

LEGISLATIVE COUNCIL

(Constituted under the British Guiana)
(Constitution) (Temporary Provisions)
Order in Council, 1953).

THURSDAY, 6TH SEPTEMBER, 1956.

The Council met at 2 p.m.

PRESENT:

Deputy Speaker

Mr. W. A. Macnie, C.M.G., O.B.E.
—in the Chair.

Ex-Officio Members :—

The Hon. the Chief Secretary,
Mr. M. S. Porcher, (Acting).

The Hon. the Attorney General,
Mr. C. Wylie, Q.C., E.D.

The Hon. the Financial Secretary,
Mr. F. W. Essex,

*Nominated Members of Executive
Council :—*

The Hon. Sir Frank McDavid,
C.M.G., C.B.E. (Member for Agriculture,
Forests, Lands and Mines).

The Hon. P. A. Cummings (Member
for Labour, Health and Housing).

The Hon. R. B. Gajraj.

The Hon. R. C. Tello

The Hon. L. A. Luckhoo, Q.C.

Nominated Unofficials :—

Mr. W. A. Phang.

Mr. C. A. Carter.

Mr. E. F. Correia.

Rev. D. C. J. Bobb.

Mr. H. Rahaman

Miss Gertie H. Collins.

Mrs. Esther E. Dey.

Dr. H. A. Fraser.

Mr. R. B. Jailal.

Mr. Sugrim Singh

Clerk of the Legislature—

Mr. I. Crum Ewing.

Assistant Clerk of the Legislature—

Mr. E. V. Viapree.

Absent :

His Honour the Speaker, Sir
Eustace Gordon Woolford, O.B.E., Q.C.
—on leave.

The Hon. W. O. R. Kendall (Mem-
ber for Communications and Works).
—on leave.

The Hon. G. A. C. Farnum, O.B.E.
(Member for Local Government, Social
Welfare and Co-operative Develop-
ment).

Mr. W. T. Lord, I.S.O.—on leave

Mr. J. I. Ramphal. —on leave.

Mr. T. Lee —on leave.

The Deputy Speaker read prayers.

The Minutes of the meeting of the Council held on Thursday, the 30th of August, 1956, as printed and circulated, were taken as read and confirmed.

LEAVE TO MEMBERS

Mr. Deputy Speaker: I have to announce that leave has been granted to the hon. Member, Mr. Farnum, and the hon. Member, Mr. Lee, to be absent from today's meeting.

LETTER FROM MR. W. T. LORD

I have also to announce that I have received a letter from Mr. Lord who is at present in the United Kingdom, expressing his regret at the death of the late Mr. Raatgever, C.B.E., (Deputy Speaker). I propose to send copies of this letter to hon. Members and to acknowledge its receipt.

PAPERS LAID

The Financial Secretary: I beg to lay on the table:

Minutes of a meeting of Finance Committee held on the 27th of July, 1956.

GOVERNMENT NOTICES

INTRODUCTION OF BILL

Mr. Cummings (Member for Labour, Health and Housing): I beg to give notice of the introduction and first reading of a Bill intituled:

"An Ordinance further to amend the Factories Regulations (Validation) Ordinance, 1956."

ORDER OF THE DAY

PROPOSALS FOR INCREASES IN PRICE OF RICE

Mr. Phang, on behalf of Mr. Correia, asked and the Financial Secretary laid over the reply to the following question:

Q: Will Government afford the Legislature an opportunity of discussing any proposals for increases in the price of rice for local consumption before any such increases are given effect to?

A: Under Section 15 (2) of Chapter 249 of the laws the Rice Marketing Board may with the approval of the Governor determine and fix the price at which it sells rice for local consumption, and under section 15 (3) the Governor may fix the retail price of rice sold for consumption in the Colony. While there would be nothing to prevent any Honourable Member from bringing a resolution to this Council on the subject of local prices for rice, it is considered that it would not be proper for Government to give a general undertaking not to perform duties imposed upon it by law before such a resolution was debated in this Council.

PHARMACY AND POISONS BILL

Council resumed the debate on the motion for the second reading of the Bill intituled:

"An Ordinance to make provision for the control of the profession of Pharmacy and the trade in drugs and poisons."

Mr. Deputy Speaker: The second reading of this Bill was moved and the hon. Mover in charge of the Bill spoke to the second reading and it was seconded at the meeting of the Council held on Thursday, the 28th of June. I now ask whether any other Member wishes to speak in the debate on the second reading.

Mr. Cummings: Before any hon. Member rises I might point out that there has been a slight change since I last spoke and reported to this Council that I had met the Pharmaceutical Association, and that they were at that time in agreement with the proposed amendments to this Bill. I have since had a letter dated August 28—I think that was just before our last meeting—in which they said that they had since had time to study the amendments carefully and they were convinced that they should not have agreed to them. I just want hon. Members to know this and not to be able to say that they know nothing of the change in the position.

Mr. Deputy Speaker : I think hon. Members have been furnished with a copy of the hon. Mover's remarks on the second reading from *Hansard* of the 28th June. I asked that that be done so as to refresh the memory of hon. Members as to what the hon. Mover said on that occasion. I now ask whether any hon. Member wishes to speak on the second reading.

Mr. Correia : It seems as if hon. Members on this side of the Council do not care to speak on this Bill.

Mr. Deputy Speaker : Maybe they are waiting for the Committee stage.

Mr. Correia : I am sorry to hear the hon. Mover's remarks about the attitude of the Pharmaceutical Society, since we have already begun to deal with the amendments referred to by the hon. Mover during the second reading of the Bill. I think those amendments were in accordance with the representations made by certain persons in the profession on the provisions in the original Bill. They were not in the best interest of those people. I think that the Bill is an excellent one with the amendments that have been proposed. There might be a few minor amendments which I will move during the Committee stage, but on the whole I think the Bill is an excellent one and is in the interest of those people who have served this country for a very long time — especially in the rural areas—as sick-nurses and dispensers.

I agree that a pharmacist is a highly skilled person who has to spend a number of years in order to qualify as such — and has to be able to dispense drugs and poisons. I agree that there should be fair protection for qualified persons, but at the same time we have to consider those Sick-nurses who served in the past and are still serving the people of this country.

They are to be found in hospitals throughout the Colony—either at the Public Hospital, Georgetown or at estate hospitals. They have had many years of training under various doctors in handling tropical diseases — some for as many as 25 or 30 years — and they put their knowledge to very good use for the benefit of people in the country districts. Many of them have had enough practical training to qualify them as doctors but unfortunately they have not had the University qualification.

I have lived in the country most of my life and I have seen them working. They serve this country well, especially in districts where a doctor may be miles away. These sicknurse-dispensers have had between 25 and 30 years' training under doctors in hospitals in the treatment of every type of tropical disease. As a matter of fact many of them in hospitals are very useful to young doctors in the treatment of tropical diseases.

On the other hand chemists and druggists are not in sympathetic touch with patients; they merely compound the doctor's prescriptions. I am very unhappy now to hear the hon. Member for Health say that the sicknurses and dispensers are not satisfied with the proposed amendments. I will not say more until we go into Committee.

Mr. Cummings : I rise to a point of correction. There are no new amendments coming forward. I only wanted the Council to know that a statement which I made had to be corrected, because the situation has subsequently changed, but there are no new amendments coming.

Mr. Correia : I will leave that aspect and deal with the second stage. I feel very much concerned about the situation in the remote areas of the Colony. I am glad to see that the Bill (clause 34) gives permission for

[Mr. Correia]

the sale of drugs in remote areas, and that clause 33 permits shops and stores to continue to sell patent medicines which the people in the country districts use so frequently for common ailments.

Mr. Deputy Speaker: There is an amendment to clause 33 in the paper which has been circulated.

Mr. Correia: The amendment does not affect that part of clause 33. With those few remarks I take my seat until the Committee stage is reached.

Rev. Mr. Bobb: I wish to draw attention to one aspect of this Bill on which, from my point of view, sufficient information is not yet available to hon. Members. It appeared to me that there was the possibility of the hon. Member supplying that information when he emphasized that particular aspect in his opening speech, and I hope he will make up the deficiency in his reply to the debate. I refer to the assurance given on page 2 of the cyclostyled extract from the *Hansard* report of the hon. Member's speech, that sicknurses and dispensers will continue to practise for a period of five years, within which time I assume the situation would right itself, and that after that time they would be permitted to continue to sell those drugs which they are now permitted to sell. That is my understanding of the remark made by the hon. Member.

I do not know how the period of five years was arrived at. In the interest of all concerned I would like to know, first of all, what is the significance of five years; what Government is doing or proposes to do in order to increase the number of chemists and druggists, so that the sicknurses and dispensers who have been

doing and will continue to do various types of work, cease to perform those duties? What will be the new situation? Therein lies my biggest fears. I grant that this measure is very advantageous, and I recognize that the sicknurses and dispensers are anxious to preserve their means of earning a livelihood, and would want to continue to sell those drugs. But if the assurance given is that after a period of five years they will not be permitted to do so, what is Government proposing to do in the matter?

It takes roughly 3 or 4 years for a person to qualify as a chemist and druggist. Will there be a greater intake of students to meet the needs of the country? Nothing has been said about that, and I would very much like to know what is the significance of this period of five years with respect to meeting the needs of the country with more qualified chemists and druggists.

Mr. Jailal: Speaking generally I congratulate Government on this measure. I view it as a step forward. While I cannot agree with the Bill *in toto* I agree with the principle underlying all that has been put up. I think the Bill aims at a higher standard of efficiency and safety, and, generally speaking, a better condition of health for this country. Because of this underlying principle I declare myself in favour of the Bill.

But consideration should be given to certain aspects of the Bill because they seem to cut sideways. Whenever we enact a law it must be for the good of the community in general. In course of time, if this Bill becomes law, I can see more of our young people qualifying and being assured of being able to pursue what I regard as a profession. No longer would the dispensing of drugs be a shop business; it would as-

sume its real position of a profession—something to which one could aspire. Many lads have been dissuaded by their parents and by general advice because of the fact that there is no real scope in this field. At the present time a youngster has to attain a certain educational standard, with passes in certain specialized subjects, in order to gain exemption from the preliminary examination for chemists and druggists, and has to serve a period either in a pharmacy or a recognized hospital. The previous speaker mentioned that it took three or four years for a student to qualify as a chemist and druggist, but I have known of cases where it took a much longer time, and I propose later to explain how that came about.

My opinion is that we do not make chemists and druggists every day, nor do we make sicknurses and dispensers in the course of three or four years. To me it is a stepping-stone to the zenith of the medical profession. This country must aim at the highest, and we must accept nothing but the best. But in realizing our ambitions I must warn that we must not break faith with those who have served this country well for many years. I refer to the men who have served this country for a generation and served it well—the sicknurses and dispensers. From all I have read and the research I have been able to make, it seems to me that sicknurses and dispensers are a group of people peculiar to the Colonial Empire, who for financial and economic reasons have been used in the promotion of health among labourers imported from various parts of the world. In bygone times, and even today, a sicknurse and dispenser is found on board every ship on which immigrants are being repatriated, and on such voyages he is called a compounder.

In hospitals in the outlying districts of this Colony we find sicknurses and dispensers making up solutions of various kinds, and making up doctors' prescriptions. At the Bartica Hospital, for instance, there is no pharmacist. It is not necessary, in my opinion, because the volume of work for a chemist at that hospital does not necessitate the employment of a qualified chemist and druggist. But the sicknurses and dispensers are the people who are going to be hurt when this Bill becomes law. I do not refer to the entire group—the younger set. I refer in particular to a group of about eight sicknurses and dispensers who have given this country unblemished service for over 25 years. I feel that these men have acquitted themselves creditably and I wish to recommend to this Council when we come to consider the Bill clause by clause, that something be written into the Bill to exempt those men who have served well and who, as I have said before, have an unblemished record.

Logs which dispensers have kept at hospitals can be examined. I doubt anything would be found in those logs to discredit them. We would hear words of blessing from the people in the ordinary walks of life, and even outside of them, because they know these men by the practice they have acquired and the skill they have shown when called upon in time of need. I cannot desecrate the medical profession by saying that these men, these eight or nine to whom I have referred, are equal in knowledge with a doctor, but they are capable and experienced on all the counts.

We talk in terms of passing this Bill. We can do so, but the fact remains that it would mean that when a man retires a sicknurse and dispenser another who sits the examination would be able to oust that man

[Mr. Jailal]

from pursuing a small livelihood after his retirement. These sicknurses and dispensers have served in places like Morawhanna where a patient does not see a doctor until he is flown out of the area. They have had to go on their own and do what doctors are unable to do because we did not have doctors to spread around. This has been going on for several years. We cannot just wipe them off the slate. If we are going to draw the line, then we must make a special provision that as long as these eight or nine people continue to live, British Guiana would not be deprived of their services.

I feel it is worthy to give a small bit of praise to these forgotten people, because, as everybody would agree, they are poorly paid and poorly housed in many cases; they are very insecure because of their basic pay, and I want to record here and now that to my mind they have done far more work and have served better throughout the years than have the chemists and druggists.

I am in the habit of blaming the past Governments, but in this case I am not willing to do so, because the general economy of the country was such that in past years it had to connive at certain misdeeds. We find that 25 or 30 years ago some parents who could not afford secondary education for their children took their lads to chemists and druggists, asking that they be put to learn the drug store business. These lads, who were paid wages as low as 60 cents or 72 cents per week, stuck to the business. They attained the basic: that was necessary if they were to be able to do the work, but they were outside of the opportunities of qualifying themselves and as time rolled on, with Government being completely lax or conniving at the situation, they were allowed to continue in the business, and in some

cases they established themselves. I feel it would be unfair to rob them now of their means of livelihood. A man entering the business at a tender age 25 or 30 years ago, now a man with a family and a certain amount of responsibility is a man probably just a little bit over the borderline for taking up study. At 40 one is mentally lazy—only in rare cases does one hear of a man taking his M.D. at 60.

Mr. Cummings: I hope the hon. Member is speaking about himself.

Mr. Deputy Speaker: I, too, must take exception to that.

Mr. Jailal: There are not many of us past 40 who would be willing to take an examination.

Mr. Deputy Speaker: That is not being mentally lazy.

Mr. Jailal: I feel that they would be given the edge in the five years to be allowed, but will five years be enough? Can we make these fellows really pass this examination? Or are we going to snuff them out completely? It is a question that needs close examination. It would mean a life of hardship for them, because this was all they were accustomed to; this was all they knew. Later on I will make a recommendation that some further assistance be given to these people. What happened was wrong in the first place and we have to live with it to some degree.

There is another group of people, whom I am not very sympathetic with at all. They have been running drug shops and have been unregistered, and I do not feel that they come within the category of the persons I have been talking about just now because I feel they have deliberately sat by and done nothing, as if to say, "the

other chaps are not qualifying, therefore we too are not qualifying." I feel that two years are probably just enough for them. These chaps are not as mentally lazy as I am. They are younger people; I started out by saying there should be nothing but the best for British Guiana. That should be our aim.

On the other hand there has been the complaint: "We have not been able to qualify because the Board was dead set against us, and they are the examining Board." I cannot prove or disprove the truth of this, but for myself, under the old order of things I was one who refused to have anything with pharmaceuticals or studies in that direction because I felt I would never pass as it seemed there were certain people who were allowed to pass every year and a certain amount who were disqualified. I came to that conclusion as a very young man from all I had heard around and about.

I do not care who disagrees with my views on Federation: my feelings are that British Guiana should enter it. Anyway, I feel that British Guiana's people should qualify themselves in all the professions and on a basis equal or better than those who are within the Federation, so that in the course of time we can also find places for our people in the Federation. I feel it is quite wrong for us to be paying money towards assisting to promote educational facilities in the West Indies, including the University College, and have to look further than British Guiana and the West Indies for our Government officers. We should not have to look to England for our Government Pharmacist. For a long time that was where we have had to find them. A Pharmacist was just as hard to find as an Architect-designer. Are we going to stay in the same rut year after year? Our pharmacists cannot go to Trinidad

and throw open doors — they would have to sit an examination first. They cannot compete in St. Kitts and St. Lucia. What is the use of having our boys qualify for drug stores in Regent Street where they are almost as plentiful as cake shops? Our students must sit the examination at our University College level to qualify them for a larger field of service.

There is another aspect of this Bill which I shall attack very strongly when we come to the Committee stage, and which I will refer to now. There is some concern that perhaps the Director of Medical Services will be *ex-officio* Chairman of the Board. There is a principle involved here. Not because a Director of Public Works, for example, has studied at a college he is better equipped professionally than the engineers in their own right in his Department. If Government does not follow the practice of appointing the Director of Medical Services or some other highly qualified person—an outside person—to be the Chairman of the Board, then there would be as much or even more trouble than there has been in the past.

Mr. Cummings: May I ask the hon. Member what is the clause to which he is referring? I just want to get that clear so as to be able to reply to the hon. Member.

Mr. Jailal: I will have to look at it; it is the one dealing with the constitution of the Medical Board.

Mr. Cummings: Is the hon. Member referring to Part II—clause 3—on page 4 of the draft Bill?

Mr. Jailal: I am referring to the First Schedule which is headed "Constitution of the Board" and it is on page 17.

Mr. Cummings : To a point of correction: That is not the Medical Board. The Medical Board has to be appointed. That is a Board which represents members and deals with a wide field of health matters. The pharmacists, I believe, have a representative on that Board. This is a technical Board which deals with poisons and if the hon. Member looks at the marginal note he would see. This is something highly technical and it requires quite a lot of technical knowledge.

Mr. Jailal : Before I reply I would like to draw the attention of the hon. Speaker to the amount of time lost on account of this construction.

Mr. Deputy Speaker : I have noted the hon. Member's remark. The discussion of the point began at four minutes past three. I made a careful note when the hon. Member began to speak.

Mr. Jailal : I feel that the Chairman of this Board should be an independent outsider and that he should be a person well versed in chemistry. I feel that the D.M.S. should fill this place in the regular order of things. If he is not Chairman he should be *ex officio*, Vice-Chairman. There is a set-up like that in Government and it would make things easier when one has to "swallow the pill". I feel that this is a kind of Department which might slip into a pitfall. I hope the hon. Member will give consideration to the points I have made because I propose to develop them fully in Committee stage. I desire particularly that consideration be given to those people—sick-nurses and dispensers—who have given long and valuable service in the rural areas.

Mr. Sugrim Singh : This Bill, to my mind, is very important, and if we

do not handle it carefully it may have serious consequences throughout this country. I am indeed very glad that the hon. Mover of the Bill, to quote his own words in introducing it, "aims at a higher measure of protection with regard to the sale of drugs and to the people who purchase them in the interest of their health." Like other hon. Members who have spoken before, I agree that we must aim at improving the position. We have inherited a legacy, unfortunately, through the experience of various persons who, for various reasons, have been unable to qualify by taking a number of examinations but who, in effect, have been approved by the most eminent authority and whose practice stand out over a long period to justify their existence in this land.

I think every Member of this Council shares the view that we should endeavour to hold the scales evenly and look at both sides of the question. I am glad the hon. Mover of the Bill has seen the reason in the objections raised and has climbed down to accommodate some of these people who have served this country so well. Finally, I wish to draw the attention of this Council to certain other defects relating to the amendments, which I believe could be remedied in the Committee stage of the Bill. I want to see every endeavour made to have our people qualified but, on the other hand, we have to be careful that we do not introduce legislation to wipe out the large majority of these people when they are at the moment serving. We are in this position; The world today is moving forward and we would like to have qualified people in this field—there is no question about that. But there is today in this country—in this

and certain other quasi medical fields—a situation where some degree of importance is attached to long years of service and where for loss of those years we have had persons admitted and given full powers and every protection as those who have actually taken the academic examinations. We have the facts.

There is provision whereby a sicknurse and dispenser with long years of experience can apply to the Medical Board for registration as a dentist—and that is speaking by and large. The point I am making is that we cannot make “fish of one and fowl of the other,” and I say that our unqualified pharmacists should be given a similar privilege. If we are going to put a premium on experience we have to be consistent, and not grant the concession in one case and withhold it in the other. I think the hon. Mover of the Bill might consider this point in his reply.

The hon. Mr. Bobb has raised a very important point. This situation has been existing for more than twenty-five years and in a rather humorous vein I would say that it is better to sentence a man than to have him under suspicion. These people have five years within which to improve their position and qualify themselves, but I can well imagine that when the time comes they would say that it was impossible for them to qualify. As the hon. Member (Mr. Jailal) has pointed out, most of them have passed the examination stage. Most of them are too busy with their work and one knows how difficult it is to work and prepare for examinations at the same time. If they had the time they could have consolidated themselves more and could have built up more confidence in the little communities in which they run their business.

I imagine what would happen when Government says to them: “You have had a probationary period of five years, the time has now come when you must go.” Some of these people might never be able to take an examination yet they have given service for over 25 years, and I will be “carrying coal to Newcastle” if I were to develop this point any further. Most of the qualified men seek the bright lights of the City, and in the scheme of things the majority of our doctors find themselves in the City also. Therefore when a man becomes ill in the City we find a doctor, a sicknurse and dispenser, a pharmacist and also a couple of nurses at his disposal.

In the rural areas the bulk of our population resides. The figures show that in the whole of British Guiana there are only 150 chemists and druggists, 243 sicknurses and dispensers, and 120 medical practitioners. In view of the paucity of their numbers the chemists and druggists are attracted to the more lucrative field in the cities, so that people in the country districts would have to incur the expense of going to the cities to be served by them. Why shouldn't the people in the country areas be able to have their prescriptions made up on the spot?

There are many chemists and druggists who do not carry on drug stores. We need qualified chemists and druggists, but according to the second amendment on the paper which has been circulated, a chemist and druggist is to be allowed to attach his name to several drug stores. Why is it necessary to have the name of a chemist and druggists affixed to premises where drugs listed in a particular schedule are sold? The reason is that a qualified person must be on the spot to see that the particular drugs required are

[Mr. Sugrim Singh]

served to the public, because there might be danger to life if there is the slightest mistake. But how can a chemist and druggist attach his name to six drug stores, some of which he never visits at all, and exercise any degree of supervision of the sale of a particular class of drugs? I consider it a physical impossibility, and that the very object of the law is defeated. Usually that type of chemist and druggist is hardly able to move about. He walks with an umbrella and sits for a while in a drug store and then goes to another. It is a disgrace. If there must be supervision let us have proper supervision. If there is to be scouting around, then let us have scouting around. I suggest that a chemist and druggist should not be allowed to supervise more than two drug stores.

I am told that of the 150 registered chemists and druggists in the Colony only 81 are actually engaged in the drug business. The others are employed by Government and fully secure, and have no desire to be ubiquitous supervisors of drug stores. There are 500 drug stores, and we can understand how 81 chemists and druggists are able to fit in. We hope to achieve the ideal some day. In other parts of the world, wherever there is a pharmacy or drug store one can find a qualified chemist on the spot all the time. We are hoping for that day in this Colony, but until such time we have to move very cautiously.

In the amendments which have been submitted by the hon. mover of the Bill I am very glad to see that he has thought fit to remove, to some extent, the difficulties which the draft Bill would have caused sicknurses and dispensers. Enough has been said about them, and there is hardly anything I

can add. But I wish to draw attention to the proposed amendment to clause 20 by the addition of the following as subclause (2) :

“(2) Where a person qualified under paragraph (a) of subsection (1) of section 9 of this Ordinance for registration as a Pharmacist was, on the 30th of June, 1956, carrying on a business which comprises the retail sale of drugs in more than one set of premises the conditions set out in paragraphs (a), (c) and (d) of subsection (1) of this section shall not apply to such person prior to the 1st of July, 1961.”

According to this amendment a pharmacist or chemist and druggist is to be permitted to carry on his own business in which he retails drugs in more than one set of premises. When the proper time comes I shall move an amendment to the effect that he should, in addition to his own business, be permitted to supervise one additional drug business.

There is also a proposed amendment for the insertion of a proviso at the end of subparagraph (iii) of paragraph (b) of clause 33 (1), the effect of which would be that unless he has a supervising pharmacist, the proprietor of a drug store would not be able to retail such ordinary drugs like Phensic, Aspirin and Koray tablets. He would have to sell them in bulk. I propose to move an amendment to allow any drug store to retail such common preparations.

Under clause 19 of the Bill the proprietor of a drug store is not permitted to use the sign “Drug Store” or “Pharmacy” unless he is a registered chemist and druggist.

By and large I think the Bill holds the scale evenly, and with a few amendments in Committee I think we should be able to meet the situation.

Miss Collins: With your permission, sir, I would like to read from the Hansard report of the debate which took place in the First Legislative Council on the 24th of January, 1930, on a Drugs and Poisons Bill. Dr. Kelly, then Surgeon General, in replying to the debate said:

"I do not know that this Bill should raise so many issues in its present form. This Bill is an endeavour, and a belated endeavour, on the part of the Chemist and Druggist Board, the Medical Department, and the general ethics controlling the sale of poisons to protect the public . . ."

"I might mention that this Bill was twice referred to the Secretary of State and twice it came back with objections. One objection was—I do not think it was intended as such — the clause says 'No chemist and druggist shall have his name over more than one premises, but he went further and says shall own more than one premises'. Of Course that was an objection by the Secretary of State, but I see no reason why he should not own more than one premises."

I respectfully submit that 26 years ago a similar debate took place in this Chamber. I have read through some of the remarks by Mr. Brassington, Mr. Seeram and Mr. Fredericks, and I have heard a repetition from hon. Members of this Council of all that was said in this Chamber 26 years ago. I have received representations from both sides — unqualified individuals and registered chemists and druggists — with whom I am not concerned. What I am concerned with is human health. I have heard argument that these unqualified persons have been practising as chemists and druggists for several years, but who is to prove whether harm has not been done to the public? I know of a case in which a pregnant woman went to a drug store and asked for George's pills and she was served with tablets. She subsequently had an abortion. There have

been many cases in which persons have been served with wrong drugs, but cases fell through for lack of sufficient evidence.

I wish to congratulate Government on the Bill as printed and presented to this Council. We have had unqualified persons selling drugs 26 years ago, and it is for hon. Members to say whether Government or the unqualified persons are at fault. How much longer are we going to continue to gamble with the lives of the general public? I cannot support the proposed amendment to permit sicknurses and dispensers to sell certain drugs and poisons. If the permission is limited to remote areas where there are no chemists and druggists I would support it.

I am grateful to Government for the Bill in its original form. It may impose some hardship on those unqualified persons who have been practising as chemists and druggists for 26 years, but the public must be protected. I would remind hon. Members that there is protection in the legal profession, and that the protection of public health is even more important. It is probably because of the unfair competition by unqualified persons that we have only 150 registered chemists and druggists in the whole of this Colony. I will have some suggestions to make when we go into Committee.

Mrs. Dey: I rise first of all to congratulate the hon. Member on the thought he has given to this Bill. As I was reflecting on this Bill after returning home from Wakenaam I received an extract from the Hansard of the 28th June last when the Bill was introduced, and I am very grateful

[Mrs. Dey]

to you for this, sir, as it has saved me going through all my files. In this extract, as I read it, the hon. mover mentioned:

"The pharmacists have been pressing for this legislation for four years now, and it is in their interest and the interest of the public to have it on our statute books."

I pass on. As we all know, the hon. Member is a lawyer; he is a very broad-minded individual, and I know he will never base his arguments from the particular to the universal. But I read further in this extract that representations were made by the sick-nurses and dispensers and by a number of other people who have, for a number of years, been selling proprietary medicines. If the Bill went through in its present form, these people would be deprived of their means of livelihood, and therefore, from amendments which would be put forward by the mover, they would continue to enjoy certain privileges up to five years only. What I am concerned with is, that one may well ask these people after this period of exemption, "*quo vadis*"? Must they then ask the Member for Communications and Works to give them a job on the road programme? Can they, with eight, ten or twelve children to support begin then to study to pass an examination? What are we going to do for these people?

Mr. Cummings: Would the hon. Member give way for one minute? I said:

"If this Bill went through in its original form, these people would have been deprived of a livelihood after all these years. Government has, therefore, sought to effect a compromise by the amendments proposed. The decision is that the Bill would be amended so that there would be a continuation for a period of five years only, of the practice whereby more than one drug store is served by one chemist and druggist, but that is in respect of existing cases only."

This will not affect the livelihood of these people. If one looks at the amendment one will see that they will be able to continue indefinitely but on a different basis.

Mrs. Dey: I thank the hon. Member, but I have in mind the person who has only one drug store. Wherein lies his future after these five years?

Mr. Cummings: There is no limitation there. It goes on indefinitely.

Mrs. Dey: I thank the hon. Member. That will make my speech shorter. As I understand it, Government is not going to protect the drugstore people who sell drugs only as a part of the business: the man, for instance, who carries on a business and wants permission for his wife to sell a little glauber salts and other items. I am sure that when we get to the Committee stage and the hon. Member hears suggestions that will be made he will in his broad-mindedness support them so that only those people already in the drug business will be considered, and so have a rest from their worry.

Mr. Deputy Speaker: Does any other Member wish to speak? If not, I shall ask the hon. mover to reply.

Mr. Cummings: I express my gratitude to the Council for the way it has received this Bill. There have been certain misinterpretations which I shall seek to correct.

The hon. Member, Rev. Mr. Bobb, was worried about the proposed period of five years. If the hon. Member studies the draft amendments, he will see that the Sicknurses and Dispensers are being protected indefinitely, for their lifetime. Government rules that they should be registered as Pharmacists within a professional ambit

more extended than it previously was. Provided they remain in the same area the effect of the amendments holds. That aspect of the Bill sees to it that they do everything they had done before. I think that answers Mr. Sugrim Singh, Rev. Mr. Bobb and Mr. Jailal.

Rev. Mr. Bobb: Before the hon. Member disposes of my question, there is a point I want to raise. Would he go on to say what Government proposes to do in regard to the intake and qualifying of chemists and druggists? That has not been answered.

Mr. Cummings: I have not come to that yet. One does not answer everything at the same time. I disposed of the hon. Member's question concerning sicknurses and dispensers and the period of five years. Normally I would wish notice of such questions because I am not fully briefed, but I think I can say that the Government Pharmacist conducts classes for apprentices from various places and these apprentices take their examinations. But why place the onus on Government? Government ought to find enough pharmacists to man its institutions, but this is a question of supply and demand, and if we can do anything to encourage people to study pharmacy, then we will. The Rev. Gentleman seems to be putting on us an onus that does not belong to us.

Rev. Mr. Bobb: On a point of order, Mr. Deputy Speaker: I have done no such thing. I have asked what Government proposes to do —

Mr. Cummings: I do not know if I should give way.

Mr. Deputy Speaker: But you have given the hon. Member—

Mr. Cummings: All right, sir.

Rev. Mr. Bobb: What does Government propose to do to increase the number of chemists and druggists and to improve the quality of chemists and druggists during this period? Because if we are going to restrict chemists and druggists from using their name on several premises after a certain time, we must know what else is proposed to be done.

Mr. Cummings: This is what Government is doing to increase the number: it is producing legislation to raise the standard of the profession and prevent unqualified people from selling eventually. As Miss Collins pointed out, this type of business has attracted more people. I would be grateful if the hon. Member (Rev. Mr. Bobb) at a later stage would tell us the sort of proposal he has in mind. As I indicated a moment ago, there is a curriculum and there is an examination. I appreciate Mr. Jailal's idea of high standard training by the University College of the West Indies, but how are we going to reach that stage? I know the Director of Medical Services is trying an extended curriculum and trying to bring the profession up to the English standard but there are all sorts of difficulties. These aspects are not at all overlooked.

● on the question of a number of drug stores being served by a single dispenser —

Mr. Deputy Speaker: Chemist and druggist.

Mr. Cummings: A single chemist and druggist, thank you, sir; I think when we come to the Committee stage hon. Members will be satisfied with the amendment as proposed.

Mr. Deputy Speaker: Is it before us?

Mr. Cummings: Yes, among those that have been circulated.

Mr. Deputy Speaker : I think there was some objection.

Mr. Cummings : Well, Mr. Deputy Speaker, Miss Collins did not like the amendment, but I conceive that in a democracy, when one is trying to do something, the greatest good for the greatest number, one has to think about everybody, and something that will alter the existing situation must result in hardship to some people. Consequently, Government has compromised. There are not sufficient chemists and druggists to go around at the moment so we will allow the practice of one serving more than one premises to continue for five years; not after 1961.

I do not think there is much left for me to reply to, because most Members spoke in favour of the Bill. There is, however, just one other point. Mr. Jailal described the present Board as filled with outsiders. I can see no objection in that case. It is a Board to deal with the administration of a very technical Ordinance. If one looks up Part II of the Bill, where it refers to the establishment of and the constitution of the Pharmacy and Poisons Board one will see the composition of the Board as proposed. I cannot see what will be got out of having a lay Chairman. Our chief medical adviser should be the Chairman. However, neither the Director of Medical Services nor I myself have any strong feelings on this, and I will be grateful for the views of any other Members when we come to deal with it in the Committee stage.

Mr. Deputy Speaker : I may be forgiven, but before I put the question I would like to make one or two remarks which may be worthwhile, taking into consideration that in the Committee stage I do not propose to

participate. To the question proposed by the hon. Member, Rev. Mr. Bobb, as to what is to be done to increase the number of qualified men, the hon. mover replied that it is only for five years that people will be allowed to supervise more than one operation under this particular provision. But I would suggest that whereas the hon. mover has said there are not sufficient qualified men to go around, I think the hon. mover should also consider the fact that if one qualified man can supervise any number (and I believe there are, in fact, people who supervise up to six), that will contribute to the number of drug stores being in excess of qualified chemists; and if we are trying to raise the ethical standard to that of the most democratic country in the world (I personally think so), the United Kingdom, we have also to consider that there one qualified man cannot serve more than one business. That is my understanding—I took the trouble to find out. In that case there would not be much encouragement for the young men to come forward and qualify.

Mr. Cummings : I wish I had heard it before I replied. I do welcome it.

Mr. Deputy Speaker : I am only throwing it out for consideration.

IN COMMITTEE

Council resolved itself into Committee to consider the Bill clause by clause.

Mr. Luckhoo : In looking through the record dealing with the amendments in *Hansard* I saw that Your Honour stated that you would afford Members a full opportunity to discuss them and that you yourself would have much to say in Committee stage. I guess you regard this as an opportunity to bring to bear much learning on this subject.

Mr. Cummings : In view of the great public concern that has been evidenced by those Members who have already spoken, I think this is also an opportunity to get on with the business of the Council. What I desire to ask, however, is that we try not to do anything which would be regarded as a precedent in the future and which would interfere with the privileges of this Council.

The Chairman : I must thank the hon. Members who have spoken and I must also thank the hon. Mr. Luckhoo for the invitation. At the time I said that I would have much to say in the Committee stage, I had no idea of the debate that has taken place, and that I would have been in this position—in the Chair. I can assure the hon. Member (Mr. Cummings) that, as I have said before, I shall endeavour not to create any embarrassment to this Council and that if I express any view in this matter it would be what I feel I should say in the light of my long experience — all that I know through the amount of experience which, as the hon. Mr. Jailal would say, a man of over forty should have.

Clause 1 passed as printed.

Clause 2—*Interpretation.*

Mr. Cummings : I beg to move that the comma and figures “1936” at the end of paragraph (c) of the definition “duly registered” be deleted.

Amendment put, and agreed to

Clause 2, as amended, passed.

Clause 3—*Establishment and constitution of Pharmacy and Poisons Board. First Schedule.*

The Chairman : Would the hon. Mover prefer to take the First Schedule or to take the clause alone.

Mr. Cummings : As the Council pleases.

The Attorney-General : I would prefer that the Schedule be taken first.

The Chairman : That is the normal procedure, I think.

Mr. Jailal : As regards the First Schedule I am proposing that the word “Two” be substituted for the word “One” in paragraph 2 of the First Schedule. My reason for advocating that is that I do not see where the sicknurses and dispensers would have any representative on this Board and I feel that they should have a voice in it since it savours of protection of their interest. Later on I intend to propose an additional member. I actually felt that the Board should be one of nine members and, as I have said before, I feel that the Director of Medical Services should not be its Chairman. Therefore, if anyone else is going to be the Chairman there would have to be an additional member. I want to propose two additional members—one to be a Medical Practitioner outside the Government Service, and the other a duly qualified sicknurse and dispenser.

The Chairman : I am afraid we have to get the exact words of the amendment and the exact place where it should go.

Mr. Jailal : That puts me in a somewhat difficult position because I am not aware whether all doctors are members of the Board. I will, however, suggest as an additional member, a registered medical practitioner who is not a Government employee.

The Chairman : This Board is not appointed by anybody; it is appointed by Ordinance. The hon. Member will notice that there is a representative

[The Chairman]
of the British Medical Association on the Board but he is not a person nominated; he is a person appointed.

Mr. Jailal: I am not sure that all doctors are members of the B.M.A. If I were, I would have said what the amendment should be. I want to give equal opportunities to all.

Mr. Cummings: May I assure the hon. Member that this Bill has the full assent of the Medical Board on which the medical profession is fully represented? It also has the full assent of the Pharmaceutical Society on which the B.M.A. is represented. It has been very carefully prepared and what we call "processed". (Laughter).

The Chairman: Who are "we"?

Mr. Cummings: "We" means the Government; that is to say, the Executive Council. You may laugh, sir, but I do not think we would achieve anything by bringing in what the hon. Member (Mr. Jailal) calls private or non-government medical practitioners. The B. M. A. is fully represented and we generally consult them as their status in the Colony is a very high one.

The Chairman: The hon. Mr. Jailal's objection aims at having a member other than the Director of Medical Services as Chairman of the Board and in order to achieve this there must be an increase in the number of members of the Board. Would it meet the hon. Mover to have two more members appointed by the local branch of the B.M.A.?

Mr. Cummings: I do not accept that interpretation at all. Why couldn't one person accept it? He could be a B.M.A. man. It is stated that the Board should be constituted by seven

Members. Later on, the other arrangements would be left to the Ministry.

The Chairman: It is stated that the Director of Medical Services shall be Chairman.

Mr. Cummings: I have already spoken on this and I do not know whether I shall be following correct procedure to speak again. If the hon. Member (Mr. Jailal) could persuade me or the Members of the Government as to the advantage to be gained by appointing a private practitioner or anybody else we might consider it, but we cannot suggest that a highly qualified person—a member of the B.M.A.—should not be the Chairman of the Board. I have already spoken to the Director of Medical Services and his own suggestion was to have the D.M.S. as Chairman, and that seems to be a logical thing. Are we going to put an ordinary private practitioner to administer a Board of this nature? I think it would be in our interest to have an apparently impartial person. I am not saying that there is going to be anything dishonest if we have a private medical practitioner, but one would feel safer to have the Director of Medical Services as Chairman of the Board. A Minister would like to know that his chief adviser would be the Chairman and that if there is to be a ruling from the Chair he would be the person sitting there. If the suggestion of the hon. Member (Mr. Jailal) is adopted, it would be putting too much in the hands of a private practitioner.

As regards the appointment of a sicknurse and dispenser, this is a Board of pharmacists and I think the Pharmaceutical Society would go up in flames if that is adopted. The hon.

Member might not agree but this is a profession and not something that we have formed. I (as a Barrister) would not like to have a Solicitor sitting on a Board which concerns me, although I have no disrespect for Solicitors at all and I rather respect them.

Mr. Jailal: The Pharmaceutical Society is entirely guided by the people called sicknurses and dispensers so far as practices and business are concerned.

Mr. Cummings: I think I should say that I am sitting here fully informed on this point. Perhaps there are some of these gentlemen (sicknurses and dispensers) in this Council Chamber and I would say that if they want to be appointed to this Board, let them qualify. This is a Board for pharmacists and we are trying to do away with that hybrid—the sicknurse and dispenser.

Mr. Jailal: I am still pressing for an independent Chairman, therefore it is necessary that we have the two members I asked to be assured about.

The Chairman: May I ask who is going to select?

Mr. Jailal: The Governor.

The Chairman: There is nothing in the clause about the Governor selecting. Who is to say which individual registered medical practitioner is to be the Chairman?

Mr. Cummings: I cannot accept the proposed amendment, but I think the object could be achieved by using the medical practitioner appointed by the Minister of Health or by the Governor.

The Chairman: To keep it in line with the rest of the Schedule you would have to say “appointed by the Governor.”

Mr. Jailal: I am suggesting the words: “Any registered medical practitioner who is not in the Civil Service appointed by the Governor.”

The Chairman: Is the hon. Member proposing to move a further amendment?

Mr. Jailal: Yes, sir.

The Chairman: In that case I would prefer to put this one first.

Mr. Correia: I support the hon. Member’s amendment.

Rev. Mr. Bobb: This may not have a direct bearing on the amendment but it does touch on the question of the D.M.S. being Chairman of the Board. The hon. mover was very careful to point out that the Ministry was anxious to preserve certain fundamentals with respect to this Bill. Looking ahead I am inclined to say that it would be a good thing if the Director of Medical Services were not the Chairman of the Board. I visualize the day when the Minister of Health will have far more authority than the hon. Member has now, and the Director of Medical Services will be, in the strict sense of the word, his technical adviser. That situation has just arisen in Jamaica.

The Chairman: We are not now dealing with the amendment with regard to the Chairmanship. That amendment the hon. Member proposes to move later. But in order to be clear on the subject I propose to take each amendment in the order in which it is proposed. Does the hon. Member, Mr. Bobb, support the amendment which does not affect the Chairmanship?

Rev. Mr. Bobb: It seems to me that it would be a good thing if there were two persons appointed by the B.M.A. instead of one. Looking to the

[Rev. Mr. Bobb]

future I would have liked very much to support the suggestion that there should be a private medical practitioner, but I see obvious difficulties in appointing him. But if the number were increased from one to two persons appointed by the B.M.A. it would be very easy, and later on we could return to the question of the Chairmanship. I am in favour of the D.M.S. not being the Chairman. For that reason I would like Mr. Jailal to consider whether, instead of having one private medical practitioner, we should not increase the number of members of the Board.

The Chairman: Does the hon. Member, Mr. Jailal, accept the suggestion, or would he like me to put the question?

Mr. Jailal: I said I would be quite willing to ask for an increase of the number of persons to be appointed by the B.M.A., but what I do not know is whether every doctor in this country is a member of the B.M.A. If I were assured of that I would agree with what the hon. Member has just said. There may be a private medical practitioner of the highest class in the country who we may want to be the Chairman of the Board.

Mr. Cummings: The Schedule does not say that the person must be a member of the B.M.A. The Association appoints him, and if it feels that there should be somebody who ought to be the Chairman, the Association would suggest it. It is very difficult to get doctors to sit on such Boards.

Mr. Jailal: I will withdraw my amendment and suggest two persons appointed by the B.M.A.

Mr. Cummings: It is not the sort of thing one would want to oppose, but

we do not see the reason for it. This is a Board for the administration of the profession of pharmacy, but since doctors have something to do with drugs, and there is a relationship between the doctor and the pharmacist, then the doctor comes in, and we think the best way to do that is through his Association.

The Chairman: Is it possible for the Association to appoint someone who is not a doctor?

Mr. Cummings: It obviously would not do that.

The Chairman: It might.

Mr. Cummings: It will not arise, but we can correct that. If we are to increase the number we should do so by adding another pharmacist. The idea of having the D.M.S. as Chairman is because he is the chief government medical adviser. The Member for Health is charged with the responsibility for the Department, and matters like appointments are things which he would normally deal with. There is going to be very little difference in the future, as I see it. I am horrified at the idea that if I were the Minister of Health I would wish to sit on a Board to deal with drugs and poisons. I must have an adviser for that. I would not like to see the Minister drawn into such things. He should deal with matters of policy.

The Chairman: I do not think the hon. Member, Mr. Bobb, suggested that.

Rev. Mr. Bobb: The point I am making is this: Later on, more than now, the Minister of Health, as I expect the Minister of every Department, will be in such a position that his Head of the Department would be

in the real sense his technical adviser. There has been an extension in Jamaica of what we have here now, I am informed. The Head of the Department has been withdrawn from a Board to be the technical adviser to the Minister. I would wish to see the D.M.S. himself removed from a Board like this and another qualified person appointed Chairman. The D.M.S. could be the person to assist the Minister in cases of appeal, giving technical advice.

The Attorney General: Did I understand the hon. Member to say that in Jamaica someone was withdrawn from Boards because he was a Minister?

Rev. Mr. Bobb: No.

The Chairman: The Head of the Department has been withdrawn from certain Boards in order to become technical adviser to the Minister.

Mr. Cummings: We are well aware of what is happening in Jamaica. There our Director's counterpart is called the Chief Medical Officer, as in England, but his functions are almost the same. The person charged with the responsibility for the Department is the Member who is charged in writing under the Constitution, and the Chief Medical Officer advises him on the technical aspects of the Department. But we are coming to that, and I suppose my friend would like to develop it when we get there.

The Chairman: I propose to put the amendment moved by Mr. Jallal who is now asking that paragraph 2 of the First Schedule be amended by

the substitution of the word "Two" for the word "One" in the sentence which reads:

"One person appointed by the British Guiana branch of the British Medical Association."

The Clerk began to take the division.

The Chairman: I would question whether Mr. Tello's vote is in order, as he was not in his seat when a division was called for.

The Attorney General: Would your Honour consider the effect of the Constitution under which we are working? May I refer you, sir, to section 47 of the British Guiana (Constitution) (Temporary Provisions) Order in Council, 1953, which reads:

"47. (1) Save as otherwise provided in this Order, all questions proposed for decision in the Legislative Council shall be determined by a majority of the votes of the Members present and voting; . . ."

The Chairman: I am not willing to question the hon. the Attorney General's opinion on the matter, but that has been the ruling previously. I have been present when exception was taken to a Member voting, because he was not in the Chamber at the time a division was requested, and in fact not in his seat, and I only made my remark about the Hon. Mr. Tello on the basis of that experience.

The Attorney General: It is not possible to question Your Honour's ruling, except on subsequent motion, and I do not propose to do that. But before you definitely rule, I am suggesting that Your Honour might wish to make that —

Mr. Cummings: Your Honour might also wish to consider what is done in England where, on a division being called, the bell rings, and the Members run in and vote.

The Chairman: The division Whips are responsible for getting Members from their offices to vote.

Mr. Cummings: When Your Honour has ruled you have ruled, and as the hon. the Attorney General has said, one would not attempt to question it. But Your Honour would be setting a precedent which this Council might later have reason to regret. It might be very unfortunate; we might lose something very important just on that.

Sir Frank McDavid: As another ancient Member I support Your Honour's story of precedent. That is to say that I think we were both present on an occasion when a Member who was out of the Chamber came in and met the division in progress, and he was refused permission to record his vote. But I have never been able to discover the authority for such a procedure, more so when a Member is in his seat and actually voted at the time his name was called. I can find no authority for the procedure.

The Chairman: Well, let me say that I am going entirely by precedent and experience. I am not particularly versed in parliamentary procedure and I am grateful to the hon. Member, Sir Frank McDavid, for recounting his experience, which has been greater than mine. He was probably present on more occasions when that happened than I was, but on that occasion when I raised my remark it was in regard to Mr. Tello's vote.

If it is the opinion of the Attorney General that under the clause of the Constitution referred to, Mr. Tello can properly record his vote, then I will accept it. I am not going to question the opinion of the Attorney General on a matter like that.

The Chief Secretary: Are you making a ruling?

The Chairman: Mr. Tello's vote should be recorded.

Sir Frank McDavid: If a name is called, there is no question about whether the person was in a position to answer it in time or not.

The Chairman: If the hon. Member had not entered so speedily I would not have observed his absence.

Question put, the Committee divided and voted as follows:

<i>For</i>	<i>Against</i>
Mr. Sugrim Singh	Miss Collins
Mr. Jailal	Mr. Rahaman
Dr. Fraser	Mr. Carter
Mrs. Dey	Mr. Luckhoo
Rev. Mr. Bobb	Mr. Tello
Mr. Correia	Mr. Gajraj
Mr. Phang—7	Mr. Cummings
	Sir Frank McDavid
	The Financial Secretary
	The Attorney General
	The Chief Secretary—11.

Mr. Jailal: I am still pressing this: I am going to ask that we have two duly registered and practising sick-nurses and dispensers appointed by the Governor. I have given my reasons.

The Chairman: That is to be added to the constitution of the Board, I take it.

Mr. Carter: It seems to me that every Member of this Council thinks of a sicknurse as a nurse and not a drug-gist. I do not see why on this particular Board of pharmacists sicknurses should be there.

Mr. Correia: I am supporting the hon. Member Mr. Jailal's amendment. I would say that this Ordinance will control the lives of every dispenser in this country and they have a right to be represented on it.

Mr. Cummings: I think I have said all I can to assist the Council in considering this provision. It seems to

me illogical to put sicknurses and dispensers on a Board dealing with pharmacists. There is, I believe, legislation concerning their qualifications and so forth in the Medical (Consolidation) Ordinance and they are represented on the General Nursing Council. Their scope and qualifications and all other matters pertaining to their practice are discussed on that Council.

Mr. Jailal: By the same logic: I am a layman; I do not know anything about engineering and yet I am on a Board that deals with high class engineering. I have not been asked for a layman's opinion on that Board. On the other hand, sicknurses and dispensers have much to do with drugs and poisons. They are the people who are preparing the medicines in the hospitals that go upstairs into the wards. We do not have a Government Pharmacist at Suddie, at Bartica or Morawhanna, but in all these places we have dispensaries and it is the sicknurses and dispensers who dispense the drugs and poisons. Why should they not have a say? They ought to have some say.

Everybody has been hearing how the sicknurses and dispensers are not trained in chemistry. That is wrong. These people have had practice with drugs and poisons—it is their business, their life. What are we going to do? Are we going to fix things so that the pharmacists on this Board will carry forward their own ideas, and some people who are concerned will just be told, "take it or leave it". That would be unfair, and if it is going to be that way then Government must change its policy of employing sicknurses and dispensers in the hospitals and dispensaries: they should not have access to the poisons cabinets.

Mr. Cummings: The idea is that our institutions must be staffed by

trained pharmacists. The idea is not to be ungrateful to people who have given sterling service to the community. The idea is one of lifting standards. I am not sure whether the hon. Member is not saying that if the sicknurse and dispenser does not sit on this Board with pharmacists, the object of this Board being to administer an Ordinance — whose basic object is to do away with this type of individual — it would be unfair to make him become a pharmacist. Through the amendments I have tried to remove whatever appears to be unfair.

Mr. Sugrim Singh: I will ask the hon. Member (Mr. Cummings) to consider in the main the numerical point of view. The people who will come within the ambit of the Ordinance will be dispensers and many people who will have to qualify. We hope that the five-year period has been so arranged that it will encourage them to qualify within this time. At the moment there are qualified pharmacists and unqualified pharmacists. They are in a Society and in a position to make representations. To give them representation on the Board — and I am prepared to use the aid of logic like the 'Minister' — and deny it to the sicknurses is to leave the latter inarticulate. We must hold the scales evenly, and for that reason I am going to support the amendment.

Mr. Jailal: The hon. mover has said that ultimately they hope to eliminate the sicknurse and dispenser. This amendment will enable him to have his say until such time.

Rev. Mr. Bobb: I would like the hon. mover to consider this important point. A very important step in the profession of pharmacy is being taken. No. 2 amendment on the sheet circulated reads to mean that some sicknurses and dispensers will continue indefinitely. If

[Rev. Mr. Bobb]

that is to be the position, then at some time a large number of sicknurses and dispensers will be practising undisturbed. I quite agree with the idea that there should be an arrangement that in course of time their numbers will grow less and less and eventually we will have only qualified pharmacists.

But the Ordinance itself anticipates the difficulty and paragraph 4 of the First Schedule provides for a change which is significant of the transition that is to take place. Some things are allowed, some compromise is indicated. But after that time what decision will be made for them to be represented indirectly by the Pharmaceutical Society?

Another point: the argument of the hon. mover is that we want to re-orientate. In this new approach one of the best ways to get that done is to put these people on the Board and let them sell the new idea. They themselves will know what is going on and they will be party to the whole business. So I will ask the hon. Member to reconsider his position with regard to this amendment and allow it.

Sir Frank McDavid: Speaking as a layman among so many professionals who have spoken this afternoon, it does seem that the whole tenor of the Bill completely eludes some of us. The purpose of the Bill is to make better provision for the control of the profession of pharmacy and the trade in drugs and poisons. Now, let us deal with the profession of pharmacy. What are the particular functions of this Board? The particular function is to make regulations for the passing of persons to be pharmacists. In clause 9, at subclause (2) one sees that this Board, on which it is suggested there should be sicknurses and dispensers, shall make rules for regulating the conduct of any examinations which may be prescribed as a condition

for registration as a pharmacist. It goes on to say that the name of any registered pharmacist may be removed by the direction of the Board. In other words, this Board is the Board to satisfy itself as to the proper qualifications of persons who claim to be pharmacists. Is it consistent that one should have on that Board persons who are sicknurses and dispensers and who are permitted as a compromise under a provision of this Bill to continue to practice within a limited time?

I cannot see how it would be right to force on this Board with its particular functions people who are outside of the profession of pharmacy itself. It is no argument to say that sicknurses have been permitted to sell drugs and poisons and because they have been doing so all their lives they should be put in a position to control the profession by placing them on this Board. Placing them there would be quite wrong and against the general tenor of the Bill.

Mr. Jailal: I would like to draw the hon. Member's attention to the Objects and Reasons of the Bill, and to remind him that clause 32 seeks to make provision for the sale of certain drugs and poisons by certain sicknurses and dispensers within the municipal boundaries of Georgetown and New Amsterdam. All the arguments against the amendment have no foundation. We can weed them out only by process of time, and until such time they also must have a say in the profession, trade or whatever it may be. I feel that it is necessary and I am pressing the amendment.

Rev. Mr. Bobb: I would like to draw attention to the second part of the first sentence in the Objects and Reasons. In spite of the second provision — relating to the trade in drugs and poisons — I think there is some basis for the

argument in favour of the sicknurses and dispensers. It is my view that notice ought to be taken of the suggestion by my hon. Friend (Mr. Jailal) that these sicknurses and dispensers ought to be represented on the Board.

Dr. Fraser: The Board dealing with sicknurses and dispensers also deals with chemists and druggists. A sicknurse could not deal with them although he has been trained by a medical practitioner. Of what use would a sicknurse and dispenser be on the board? He carries out what the doctor orders and he learns about the use of drugs and poisons through what the doctor orders. This is a Board which has to deal with these things and I repeat that the sicknurse and dispenser has little or no knowledge of them. I just cannot see the reason why they should be included on the Board.

Mr. Jailal: I think the last hon. speaker has looked at the question wrongly. Sicknurses and dispensers are trained by doctors. We claim that these people have the necessary practical experience and I do not see why they cannot advise. After all, they have to administer these drugs and they know what the usage is. Some of them have more knowledge about certain drugs than even the doctors themselves, because they have to follow treatment up. It is not because a man is not in business that he should not be on the Control Board. At some stage in life it is necessary to have the viewpoint of other people. There is only one difference between a sicknurse and dispenser and a chemist and druggist, and that is, one has had training in chemistry, but everything else is the same.

Once I heard a dispenser being described as an ordinary person, but I can say that all sicknurses do not only wash sores. They are the people who go around and often handle the needle; they are the

people who put things into practice and they have far more practical knowledge than the chemist and druggist. The chemist in a drug store might get a prescription to make up, but how many does he deal with in a day? On the other hand, the sicknurse and dispenser at an estate hospital does not have time for prescriptions; he has to "fix" the man. This practice was only set up for economic reasons, and until we have "weighed" them out we should not lay off these sicknurses and dispensers from the business they prosecute.

Sir Frank McDavid: Members have been stressing drugs and poisons but they are forgetting that this is a Board which would control the profession of a pharmacist and I am asking whether it would be fair to the pharmacist to expect a sicknurse to sit on the Board and satisfy himself that a person is a pharmacist if he applies for registration as such? Would he be able to satisfy himself that that person has the necessary qualifications? All these things have to be done and it would be unfair to every pharmacist if the Board were to have persons like that on it. It is a professional Board.

Mr. Luckhoo: As one who has regarded himself for a very long time as an unbriefed counsel for the sicknurses and dispensers, I would like to say something. The position is that this series of amendments is intended to assist members of the profession and I think rightly so, because of the several aspects in which they have to be trained, and not only those persons engaged in trading in drugs and poisons. A Board of this kind, strictly speaking has to function within the ambit of the Ordinance and one would not expect to find sicknurses and dispensers on it. But I feel sure that hon. Members would get an assurance from the hon. Mover that he has been

[Mr. Luckhoo]

endeavouring to help the sicknurses and dispensers. I am sure the hon. Mover would earn their gratitude and that these sicknurses would be happy in the knowledge that they would get every consideration so far as matters affecting their interest are concerned. In other words, the body representing the sicknurses and dispensers would not be regarded as non-existent and, if and when the occasion arises, I have no doubt that the hon. Mover would give adequate consideration to their point of view. That might be done by those people making representations to the Board.

The Chairman: Before the hon. mover replies there is one point I would like him to consider. If hon. Members would look at clause 32 they would see that this Board, whose functions relate to pharmacy and poisons, goes clean away from that in clause 32, in that it has the power to grant permission to sicknurses and dispensers to do certain things. Why this responsibility for granting such permission is tacked on to the Board I do not know, but it seems to me that it widens the functions of the Board, having regard to the remarks made by Sir Frank McDavid and Dr. Fraser. This Board, which is supposed to deal with pharmacy and poisons, is to have the power to grant or refuse permission to sicknurses and dispensers in certain respects.

Rev. Mr. Bobb: I am grateful to you, sir, for amplifying what I suggested when I drew attention to the Objects and Reasons attached to the Bill. I am equally gratified at the support given by the hon. Mr. Luckhoo

when he very clearly showed that there were interests of sicknurses and dispensers which have to be dealt with at some time or other.

Mr. Cummings: To reply to Your Honour's point I would say that it is something within the ambit of the control of drugs and poisons. We decided that there should only be pharmacists in order the better to control the sale of drugs and poisons, but then certain people made representations to us showing that they have been doing it for years. What more logical body than a Board to control the sale of drugs and poisons and to regulate the profession of pharmacy, to give this permission? Your Honour questioned it, but I am saying that this is the logical manner in which it should be done. I appreciate the observation but I think that is the answer.

The Chairman: My point is that it is a point in support of the proposal for representation or consultation.

Mr. Cummings: I do not agree with Your Honour's interpretation, that this could be a point in favour of the proposed amendment.

The Chairman: Or the suggestion that there should be consultation, as proposed by Mr. Luckhoo.

Mr. Cummings: In fact I would say it is a point added against that, because you are going to put a sick-nurse on this Board which is to give permission to sicknurses.

Another point I think I should clarify is this: Mr. Jailal is apparently under the impression that the points of view of sicknurses on a Board like this would not be represented. He did use the word "brethren". I cannot see

on a Board like this under an Ordinance like this, what could arise affecting sicknurses that would not be properly represented by a pharmacist. I just cannot see it. What we must bear in mind is that there are not two sides. They are both persons engaged in the business of drugs and poisons. Why do you need your small brother if you have the big one there? There is no conflict of interests. I cannot see the pharmacist cutting the sicknurse's throat, or *vice versa*. The pharmacist, a trained man who has studied all aspects of the profession, is the person to be on the Board. I cannot see how a sicknurse could improve the position of his profession by being there.

Mr. Correia: I move the adjournment of the debate.

The Chairman: I propose to put the question on this amendment, but not the whole clause, and then adjourn. When we resume in Committee at our next meeting we will go back to clause 3.

I now put the question that paragraph 2 of the First Schedule be amended by the addition of the following: "Two duly registered and practising sicknurses and dispensers appointed by the Governor."

The Committee divided and voted:

<i>For</i>	<i>Against</i>
Mr. Sugrim Singh	Dr. Fraser
Mr. Jailal	Mr. Rahaman
Mrs. Dey	Mr. Carter
Rev. Mr. Bobb	Mr. Luckhoo
Mr. Correia	Mr. Tello
Mr. Phang—6.	Mr. Gajraj
	Mr. Cummings
	Sir Frank McDavid
	The Financial Secretary
	The Attorney General
	The Chief Secretary.—11.

Did Not Vote

Miss Collins—1.

Council resumed.

Mr. Deputy Speaker: Hon. Members have received notice of a meeting of Finance Committee tomorrow. Council will therefore adjourn until 2 p.m. on Thursday next.