

LEGISLATIVE COUNCIL.

Friday, 6th November, 1936.

The Council met, pursuant to adjournment, His Excellency the Governor, SIR GEOFFREY A. S. NORTHCOTE, K.C.M.G., President, in the Chair.

PRESENT.

The Hon. the Colonial Secretary, (Mr. E. J. Waddington, C.M.G., O.B.E.).

The Hon. the Attorney-General, (Mr. J. H. B. Nihill, M.C.).

The Hon. F. Dias, O.B.E. (Nominated Unofficial Member).

The Hon. J. S. Dash, Director of Agriculture.

The Hon. E. A. Luckhoo (Eastern Berbice).

The Hon. J. Mullin, O.B.E., Commissioner of Lands and Mines.

The Hon. M. B. G. Austin (Nominated Unofficial Member).

The Hon. A. R. W. Robertson, Colonial Treasurer (Acting).

The Hon. W. A. D'Andrade, Comptroller of Customs.

The Hon. J. A. Henderson, Surgeon-General.

The Hon. H. S. Whittaker, Director of Public Works (Acting).

The Hon. L. G. Crease, Director of Education (Acting).

The Hon. A. MacDougall, General Manager, Transport and Harbours Department.

The Hon. Percy C. Wight, O.B.E. (Georgetown Central).

The Hon. J. Eleazar (Berbice River).

The Hon. J. I. De Aguiar (Central Demerara).

The Hon. Jung Bahadur Singh (Demerara-Essequibo).

The Hon. Peer Bacchus, (Western Berbice).

The Hon. E. M. Walcott (Nominated Unofficial Member).

The Hon. H. C. Humphrys (Eastern Demerara).

The Hon. C. R. Jacob (North Western District).

The Hon. A. G. King (Demerara River).

The Hon. J. W. Jackson (Nominated Unofficial Member).

The Hon. F. A. Mackey (Nominated Unofficial Member).

The Hon. T. Lee (Essequibo River).

MINUTES.

The minutes of the meeting of the Council held on the 5th November, as printed and circulated, were confirmed.

ORDER OF THE DAY.**ANNUAL ESTIMATES.**

The Council resolved itself into Committee and resumed consideration of the Estimates of Expenditure to be defrayed from Revenue during the year ending 31st December, 1937, and the Report of the Select Committee appointed on the 1st October, 1936.

MAGISTRATES.

Mr. ELEAZAR: I am fully aware, sir, that whenever this department is discussed by this Council one or other of the officers concerned suffers. That is putting it mildly. But there is an unrecorded beatitude from which some of these officers can take umbrage, *i.e.*, "Blessed are they that expect nothing for they shall not be disappointed." I want to make it perfectly clear that I have not been approached and I have no apology to make, but I know of my own knowledge of an officer who has been acting as Magistrate for eight years and is still acting. I also know that while that officer has been acting Government has appointed men who have no connection whatever with the law to do the work of Magistrates. I submit that in such circumstances the qualified person, a

lawyer who has been acting for all that period, has been done a wrong by Government, perhaps inadvertently, by being passed over and laymen who had never crossed the precincts of a Court appointed.

In a recent case when an officer was informed that he would be expected to perform Magisterial duties he visited the Magistrates' Courts in Georgetown for two days to see how the Magistrates were doing their work. That is a travesty of justice. The liberty of the subject in all parts of the British Empire is regarded as a sacred thing, yet this is the way we play with the liberty of people in this country, meanwhile doing an injustice to an officer who has been serving Government in an acting capacity for eight years. While this officer is acting he cannot get leave, whereas a man who is appointed can get leave after three years' service. A man who allows himself to remain out of practice for eight years has a very poor chance of making a practice. I am asking whether Government cannot employ this officer permanently and make some terms with him.

I also call attention to the position of junior clerks in Magistrates' offices. When a lad enters one of these offices he hopes to be appointed in that office, but I understand that when a vacancy occurs a rank outsider is brought in above him. The officer suffers not only in being deprived of the post to which he aspired, but he is also saddled with the responsibility of teaching the individual who supplants him. I know of another department where an officer has been for 14 years and is in receipt of a salary of \$34, and when a vacancy arose he was denied promotion and now has the glory and honour of teaching an outsider. These are things Government will never know about unless they are brought to their notice in this House. I doubt whether any officer is capable of going through every department and seeing what should be done. These happenings have given rise to a lot of dissatisfaction and are giving rise to considerable dissatisfaction now, and the whole community is looking on with alarm that they should be allowed to continue.

Mr. JACOB: Last year I raised the question of laymen acting as Magistrates

and I think an assurance was then given by the Attorney-General that the matter would be investigated. The officer referred to by the hon. member for Berbice River has been acting not for 8 but for about 15 years, and I renew the appeal I made last year in respect of that officer. When hardships are discovered a period should be put to them promptly, lest those hardships be taken as precedents. This is a case of a local man who ought to be given some consideration. When the outsider should be given consideration I say so, and I do so for the local man in like manner.

THE CHAIRMAN: I think that I am aware of the officer to whom reference has been made; his case has been considered. I have no objection to members bringing forward what they consider a shortcoming on the part of Government in respect of appointments; it is quite within their competence. But at the same time members will realise that the function of appointments rests with Government and not with this Council.

Mr. LEE: From the reply to a question asked by me I observe that "Government is aware that dissatisfaction has been expressed from time to time by legal practitioners that the times of the opening and closing of the Magisterial Courts in country districts are not uniform." It is not for the convenience of legal practitioners I am appealing but for the convenience of the public. Some litigants have to walk practically 14 miles from their homes to the Court, and with the Court sitting up to 5.30 p.m. they do not reach home until late at night. I do not say that Magistrates do not use their discretion, but some of them use it harshly and litigants are inconvenienced. I am asking that the hours be fixed for the opening and closing of the Courts in country districts.

Mr. DE AGUIAR: I would like to support the appeal of the hon. member for Berbice River with respect to the acting Magistrate. Members of this Council appreciate the fact that the function of appointments rests entirely with Government. At the same time it is the duty of members of the Council to put forward the case of a particular officer when the circumstances warrant such representation. I am glad to hear that the case of

the officer in question has received consideration. I cannot conceive of an officer in such a responsible position being allowed to continue in office for such a long period without any security, and that Government should say his case has been considered and nothing can be done. It must be one of two things. Either the officer is not fully qualified, in which case he should be given marching orders, or Government feel that he should not be confirmed in the appointment. I can hardly believe that an officer would be allowed to act for such a long period in a very responsible post unless he was fully qualified and was giving satisfactory service. It is beyond my comprehension how Government could have an officer working for such a long period without security of tenure or some understanding about leave and things of that kind. It is a case that should receive not consideration but favourable consideration.

THE ATTORNEY-GENERAL (Mr. Nihill): Perhaps as the titular head of the department, for the time being at any rate, it might be useful for me to make some observations on the points raised in this debate. Yesterday afternoon the hon. member for North Western District raised the question of the use of stamps for the collection of fees in Magistrates' Courts. That is a matter that has been under the consideration of Government for some time, and it is the intention of Government to substitute for that system a system of cash collection against the issue of official counterfoil receipts. Before the new system can be fully put into operation it will be necessary to make certain changes in the existing law. It will be necessary to amend certain sections of the Summary Jurisdiction (Magistrates) Ordinance and also to amend the Summary Jurisdiction (Magistrates) Money Regulations, 1931. I might add that there is at the moment in course of preparation a bill to amend in other respects the former Ordinance, and I shall take the opportunity of inserting in it the required amendment in order to facilitate the inauguration of the new system. Meanwhile in a few districts the new system has to some extent been put into operation in respect of costs recovered where free process is issued in the first instance. To that limited extent it is possible for the Magistrate to inaugurate the new system without waiting for the change in the law.

The hon. member also raised the question of costs against the Crown. That is a very difficult and technical subject, and I could not possibly explain it at length to the Council on an occasion like this. I might perhaps say, and legal members of the Council will agree with me, that the ordinary common law rule is that costs are not given against the Crown, but during the course of the last 200 or 300 years the strict application of that common law rule has to a large extent whittled down both by statute and by practice. I think it is true to say that now, under certain conditions and exceptional circumstances, costs can be given and recovered from the Crown, and in several instances Magistrates have awarded costs against the Police or the officer responsible for the prosecution. If I heard the hon. member rightly, his submission is that it was unsafe to leave that power of awarding costs to the discretion of the Magistrates, and if he had his will he would like to see some provision in the law that the Crown when unsuccessful in any prosecution should be mulct in costs. I am afraid it would be quite impossible to put anything of that kind in the statute with regard to ordinary common law rules. It is a question of exceptional circumstances, and the only person who can judge the character of those circumstances must, of course, be the trial Magistrate, and therefore it must be left to his discretion.

As regards the point raised by the hon. member for Berbice River, I do not intend to say very much because you, sir, have indicated Government's point of view in regard to the Magistrate who has been mentioned. The matter has been under the consideration of Government. All the facts in that case are known and appreciated by Government. In view of the rather exaggerated language used by the hon. member I must controvert the view, if the view is at all commonly held by the hon. member or any other member, that long service in an acting appointment gives a prescriptive right to a permanent appointment.

Mr. ELEAZAR: That did not come from me.

THE ATTORNEY-GENERAL: As regards the question of the opening and the sitting hours of Magistrates' Courts

that is a matter which has also received my consideration, and I have circularised all the Magistrates throughout the Colony for their opinion. In the towns and rural Courts of considerable size it is, I think, quite possible to fix if not the closing hour at any rate the opening hour, and a discretion should be given the Magistrate to sit beyond the ordinary closing hour if any particular case appears to him to warrant it. In regard to some of the smaller country Courts it may be difficult, though I give no definite view on the subject, to fix a definite time for the opening hour. It must be remembered that with some of the smaller Courts the Magistrate may have to travel 40 or 50 miles from the place where he spent the preceding night, and that might make it difficult to fix a definite hour in the morning for the opening of the particular Court. Government is not aware of complaints from the general public, but complaints were received from legal practitioners. If any specific instance of litigants or witnesses being put to inconvenience by returning to their homes very late in the evening comes to his notice, if the hon. member would let me know I shall be only too pleased to make inquiries into it.

Mr. ELEAZAR: I regret that I should have given Government the occasion to remind me that appointments are made by Government and not by this Council. I have lived all my life here and I ought to know that. It is because appointments are made by Government that we have so many misfits in the Service. The Attorney-General said that the common law rule as to costs has been whittled down by statute and practice during the course of the last 200 or 300 years. That is how Government machinery moves to do right. The Crown is supposed to hold the scales of Justice evenly between both parties, and witnesses on both sides are entitled to their costs. Government has made Crown witnesses a kind of minor industry now, and the Police have had to prosecute some of them for committing a public mischief by making false representations, but still they continue to pay as witnesses a large number of perjurers. In the Supreme Court if a witness gives evidence and it is material he is paid. That throws on the Judge the responsibility to say whether the evidence is material, but there is no such discretion

in the Magistrate's Court. It is right that whoever gives evidence for one side or the other should be paid so that justice may be done. Very often justice is miscarried because the prosecution is equipped with all the witnesses who are paid, while the witnesses for the defence would not attend at all because they know they would get no pay.

Mr. JACOB: I would like to clear up one or two misunderstandings which have arisen. I am very glad to hear the assurance that something will be done with reference to case jackets, but I see certain weakness in the argument that in certain parts of the Colony it is being done now, while in other parts it is not being done because the law has to be amended. It may be that I misunderstood the Attorney-General, or, not being a legal man, that I did not put my case in the right way. What I asked was that some ruling should be given for an exercise of discretion to grant costs against the Crown. The criticisms I make here are not directed against individuals but against the perpetuation of the system, and unless that system is rigidly revised we cannot expect as colonists to get justice.

Mr. HUMPHRYS: During the discussions in the Select Committee and in this Council I have been endeavouring to discover what is the difficulty the hon. member for North West District is under. I understand him to say that in a prosecution by the Comptroller of Customs or the Police no costs are awarded because the Magistrate has no power to award costs. He is completely wrong. The Magistrate has a discretion in any case to award costs against the prosecution, and if he considers a case is frivolous he can award compensation. Frequently in Police prosecutions which have failed I have succeeded in getting costs. If the Magistrate considers that a defendant has been very lucky to get off, then, of course, he exercises his discretion in not awarding costs.

Sub head 5—Crown Witnesses Expenses, \$5,000.

Mr. ELEAZAR: I move that this item be carried out at \$3,500 as for this year. To my certain knowledge this vote has been abused and has created a grand parade of perjurers. It is quite true that the

Magistrates have a discretion to award costs, but it is exercised in very few cases. If costs were allowed as a matter of course greater care would be taken in instituting prosecutions.

THE ATTORNEY-GENERAL: I hope the hon. member realises that I cannot interfere with the discretion of the Magistrate in any case. It may be that in certain cases too many witnesses are brought into the case, but, on the other hand, it must be realised that it is the duty of the Crown to have present all persons who the Crown thinks may be in a position to give material evidence, and that is just as much in the interest of the defence as in the interest of the Crown. It is also known that Judges have made very caustic comments on the case for the prosecution where it has come, to the Court's notice that some person or persons who were at or near the scene of the crime were not called by the Crown. Crown witnesses are submitted to cross-examination by the defence, and it is often quite as much in the interest of the defence as for the prosecution that those witnesses should be called.

MR. PEER BACCHUS: Instead of having Magistrates travelling from one county to another to attend meetings for the renewal of licences, I suggest that the District Commissioners be appointed Magistrates in their respective districts for that purpose. I do not think it is necessary to have two Magistrates travelling from one county to another just for the renewal of licences.

THE ATTORNEY-GENERAL: It is the intention of Government shortly to appoint a committee to examine the whole question of the liquor licensing laws, and I am sure that this point will receive the very fullest consideration by that committee when appointed.

MR. DE AGUIAR: So far as I am concerned I would never support the view the hon. member has expressed. The liquor licensing laws are very intricate and I would not like laymen to deal with the matters involved.

THE CHAIRMAN: We might leave that question over for the moment.

THE COLONIAL SECRETARY: Sub-

head 8 is put under "Extraordinary Expenditure," but, as explained in Select Committee, it is proposed to place all the items under "Other Charges" when the estimates are reprinted.

MR. HUMPHRY: I want to make an appeal for the insertion of a small sum for the installation of a couple electric fans in the Magistrates' Courts in Georgetown. It is no exaggeration to say, sir, that under existing conditions the Magistrates get tired and witnesses go to sleep.

THE CHAIRMAN: Can the Director of Public Works tell me roughly what would be the cost of two fans?

MR. WHITTAKER (Director of Public Works): About \$50.

MR. HUMPHRYS: \$50 would not cover the cost of two fans.

THE COLONIAL SECRETARY: I move the insertion of \$100.

MR. ELEAZAR: While Government is in a generous mood I make an appeal for the provision of some furniture for the Courts in Berbice. Some of the Courts have no table at all and some have rickety chairs.

MR. LUCKHOO: I support the request of my hon. friend. It is disgusting to legal practitioners to have the accommodation we are getting at the present time.

THE CHAIRMAN: I shall ask the Colonial Secretary to make some inquiry into this matter, and if it is found that further expenditure is necessary and that the furniture vote cannot bear it, I have no doubt that this Council will vote what may be found necessary. At the moment Government's generosity is running dry.

The sum of \$100 for electric fans was approved.

MEDICAL.

THE CHAIRMAN: This vote is likely to lead to a good deal of discussion. I will take sub-head 1 (b) and under that allow members to make such remarks as they wish about the administration of the department. That will not later affect discussion of the other items as they come up.

Mr. ELEAZAR: At the very commencement of what I intend to say under this head, let me say that I could never in the wildest flight of my imagination ask Government to increase this vote from \$339,477 to \$353,536. For one thing when I asked in 1934 for an inquiry into the working of this department I then thought that the expenditure could be very much reduced. I set off with the idea that the expenditure would be reduced and never thought that the inquiry would have led Government into this mess. When a member asks for an inquiry it must be presumed that he has satisfied himself as to its necessity from facts within his own knowledge. No opportunity was afforded me to prove what I set out to do, and that is the reason why we now have Government implementing certain proposals contrary to the weight of evidence. The Committee have made recommendations for increases in various departments, but most people feel that we have an ample staff except in certain minor respects. It is proposed to increase the staff of departments which are adequately staffed, while no increase is recommended in respect of those departments which are under-staffed.

It is a great reflection on Government if it is satisfied, after 100 years of British civilisation and many years existence of the Medical Service, that it requires half a million dollars to maintain this institution. I observe that the Committee have not said one word as to how we may improve conditions in the outlying districts. Let us take, for example, the river districts. There you have nothing more than a dispenser who is given full liberty to do everything that a doctor has to do and is paid the paltry salary of \$40 per month. If that same dispenser, in Georgetown or New Amsterdam or even in one of the villages, were to attempt to put a lance on what we call a boil but medical men call an abscess, he is liable to six months' imprisonment. And if he is not a registered dentist and he extracts a tooth he is supposed to have practised dentistry. A man's life is worth nothing when he reaches Bartica, the Berbice River, or beyond Mackenzie City. Anybody can then tinker with his life.

No improvement has been recommended in this direction, but a recommendation

has been made of the appointment of a highly technical man to the Public Hospital, Georgetown, to count crockery and linen, and to estimate how many bags of rice and how many pints of milk are required, a duty which any layman can undertake. I want to know what would be the position of the Surgeon Specialist if a Medical Superintendent is appointed. This blunder would not have been made if the Committee knew the circumstances which led to the appointment of the Surgeon Specialist. When the officer who was doing the surgical work retired Government was advised to appoint as his successor a specialist in surgery. Why? Because everybody was going to Dr. Romiti at Mackenzie City on account of his fame as a surgeon. It was never intended to put the Surgeon Specialist in a category by himself. Nor is there any need for an Assistant Surgeon. There are men already in the department who are competent to perform minor surgery. When the Surgeon-Specialist goes on leave nobody hears any complaint that there is any difficulty in finding a surgeon to carry on his duties. I shall be very much surprised if the medical men themselves, perhaps with the exception of one in ten, are not of the opinion that a Medical Superintendent is unnecessary. One of them called it a ramp.

The ludicrousness of the position is exposed by the evidence of the Surgeon Specialist himself. He says the cost would be too much for any benefit that might accrue. One would have thought that was sufficient to dam the proposal. These laymen proceed to define the qualifications of the Medical Superintendent. What do they know about them? And they say he must not be more than 40 years old. You might have a man with a lot of academical honours behind his name and not a day's practice as long as he is under 40 years of age. This shows the ineptitude of the arguments by which the Committee allowed themselves to be persuaded. We have an Ophthalmologist who is almost overworked at the present moment. These gentlemen recommend that when this officer retires his successor should not be permanent but appointed for three years. I want to know where you are going to get an Ophthalmologist, who is a specialist, for three years. For such an important post for a delicate organ

—except the heart the most vital—they say you must get a man for three years.

Paragraph 25 reads :—

“The committee agrees with the witnesses who stated that the number of maternity cases in the hospital would justify the appointment of a specialist in midwifery, but is of opinion that such work can for the present be carried out in conjunction with the other duties of the Assistant Surgeon. Since the bulk of the surgical cases would be under the care of the Surgeon, the Assistant Surgeon would have time to be responsible for a limited number of clean surgical cases in addition to being in charge of the maternity ward. He would also be responsible for the training of junior medical officers and nurses in obstetrics.”

If the Committee had told us that there were many serious or dangerous cases they would have told us something. If that sort of argument weighs with Government you will want a specialist in the Port Mourant district, where there are more births than perhaps in any other part of the Colony. That only goes to show that some of the evidence upon which they founded their report was ill-informed, and the consequences in most cases are not the result of the weight of the evidence. While you have a Surgeon Specialist in Georgetown you have in New Amsterdam a Resident Surgeon and one Medical Officer. We who are living on the spot have always contended that the staff is inadequate. There was a time when the doctor treating out-patients was on the job for several hours and people complained about his temper. Is it any wonder that an officer should get into a temper after working so many hours? There you have people who can be cured being practically neglected, not because the men would not do their job but because you give them too much to do and say they are sufficient.

I see no reference in the report to a very important factor which I had in mind when I asked for the appointment of a committee. The elaborate medical system was the result of the immigration system, and the report is silent about that. Then there is a recommendation to remove the dispensary from the hospital. That is somebody's whim again. I pass on to private practitioners in districts. We discussed this question for a very long time and after much investigation suggested that private practitioners should be subsidised in the districts. Our view was that when a medical officer in a dis-

trict retired he should be replaced by a private practitioner with a subsidy which he would augment by means of fees. What happened? When a vacancy occurred Government placed a highly paid officer in that district and a subsidised man in a district where there was no private practice. When you employ these men at a small subsidy and no leave, they never think of a post-graduate course and are absolutely antiquated. That was never the intention. This report should be boiled, as has been suggested to me by somebody who ought to know, and none of the recommendations should be implemented, at this moment at least.

When we come to the Leprosy Hospital find that “the committee desires to record its view that a supernumerary medical officer at a salary of £300 per annum should be employed at this hospital on a contract of not more than two years. While so employed he should receive an allowance of £75 per annum with a house or quarters.” What is the reason for limiting such an appointment to not more than two years? You engage a doctor and as soon as he gets a little bit of experience you cashier him. You give them an opportunity to kill people out and when they can save life you turn them out. That is what it seems to me. The report is teaming with eccentricities. I visited a patient in the Seaman's Ward of the Georgetown Hospital and what struck me was what would be the panic in the event of fire breaking out there. There was not a single fire escape. The members of the Committee went there to investigate, but that point seems to have escaped them. I do not propose to go over all the meanderings of these gentlemen, and Government seem to be scared themselves in providing only what appears at first blush to be desirable.

The last point I wish to refer to is the Chief Sanitary Inspector. It is a ramp. I have lived for nearly a quarter of a century in a place where they say most things are needed and I know these things only exist in the imagination of certain people. We had a Medical Officer who said he had nothing to do. I happen to know that pressure was brought to bear in the appointment of a Medical Officer of Health in the County of Berbice. What we require are more Sanitary Inspectors

and not a Medical Officer of Health. Let there be two Medical Officers of Health in Georgetown, and if anything occurs in which their intervention is considered to be necessary, one of them could be consulted and his views obtained.

THE CHAIRMAN: I want this debate to be as free as possible. At the same time I would ask hon. members, as far as possible, to say what they have to say on the specific items as they come up for consideration in the Committee. It would be a great deal more helpful to Government if they will so state their opinions on each suggested appointment as it comes before them. I propose to deal with each independently, otherwise we shall be liable to repetition. The question now before them, however, enables members to speak on the general question of the department's expenditure.

Mr. DE AGUIAR: I think it will be generally conceded that great improvement can be effected in the Medical Service of the Colony, and that a sum bordering on \$600,000 can be spent in directions which would improve the various services. I shall deal only with those items which have not found a place in the estimates and to my mind would effect certain improvements. I have considered very carefully the report of the Committee and I think they restricted their recommendations in view of the financial position of the Colony. There are certain passages in the report which will be of considerable value, and I am in disagreement with the hon. member for Berbice River in his wholesale condemnation of the report. I have also had an opportunity, as I mentioned on a previous occasion, of perusing the evidence that was placed before the Committee, and it enables me to make certain observations and suggestions which would tend to improve the administrative side of the hospital. If we could afford it there can be no doubt that we should bring the medical institutions into line with the best hospitals in Great Britain and other parts of the world, but we are faced with the position that we cannot afford it, and therefore it seems to me absolutely necessary for us to do the best we can with the money available.

I have to express regret that certain

items other than those appearing in the estimates could not find a place there. In the report of the evidence great emphasis was laid on the necessity for a rain and hot water service on the surgical side of the institution. I agree that that is work that should be done at once, and it should not be postponed even for one day longer. As a matter of fact I am surprised to know that in the surgical department there is no hot water service, and they have to wait until hot water is brought from the kitchen. That is a recommendation of the Surgeon-Specialist. It was also brought out in the evidence that there is not sufficient accommodation for patients, nurses and doctors. Another disclosure is that there is not a sufficient number of beds for patients, or a sufficient number of nurses to permit of those nurses going on leave. Those are to my mind essentials for the improvement of the service, yet those are the items that Government have brushed aside, perhaps temporarily. I do not suggest any ill motives to Government, but it seems to me that Government have begun at the wrong end. Those are matters that should have received first consideration, and the creation of special posts should have been deferred until we have taken care of our immediate troubles.

I pass on to another necessity which words fail me to describe in the way I would like to do. In the course of the evidence it was brought out that there was not sufficient variation in the dietary, that it could be improved, and that it was not enough. I think I am right in saying that in the Public Hospital, Georgetown, there are to-day about 600 patients. And we are told that Government cannot give these patients sufficient food or a change of diet. Those are urgent matters, yet those are the matters that have been deferred. I could keep the Council a whole day reviewing the evidence in a similar strain. I cannot understand why matters that are all of urgent necessity are not being carried out while three special posts are being created in the place of four retiring officers. It is true that it is proposed to increase the number of supernumerary officers, but whether or not they would be sufficient I can express no opinion.

The Committee adjourned for the luncheon recess.

Mr. DE AGUIAR: When the Committee adjourned I was dealing with the staff at the Public Hospital, Georgetown, and I had reached the point that three special posts are being created to replace four medical officers who are about to retire. I think it is perfectly clear that in order to provide the patients with efficient service a lesser number of doctors in that institution would be insufficient. It has been the complaint for some time past that the institution is understaffed, and it seems from the proposals put forward that it is the intention to continue with a short staff. That shortage of staff is from time to time aggravated by the transfer of doctors to fill gaps in outlying districts, and it results in patients being attended to by several doctors, which is not satisfactory and should be remedied as soon as possible.

I indicated that a sum bordering on \$600,000 is required to run the medical services, including the hospitals and dispensaries. I make reference to it again because I consider that a most serious omission was made when the financial aspect was not referred to the Committee in their terms of reference. The terms of reference to the Committee were extremely limited, in the sense that it appears from the evidence that whenever a suggestion was made and strongly supported, the Committee were faced with the problem that the financial position of the Colony could not afford it. If the Committee had been empowered to inquire into the financial aspect in all its phases, they might have been able to find it possible to recommend the reduction of certain items and the inclusion of necessary items.

This morning I made reference to other phases of the matter, namely, the insufficiency of accommodation for patients and the necessity for an increase of the number of nurses. Those are two things that are most necessary. Under the regulations of the hospital nurses are entitled to 14 days' leave in each year, but I venture to suggest that a large number of them, for one reason or another, are unable to enjoy that right. Further, owing to the shortage of staff no provision can be made to relieve them of the long hours of work. It is all very well to say that in similar institutions abroad nurses are required to

perform duties which entail long hours of work, and very good to say that the nursing profession is a labour of love, but human beings are human beings, and the hope of reward sweetens labour. When the State requires its servants to put in more hours of work than is necessary an undue hardship is created and in the long run the State is bound to suffer. Those are matters that I had hoped would have received sympathetic consideration of Government. Instead the report of the Committee is based on similar services in a neighbouring Colony, and it seems to me that the Committee were guided by what was done or would be done in another Colony instead of considering our own needs. It is not necessary to have a man medically qualified to perform the business side of the hospital. I am satisfied from the evidence put before the Committee that a Medical Superintendent would not have a day's work to do, and even if he had in signing vouchers and enquiring into the price of rice, would that be sufficient justification to spend £1,000 per annum on such a post.

THE CHAIRMAN: I would be grateful to the hon. member if he would speak on this appointment when it comes up. I should like to have arguments against it then.

Mr. DE AGUIAR: I was dealing generally with the financial aspect of the matter and it became necessary for me to point out that this £1,000 could be better utilised in other directions. It is not necessary for me to proceed any further. I want to make it perfectly clear that I am fully aware of the fact that it is the duty of the State to provide these social services. At the same time it is my duty to state that while these services should be carried out as efficiently as possible, it is not necessary for them to be carried out in the luxurious manner proposed.

Sub-head 1 (c) — Medical Superintendent, Public Hospital, Georgetown, \$4,800.

Mr. DE AGUIAR: I do not know that can usefully say anything more on the question of this appointment. I can do so either by referring to the volume of the evidence laid before the Committee that this post is not necessary, or by quoting Mr. Grierson's views on the subject.

think Government would be well advised to defer the item. I don't want to move its deletion.

Dr. SINGH: I feel that we are not justified in incurring any new heavy expenditure on the Medical Department. From my own experience I can say that there are senior medical officers who are capable of performing the duties of Medical Superintendent. By virtue of their long experience in the different hospitals and long clinical experience in tropical diseases, our senior officers are fitted in every capacity to undertake the duties of this post. I would like to see every institution in this Colony staffed with specialists in all the branches of Medicine and Surgery, but this is not the time for embarking on such expenditure. I have heard complaints of overcrowding in the hospital, of patients being discharged half cured, and of others waiting at the outdoor department without being attended to, and of the shortage of nurses and doctors. If a Medical Superintendent comes here with all the qualifications but no experience of tropical medicine, he would have to acquire tropical experience before he could deal with tropical diseases. It is not necessary, however, to appoint a Medical Superintendent when you have men capable of filling the post and co-operating with junior officers.

Mr. JACOB: This matter has exercised my mind to a considerable degree since the Committee's report was issued. Medical services and the education system have my deepest sympathy, and I would do nothing to curtail expenditure in those two directions. After mature consideration of this matter, however, I have come to the conclusion that the expenditure of £1,000 is wholly unnecessary, having regard to the finances of the Colony and other pressing needs in the social services. The point has been stressed that our urgent needs are increased accommodation, more nurses and more doctors. One medical officer told me a few weeks ago that I would be surprised to know what patients have to undergo at times on account of lack of accommodation at the hospital. Patients sleeping on the bottom floor with others above them at night find themselves wet. Apart from that there are vermin and other things. I think it is common know-

ledge that there is overstaffing of departments throughout the Colony. There are too many officers and too little work. There would not be sufficient work for this gentleman to do and, in any case, the expenditure is not justified at the present time.

Mr. HUMPHRYS: I had every confidence that Government would have seen the necessity for withdrawing this item. Never since the change of the Constitution have I seen Elected Members so unanimously opposed to any vote, and I feel that it would be a grave injustice if Government were to carry this vote by their majority. I have endeavoured to look at the matter from an impartial point of view and I cannot see any justification for this expenditure. There has not been a single complaint, so far as we know, that the Surgeon Specialist and his colleagues are unable to do the work which we are told a Medical Superintendent would have to do. I have had a cursory glance at the evidence given by the Surgeon Specialist and it seems to me beyond all doubt that he did not encourage the appointment now sought. I would imagine that he would be the first person to ask Government to relieve him of any duties if he thought them too onerous, and I do not think any attempt has been made on his part to do that. I understand that the duties this officer will carry out are at present performed by the Surgeon Specialist and two assistants, and that they take a very short time.

I have not the slightest doubt that in two or three years from now Government will again come to the Council and say that this Medical Superintendent is unable to carry out his duties in addition to looking after the routine work of the hospital, and probably before that time we shall hear that it is absolutely necessary that he should have an assistant to take his place when he goes on leave. I am reliably informed that there is at the hospital at the present time a man who is very well thought of in medical circles and is second to none in the West Indies, and having regard to our finances we should endeavour to get along with what we have. The medical staff has never been more efficient as the result of the existence of another hospital, and there can be no doubt that Mr. Grierson's work has been

materially decreased in consequence. This is one of the very few occasions on which I find it necessary and incumbent on me to oppose a medical vote, and I hope that Your Excellency will see your way not to press this item but withdraw it, especially as our numbers are depleted to-day.

Dr. HENDERSON (Surgeon-General) : In the course of this debate reference has been made to the establishment of the Georgetown Hospital before the present arrangements so far as its management and superintendence were concerned. From what I have heard that establishment worked very well in every way. In 1931 for two reasons—because we had a very good surgeon, Mr. Grierson, and in the interest of economy—it was considered desirable to combine the offices of Surgeon Specialist and Resident Surgeon. At the same time it was realised that with his many surgical duties it would not be possible for the Surgeon Specialist properly to manage the hospital and, therefore, my predecessor arranged that the greater part of that work would be carried out by the senior surgeon and the senior physician. When Government gave approval to this arrangement, I understand, it was a temporary measure subject to its working satisfactorily. I have not found this arrangement working satisfactorily. To my mind the Surgeon Specialist is so busy with his ward and operation theatre work that it is practically impossible for him to give proper management to the hospital. I think it will be admitted that even where there are two deputies there are certain matters that must be dealt with by the head of the institution himself.

Most members of this House know what the daily time-table of the Surgeon Specialist is, and I need only say now that on occasions difficulties occur in connection with the supervision of the financial arrangements, because of the other duties in addition to the general management of the institution. I shall refer to the records of the proceedings of this House and read just one or two sentences in the speeches that were made on the motion of the hon. member for Berbice River for the appointment of a committee. The mover of the motion himself said :

“ I understand that to-day there are in the institution a Senior Physician and a Senior Surgeon, and that the Surgeon Specialist, who was retained on account of his special qualifications in surgery, has been given the position of Resident Surgeon. He has to do administrative work which handicaps him, I am told, in the performance of his surgical duties, and I understand he would not touch it either. He is said to be Resident Surgeon, but I understand he is carrying out the duties for which Government employs him, and which he thinks are very much more important. The institution is being looked after by junior officers.”

He goes on to say :

“ The other aspect is that the fact that the Resident Surgeon cannot do it, the other officers have taken the reins in their hands, with the result that people who are intoxicated with authority and dominion before their heads are strong enough to bear it are running the institution. The under-dog suffers, and that is reflected in the people who go there for the benefit of their health ”.

Later on the hon. member for Central Demerara, after one of his usual excellent speeches, finished by saying :

“ It therefore only remains for me to ask that when that committee has reported due consideration should be given to its findings, and that its report should not be pigeon-holed.”

Lastly, in my reply on the subject, I said :

“ As hon. members know, some years ago, on account of measures of economy, it was considered desirable and necessary to combine the positions of Resident Surgeon and Surgeon Specialist. I do not know how this combination worked in the time of my predecessor, but I do know that in my experience there is no doubt that it has not been successful (Mr. Eleazar: Hear, hear), and Your Excellency is aware that in my representations for the 1935 estimates I have submitted strong recommendations that there should be a Medical Superintendent in charge of this hospital.”

That was the feeling of this House at that time. Then along came the Committee which began its work almost immediately after its appointment, and laboured strenuously for a number of months. That Committee went very carefully into the hospitals and other branches of the Medical Department, particularly the Georgetown hospital, and on two occasions at least the whole Committee was taken round the institution. The Committee examined the position of affairs for itself, it heard the witnesses, and it also studied the evidence in writing. One important feature was that several medical practitioners, some of them the best known, did not

appear before the Committee to give evidence, nor did the hon. member for Berbice River appear to say what he had to say in connection with the whole work of the department.

Hon. members have referred to the evidence which has been placed on the table. I also have a copy of that evidence. Stress has been laid, and rightly so, on the evidence given by the Resident Surgeon and Surgeon Specialist. There is one point I should like to make clear here. The post recommended by the Committee is a joint post of Medical Superintendent and Physician. I mention that point because it is important, particularly as in the remarks which were made and in the evidence of Mr. Grierson reference was made to a whole-time appointment of Medical Superintendent and not to a Medical Superintendent and Physician. In a part of his evidence Mr. Grierson states that an extra Physician is required and stresses the importance of a Physician and Assistant Physician. He and I discussed this question within six months after my arrival in the Colony, and he said he considered the most important appointment in the first instance was that of a Physician, with which I entirely agree. We want first and foremost a Physician at the hospital.

In regard to superintendence at the hospital, the great majority of medical witnesses agreed that there should be an officer who should devote considerable time to this branch of the hospital's work. With the exception of the Surgeon Specialist, and I think one other officer, they were all unanimous in that regard. I admit that they were not so clear in the recommendation as to how this appointment should be combined, or whether it should stand alone as a whole-time appointment. But the evidence of all the doctors shows that they are in sympathy with the appointment of a senior officer who would devote part of the day to the management and superintendence of the hospital. In regard to the view that a lay Secretary could manage the hospital, the Committee was not in favour of this policy, and the duties set out in the report represent very fairly the consensus of opinion as reflected by evidence. The view of the Committee in regard to a lay Secretary is that he could not possibly properly manage the

superintendence of the hospital. There is a great deal in the management of a hospital than merely seeing to the amount of rice or sugar, or the general cleanliness of the hospital, and carrying out boards of survey.

In a hospital with 600 beds and a large staff it is necessary to have a medical man at the head of affairs. He should know all the technical points in relation to inspection and make sure that the linen of an infectious patient has been boiled satisfactorily before going into the laundry. Inspection of the kitchen is another important branch of hospital work and a more important part than the inspection of foodstuffs. It makes for the better management of the hospital and the training of nurses if there is a doctor at the head of the institution who can co-ordinate the various branches of work. In England the importance of having a medical man at the head of such an institution is becoming more and more realised every year. I admit that in many hospitals lay Secretaries manage the institutions well, but there the functions of the hospital and the conditions of its management are totally different. The County Councils hospitals are models of their kind, and in all of them they have medical men as superintendents, either Surgeons or Physicians, and a Surgeon could also be a very good Medical Superintendent.

In the general debate one hon. member referred to the British Guiana branch of the British Medical Association being against this appointment. At the present time I have the honour of being President of this branch and at that meeting we were 13 in number. Five voted against the appointment and four voted otherwise, so that their opinion cannot be said to be unanimous. I may add that I did not vote. Just a word as to cost. Hon. members have stated that we have put £1,000 additional on the estimate. That is not an increase of expenditure as one medical officer has been struck off the establishment. I feel that the time has come when, as medical adviser to this Government, I should recommend an appointment of this nature. In doing so I am satisfied that behind me are the great majority of medical men in the Colony. In that majority of medical men there are many, including myself, who desire to see one of our own

sons filling this appointment. At the present time I am not prepared to say definitely whether we have one or not. If we have so much the better; if we have not I see no reason why we should not have one in a year or two. We have the Senior Physician at the Georgetown Hospital studying in England and it may be that in a few months' time he would return with one of the highest medical qualifications. I think I have covered most of the points in connection with this item. I intend to reply to the points which have been raised this morning but will defer them until the specific items are reached if that course is preferred.

THE CHAIRMAN: I leave it to the hon. member, but it might be better if he answers them as they occur during the consideration of the estimates.

MR. DE AGUIAR: I hope that it will not be necessary for me to rise again, but there are one or two points in the speech of the Surgeon-General that make it necessary for me to rise now. The Surgeon-General said that the Surgeon Specialist had not sufficient time to perform certain duties. I would have liked to hear whether the officer has not sufficient time because there is a shortage of staff. That is the crux of the whole question. Circumstances in the various districts require officers to fill gaps, and the only source to draw from is the Georgetown Hospital, which suffers in consequence and suffers all the time. I purposely refrained from dealing extensively with Mr. Grierson's evidence, but if members would read that evidence they would be convinced, as I am convinced, that no necessity exists for the creation of this post. Questioned on the point, Mr. Grierson said "I think the better system would be to have a Secretary for administration with more power than the present Steward and a better salary. It seems such a waste of time to have a medical man doing administrative work and nothing else." I prefer to take Mr. Grierson's opinion in this matter. Asked whether he suggested that a senior man should be brought from England, Mr. Grierson replied "No; when it comes to a Physician I have the highest opinion of the Physician in the Service. I think he can fill the bill quite well, but I think we should get somebody as a Physician or assistant." It was assistance he was look-

ing for, more men, and my complaint is that there is a shortage of men, but not of this type.

THE COLONIAL SECRETARY: The Surgeon-General has explained very fully and ably Government's view as to the necessity for this post. Some two years ago, after a debate in this Council, Government appointed a most competent and representative Committee to report on the medical services. That Committee had a majority of unofficials, and after a most exhaustive investigation, during the course of which they were placed in a position to gauge accurately the necessities of the case, they recommended the creation of this post. Government considered very carefully that recommendation and agreed with the Committee on this point, and the post was put on the draft estimates for 1937. Government still considers that the creation of this post is necessary for the efficient management of the hospital, but in view of the opposition of all Elected Members and in order that the views of the Secretary of State, who will no doubt consult his medical advisers on the point, may be obtained, Government propose to withdraw it so far as the 1937 estimates are concerned. I therefore beg to move the deletion of the item, which would entail, of course, a consequential addition in item 1 (*h*).

THE CHAIRMAN: That does not mean that I shall not reintroduce this item if I am advised by the Secretary of State that he agrees with the opinion of Government that it is a necessary vote, but for the time being the item will not be put to the Committee and the estimates will be reduced by that amount. It will be necessary to add another officer to the estimate.

Sub-head 1 (*d*) Assistant Surgeon, Public Hospital, Georgetown, \$3,120.

MR. ELEAZAR: This is a new item and is of a piece with the one just dealt with. The remarks which have been made with reference to the one apply with even greater force to the other. This Colony was deprived of the services of one of its ablest sons as a member of this Council. He was elected and was importuned to remain after attending one or two meetings, but he never returned and lost his seat. When questioned as to his reason he said "I have no time to waste, Government

is never open to conviction and I would not waste my time." If the Surgeon-General was a practising barrister and had gone before the Supreme Court and cited material parts of a case and omitted other material parts, as in this instance, I don't know what would have happened to him before the Judge.

Before I ever thought of moving the motion for the appointment of a committee I inquired from Mr. Grierson whether we would not be doing a good thing to get the services of a Specialist Physician, and I asked him because I considered him the best person from whom to inquire. I mention it now because his name has been so often mentioned. I spoke to him confidentially and he said "Well, he has no letters behind his name, but I do not think they have a better man than Dr. Bettencourt-Gomes," and after pausing a while he repeated the words. I am not satisfied that even on this point Mr. Grierson gave his assent to an Assistant Surgeon. When you appoint an Assistant Surgeon you block promotion of men at present in the Service, who are capable of performing these duties. All these new posts are absolutely against the weight of the evidence put before the Committee.

THE CHAIRMAN: I call on the Surgeon-General to explain the necessity for this item; then there will be an opportunity for answering him.

Dr. HENDERSON: Sir, in connection with the work at the hospital the opinion was expressed that there was too big a gap between the capabilities of the Surgeon Specialist and the other medical staff of the hospital. The witnesses also considered that the officer who holds the position of Senior Surgeon or Assistant Surgeon should discharge the maternity work of the institution. That as a matter of fact obtains now, but the witnesses were insistent that the Committee should press for an officer with special qualifications. As in the other instance, the Committee weighed the evidence very carefully and came to this conclusion. I may say that before joining in this recommendation, and particularly before recommending that the item be put on the estimate, I consulted the Surgeon Specialist and gathered that he also was in favour of such an appointment. This post

is a very important one in the establishment of the Georgetown Hospital and I have every confidence in recommending it.

Mr. DE AGUIAR: I must confess that I am not assisted in any way by the evidence in respect of this item. In Mr. Grierson's evidence the name of the Assistant Surgeon only came up once and that was when he was dealing with maternity cases and children. I will take the same stand as I did with the previous item, and that is to accept Mr. Grierson's evidence. What he said was "We ought to increase the number of Physicians to two because more than half of the work is medical."

Mr. HUMPHRYS: I am opposed to this item to a great extent because I do not quite appreciate what Government intend. Is the officer to be appointed a man from abroad and the present Senior Surgeon to be given a post elsewhere? I am after getting information more than anything else.

THE COLONIAL SECRETARY: There is no such post as Senior Surgeon. Medical officers are posted to the Georgetown Hospital and one of those medical officers draws a duty allowance as Assistant Surgeon, but he is not called Senior Surgeon or Assistant Surgeon.

Dr. SINGH: For the last two years the officers at the Georgetown Hospital have been designated as Senior Surgeon and Senior Physician. I myself questioned it.

THE CHAIRMAN: It does not create the post. There is no such post as Senior Surgeon; it never has been confirmed by this Council.

Mr. KING: I am sorry to say I cannot support this item. For some years it was the proud boast that this Colony had two experienced and most competent specialists in surgical work, and their fame spread through the West Indies from which people came to consult and be treated by them. If I had been convinced that there was need for this appointment I would be the first to support it, knowing as I do the necessity in cases of illness of having every possible convenience at one's disposal, but as far as I am aware there is no necessity for an appointment of this kind. Apart from increasing expenditure, which does

not weigh with me, I do not see in what way this officer is going to help. It has not been shown that the surgical work at the hospital is more than can be done by the two Surgeons there. One of them is at present on leave and in his absence a certain amount of additional work must fall on Mr. Grierson, but ordinarily, so far as I am aware, the two Surgeons can very well cope with the surgical work offering. I came here with an open mind hoping that I would have been convinced, but I say with regret that I have not been convinced of the necessity of the appointment.

Mr. DE AGUIAR: May I point out for the benefit of the Council that in the Blue Book for 1935 there is special mention of the post of Senior Surgeon, the name of the officer, his salary and duty allowance.

Dr. HENDERSON: I might just add a word at this point of the debate. It was felt during the inquiry that the Surgeon Specialist should be given an opportunity of travelling more around the whole Colony, so as to collaborate with the Resident Surgeons in Berbice, Suddie and elsewhere, if necessary. He has been so tied down in Georgetown during the past three years that it has been practically impossible for him to get away, and, speaking from memory, he stressed the point that the surgery in the Colony was not of a high standard, and that it would be most desirable to have it on a higher scale than it now is. One of the ways of effecting that would be for the Surgeon Specialist to go away from headquarters for a few days at a time to the various institutions seeing cases with the doctors, which would help them in their diagnoses, and by operating with them help them in improving their surgery. If that is done there is no doubt that the standard of surgery in the Colony will improve. It is regrettable but unavoidable that during the nine years that the officer has been in the Colony there is really only one officer who has benefitted by his presence. As I said, it is entirely unavoidable, but it is his duty not only to raise the standard by his own personal endeavours but to pass it on to others so that they might derive the benefit in skill by co-operation with him. There is no doubt that in a hospital of 600 beds you want a Surgeon and Assistant Surgeon who are well up in their work.

Surgeon-General that during the whole service of nine years of Mr. Grierson only one medical officer was able to learn. Let us examine that a little more closely and see where the blame lies. I have taken the trouble of examining the qualifications of a large number of medical officers in the Service and quite a number of them have the same qualifications as Dr. Mearns. If the idea is to train Government Medical Officers in a special branch of surgery it is the duty of the Surgeon-General to bring these officers to the hospital and in that way train them, but perhaps that policy does not find favour with the Surgeon-General. That would be the policy that any business man would try to pursue. It is a most serious thing that for the nine years that Mr. Grierson has been in the Colony only one medical officer has been able to benefit from his experience while there are other officers with the same qualifications as Dr. Mearns. If there is a glaring case of mal-administration that is, and a very good case has been made out.

Dr. HENDERSON: I rise to emphasise that I made the statement that although this had been the case it had been unavoidably so. I have no knowledge of the position before I came here, but ever since I came my personnel has been so limited that I have had to change men from post to post and have not been able to do anything further. I thank the House for giving the hospital two supernumerary officers two years ago who have been of great assistance in improving the standard there.

Mr. JACOB: I must confess that up to the present I have not made up my mind on this matter. In the Select Committee at one time I voted for the inclusion of this item in the estimate and at another I asked that it be deleted. It has exercised my mind considerably. After hearing the speeches to-day I feel that the item could well be deferred for a year or two. An attempt should be made to train our own officers who are bent on surgical work to take Mr. Grierson's place when he is sick or goes on leave. This case has greater merit than the previous one, but, taking everything into consideration, I consider the weight of evidence is against it.

Mr. DE AGUIAR: I agree with the

THE CHAIRMAN: I must admit that

the two authorities seem to be contradictory one of the other. The point is whether the post of Senior Surgeon has ever been created. There is only one way that a post is created: that is, by consent of this Council and approval of the Secretary of State. This Council has never voted any money for a Senior Surgeon nor has the Secretary of State approved of the appointment, and I say quite definitely that the appointment does not exist whatever the Blue Book may say. With regard to this appointment members will realise that with the retrenchment of one medical officer the additional cost is only \$720, which is not a very large sum. The point is this. We have heard a good deal about the surgical men whom we have in this Colony; we have heard mention of Mr. Grierson, of Dr. Romiti and of Dr. Mearns. The question is whether we can rely on Mr. Grierson and Dr. Romiti only for the extra surgical skill which is required in a country such as this. We would be taking a very considerable risk in my opinion to depend on them alone. I may say I have consulted Mr. Grierson on the subject and as the result of that conversation I am convinced that is the case. I am therefore unable to do as the hon. member for Berbice River and the hon. member for North Western District suggested, viz., to withdraw this item. It is one that Government considers necessary after full consideration. I will now proceed to put it to the vote.

The Committee divided on the question, and voted:—

Ayes—Messrs Mackey, Jackson, Walcott, MacDougall, Crease, Whittaker, Dr. Henderson, D'Andrade, Robertson, Austin, Mullin, Professor Dash, Dias, the Attorney-General and the Colonial Secretary—15.

Noes—Messrs. Lee, King, Jacob, Humphrys, Peer Bacchus, Dr. Singh, De Aguiar and Eleazar—8.

Mr. DE AGUIAR: I desire to draw Your Excellency's attention to the fact that the Elective Section are unanimous.

Sub-head 1 (e)—Medical Superintendent, Mental Hospital, \$4,800.

THE CHAIRMAN: With regard to this item I think it would be best if the Surgeon-General first of all put the case.

Dr. HENDERSON: Hon members know that Dr. Mitchell, formerly Superintendent of the Mental Hospital, has now retired. He was characterised as a Government Medical Officer up to the 1936 estimates. The time has now come when this Colony requires a specialist in mental diseases. We all know the good work that Dr. Mitchell carried out at the Mental Hospital. He himself told me that he was ordered to go there by the Surgeon-General, and that although he had seen a large number of mental cases in his time he never professed to be a specialist in mental diseases. The new appointment involves a salary of \$4,800 as an offset to the salary formerly paid to the Medical Officer with his duty allowance.

Mr. DE AGUIAR: This item does not involve the creation of a new post but the filling of a vacancy. My objection is to the increased salary. Presumably I shall be told it is because he must hold a diploma in Psychological Medicine. I suppose that Government will adopt the usual precautionary measure and bring the officer out on contract.

Mr. ELEAZAR: It appears that the intention is to fill this vacancy with a gentleman who has special qualifications. I notice that the salary is £1,000 with consulting practice. I don't like consulting practice. They usually leave what they have in hand to go in search of what they can get outside. If Government is going to pay an additional £50 for psychological qualifications we should have a chance of seeing what the officer is like.

Dr. HENDERSON: I do not think the hon. member need have any fear. In regard to a three years' contract, I understand Government has represented that to the Secretary of State.

THE CHAIRMAN: I cannot give any definite undertaking with regard to any formal contract. I will see what can be done in the matter.

Item (h)—24 Medical Officers, \$78,670.

Dr. HENDERSON: I move that the number of officers be amended to 25 and the vote to \$81,070. The reason for it is the deletion of item (e).

MR. JACOB: Is it the intention to have only one District Surgeon instead of two?

THE COLONIAL SECRETARY: That is the case.

MR. JACOB: I was made to understand that the scheme of District Surgeries had proved satisfactory and it was going to be continued. It appears that in a few weeks another decision has been arrived at.

THE COLONIAL SECRETARY: It is intended to proceed with that scheme as vacancies occur, but it is thought in connection with the estimates for next year that an opportunity will not offer for more than one of these surgeries, and therefore it is proposed to leave the item as in the draft estimates.

The Council resumed and adjourned until Wednesday, 11th November, at 11 o'clock.