the
duties of the Medical Inspector of
Emigrants and of the Depot Surgeon at
the Emigration Depot in Madras. [as A]
difficulty has arisen as to which of
these officers is responsible for the
medical treatment of sick emigrants in
the Depot Hospital.

The Medical Inspector is an
officer appointed by Govt. under sec-
tion 80 of Act XXI of 1883. His duties
are defined in the marginally noted
sections of the Act itself. They con-
sist of inspecting at least once a
week the emigrants in the Depot, and
examining the state of the depot, and
the manner in which the emigrants are
lodged, fed, clothed and otherwise
provided for, and reporting to the Pro-
tector of Emigrants any circumstance
that may come to his knowledge during
his

43, 44, 45, 49, 50, 61 & 69

his inspections. He has also to examine each emigrant who has entered into an agreement, with a view to ascertain whether he is fit to emigrate. He has further to inspect emigration vessels, and in conjunction with the Protector of Emigrants to see that they are properly fitted out and he has to be present at the embarkation of emigrants and to make a further examination as to the fitness of each emigrant to undertake the voyage.

Further details as to his duties are contained in the rules framed under the Act.

The Depot Surgeon on the other hand is a private employe of the Emigration Agent. As pointed out by Mr. Atkinson the appointment of such an officer is optional, not compulsory.

From rule 37 it is plain that it was the intention of the Govt. of India that the actual medical treatment of emigrants should be in the hands of the Resident Depot Medical Officer. As far as can be judged from Mr. Atkinson's letter, the final responsibility for the treatment of patients in the Depot Hospital has up to now been vested in the Medical Inspector. Dr. Lee however considering that the duties of the Medical Inspector were merely to advise the Protector of Emigrants, and to inspect the Depot with a view to bringing defects to notice, has declined to treat the patients and has framed

rules

5 (a), 36, 37, 38, 45, 46, 49, 68, 73 etc

* in the blue pamphlet.

*Quite so - How could a man
did not treat the sick keep the
Hospital Regt. presented in the rule?
hs*

rules imposing the duty of treatment of the sick upon the Depot Surgeon. Dr. Walker who was till recently Depot Surgeon, resigned his appointment when called upon by the Agents to undertake the duty of treating the sick.

Mr. Atkinson's view of the case as summed up in paragraph 3 of his letter is that the responsibility for the treatment of sick emigrants rests with the Medical Inspector. This he describes as the common sense view of the matter, his argument being that as the Agents are not bound to appoint a Depot Surgeon at all, it cannot have been intended that the medical treatment of the emigrants should be left to the supervision of an individual who might have no existence. This argument however is, it is submitted, fallacious, for it is plain from rule 37 that it was the intention that the actual treatment should be performed by the Resident Medical Officer, in this case an Apothecary.

Dr. Lee supports his argument by reference to the remarks made by the Depot Surgeon and the Medical Inspector in the hospital diary and Mr. Atkinson devotes a considerable portion of para 3 of his letter to discussing this point. This is, it is submitted, altogether beside the question. While rule 51 directs that a visitors book shall be kept in each depot in which

which the Protector or Medical Inspector may enter his remarks, there is no rule

which ~~permits~~ permits the Depot Surgeon to make use of the same book.

The entries of the Depot Surgeon in the Diary are it is submitted inappropriate. He is employed by the Agents, and any recommendations which he may make should naturally, it is submitted, be made direct to them. In the case of such recommendations it would be for the Agents themselves to decide whether or not they are worthy of adoption. The case of recommendations made by the Medical Inspector is different, for if these are not complied with by the Agents, it rests with the Protector to take steps, if he thinks fit, to enforce them.

Under the circumstances, it is submitted that Mr. Atkinson has misconceived the position. It is for the Agents themselves to decide what the duties of Depot Surgeon are. If they have appointed him merely to assist them in examining the emigrants as to their fitness, and occasionally to inspect, for information, the depot premises, they are within their rights, and in that case the Medical Inspector has no connection whatever with the Depot Surgeon. If on the other hand the Agents appoint their Depot Surgeon with a view to his holding the medical charge of the depot, and looking after the

*The agent should care if
he thinks proper provide
a book for his Resident
Surgeon to enter remarks in
M*

the treatment of the sick, then his work is subject to the inspection of the Medical Inspector. In neither case can the Medical Inspector be held responsible for the treatment of the sick. That is a matter to be provided for by the Agents at their own expense.

It is submitted that the reply to the Protector of Emigrants may be upon the above lines and that at the same time he may be told that Dr. Lee's position as Medical Inspector gives him no power to frame rules for the guidance of either the Depot Surgeon or of the Resident Medical Officer. Any rules which are framed should issue as directions of the Agents to their employees. Dr. Lee's remedy if he finds that proper supervision is not made for the treatment of the sick is to report to the Protector, who should under section 4 of the Act take steps to put matter right.

M
4/6/25

*I quite agree with the
forgoing note, and it
must be added that
by rule 37 ^a Resident
medical officer approved
by the Medical Inspector shall
be appointed. This ensure.*

*An apothecary in
the present case.*

such treatment of the
sick as the Medical Insp.
approves. There need
be no Depot Surgeon at
all unless the Agent desires
it as no doubt he usually
will.

MA 6698.

MA
7/11/98

[G
24]
1,000-22-11-97.

Public DEPARTMENT.

Papers to be read in Proceedings:—

Again G.O., No.	, dated	189 .	
Again G.O., No.	, dated	189 .	
Current No. 1776	of 1898, dated 25/5		, from the Protector of Emigrants (2)
" "	" 189 , "	" "	
" "	" 189 , "	" "	

ORDER. No 776. 9 18th June 1898.
His.

The Govt. is unable to agree with the views of Protector of Emigrants on the subject. The medical care of emigrants is a matter for which the Agents are bound to provide, and rule 37 of the rules framed under Act XXI of 1883 requires that a resident depot medical officer should be appointed by them. It is clear that attendance on the sick devolves upon this officer, and not on the Medical Inspector. The duty of the latter in connection with the Depot hospital is merely to inspect, and to bring to notice any defect which he may observe. In order that the arrangements may be generally such as he would consider satisfactory it is provided in rule 37 that the person appointed resident medical officer shall be approved by him.

2. The appointment of a depot surgeon

surgeon is, ^{as} pointed out by the Protector, entirely optional. If he is appointed it rests with the Agents, whose servant he is, to decide ^{on} what work he shall be employed, that is to say whether he shall ^{assist} ~~assist~~ the Resident Medical Officer ⁱⁿ ~~attend~~ to the sick, or ~~whether he~~ shall merely be called upon to advise the Agents as to the physical fitness of recruits. In the former case his work will be subject to the inspection, but not to the control, of the Medical Inspector in the latter he will have no connection with ~~that latter~~ officer. In neither case has the Medical Inspector power to ~~make~~ rules for the guidance of the depot surgeon. The rules drawn up by Surgeon Lieut. Col. Lee should therefore be withdrawn. Any ^{instruction} ~~instructions~~ that may be necessary for the guidance of the Medical officers attached to the depot should be issued by their employers, the Agents, with whom ^{and} the responsibility for the proper treatment of the sick, and for the submission of the reports prescribed by the rules, ~~rests~~ Subject to a discretionary ^{himself} power to take action, if necessary, in an emergency ~~and~~ the work of the Medical Inspector should be confined to inspection.

(From orders)

AK
14/4/98

17/4/98

To the Protector of Emigrants.

0-763 21-6-98.