

The dispensary medical officer : his work and his pay.

Contributors

Royal College of Surgeons of England

Publication/Creation

Dublin : Printed by Charles Cooper, 1868.

Persistent URL

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DISPENSARY MEDICAL OFFICER.

HIS WORK AND HIS PAY.

ALL THE REGULATIONS BY THE FOLLOWING DEPARTMENTS AND BODIES
AND THE VARIOUS DEPARTMENTS AND BODIES

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DISPENSARY MEDICAL OFFICER:

HIS WORK AND HIS PAY.

Registered from the
Journal of the Royal Medical Association.

DUBLIN

PRINTED BY CHAS. COOPER,

AT THE OFFICE OF THE GENERAL PRINTER AND STATIONER,
LINCINN-PLACE, NORTHERN-DUBLIN.

1880

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Journal of the Royal Medical Association

Published by the Royal Medical Association
at the Rooms of the Association, 11, BEDFORD SQUARE, W.C.2
LONDON: Printed and Sold by the Royal Medical Association, 11, Bedford Square, W.C.2

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DUBLIN:
PRINTED BY CHARLES COOPER,
AT THE OFFICE OF THE MEDICAL PRESS AND CIRCULAR,
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MDCCCLXVIII.

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THE DISPENSARY MEDICAL OFFICER: HIS WORK AND HIS PAY.

WHENEVER the question of increasing the pay of the Dispensary Medical Officers of Ireland, or giving them a retiring allowance or pension after a certain number of years' service, or when broken-down by sickness contracted in the discharge of their duties, is brought forward—the stereotyped answers invariably given may be said to be two, viz. :—

1st. The poor-rates are already too high; we can't afford it.

2nd. His whole time is not devoted to his Dispensary duties.

We shall endeavour in the following remarks to prove that these answers are given without calculation and without the due consideration that so important a subject requires, as the working and pay of that vast machine by which the health of the people of Ireland is preserved, and of which each dispensary doctor is an integral part.

Now, the amount of work done by the dispensary doctors of Ireland, the risks they run in performing that work, both from infection and from exposure to the inclemency of the weather at all hours, is known only to themselves and to the clergy—and here we bear testimony to the zeal and hard work of the clergy of Ireland of all denominations. We never were more impressed with this than during the last epidemic of cholera; and we think we will be borne out in this statement by all our professional brethren, that whenever the doctor went to the house of sickness, whether by day or night, no matter how inclement the weather was, there he found

the clergyman ministering to the wants of the sick, totally regardless of danger.

The question of payment being sufficient or insufficient naturally involves the question of what is done for that payment.

In the year 1851, the 163 Poor-law Unions in Ireland were divided into 716 dispensary districts, the number of dispensaries in these districts being 1038, and the number of medical officers being 785, along with 39 apothecaries and 74 midwives. The average population under each medical officer's charge is 7400, it is much greater than this in cities, and proportionably smaller in the rural districts, but in the latter the great distances must be taken into consideration. The average payment of each dispensary medical officer is £87; in some places the pay is £100 per annum, less income-tax, which may be considered to be the maximum amount, and, in consequence, in other places it must be much less. A glance at the *General Advertiser* where the remuneration is put forward in its most attractive form will show that the pay of the Dispensary Medical Officer is often but £80, £75, £70, or even less.

The number of persons to whom medical relief was given by Dispensary Medical Officers in Ireland, in the year 1865, was 837,669; this is only an approximation, because many persons were attended whose names did not appear on the relief register, and consequently were not included in the above return. This number represents so many attacks of sickness, requiring a greater or less number of attendances on so many different people, from the fever, rheumatism or pneumonia, where it might be necessary to attend daily, perhaps oftener, for weeks, to the trifling cold, where one or two attendances are all that are necessary; this gives an average of 1s. 8d. for each case of sickness in the rural districts where the dispensary doctor may have to drive six or seven miles, day after day, to visit a patient, or be called out of bed to a case of midwifery in the middle of the night, after a hard day's work to go seven or eight miles across a bog in the middle of winter, and spend five or six hours in a wretched hovel

with perhaps a mere apology for a fire, and without a chair to sit on—his horse exposed to wind, rain, or snow, as the case may be, if either the size of the door or the size of the cabin prevents his bringing him into it.

If we take an average of four attendances on each case, it will represent the sum of 5d. for each visit, and for this, as we have already seen, he may be obliged to travel more than five miles, perhaps, in the middle of the night, over bad roads, in worse weather, and finally catch a fever, which may lay him up for weeks, if he ever recover, during which time, he not only loses any remuneration he might otherwise have derived from private practice, but is often expected to pay his substitute.

In the case of city dispensary officers, take Dublin for instance. The number of names on the books of the seven city dispensaries was about 76,000; this does not by any means represent the total amount prescribed for, as many were seen and attended at their homes whose names do not appear on the register; this gives an average of 5400 actually prescribed for by each of the city dispensary medical officers; of these 76,000 persons, over 14,000 were attended at their own homes. In the cases of city dispensary medical officers, the distance to be travelled is not so great, but the number of patients is much larger, and the risk of infection much greater than in rural districts; here, also, the pay per head is much smaller. The pay of each of the 14 Dublin dispensary medical officers is £100 per annum, less income-tax, this gives an average pay for each patient of 4d., and if we take the average number of attendances as four, which is much under the mark, it will represent 1d. for each attendance.

Another duty which presses more heavily on city dispensary doctors than on their rural brethren, is the very great amount of writing that they have to do, on account of the vast number of patients attending their dispensaries. The amount of writing in connection with the registration of each patient's name, as well as writing and copying the prescription, &c., can hardly be put as less than 72 words. Some idea may be had of the time it

takes up, and the trouble this item alone causes the Dublin dispensary doctors, when I state that a scrivener's pay for the same amount of writing, at the ordinary remuneration of 1d. per folio, would amount to over £300, and the writing done in connection with those 76000 patients would make three volumes, each containing as many words as Mr. Thom's valuable Directory of 1800 pages.

It is, no doubt, of great importance, that the number of patients attending each dispensary, and their diseases, should be known for statistical and sanitary purposes, but perhaps some other plan might be suggested which would not take up so much of the time of the medical officer, who often has to spend an extra hour at the dispensary to write up the books which must be kept accurately as they are inspected every week. For instance, as all the information contained in the relief register, with the exception of the number and disease of the patient, is written on the ticket presented by the patient, and all these tickets are carefully filed and kept, if there were spaces left for the insertion of the patient's number on the register and disease, and a book kept containing the number of patients, and classifying their diseases, it might answer all statistical and sanitary purposes. Thus :—

March 6th, 1868.

Number of patients attending at dispensary	...	60
Do. do. attended at their own house	...	15
Number of cases of fever.		
Do. do.	scarlatina.	
Do. do.	small-pox.	
Do. do.	diarrhœa.	
Do. do.	bronchitis.	
Do. do.	&c., &c.	

This would give the number of patients and classification of diseases weekly, quarterly, and annually, as at present. The keeping of the prescription book, into which all prescriptions are copied, as it does not appear to be of any use, save as a book of reference for the doctor's

own use, might perhaps be left optional with him. This, also, would cause a decrease in stationary expenses, which must form rather a formidable item in the expenditure of city unions. Some idea of the work done by the dispensary medical officers of Ireland may be obtained by a reference to the last census, by which it appears that on the 7th of April, 1861, there were 46,141 persons sick at their own houses in Ireland, or about 50 sick persons on that day to each of the 785 dispensary medical officers; or taking the total amount of physicians, surgeons, and apothecaries in Ireland, according to the census as 2776, about 19 persons were sick at their own homes on that day, for every physician, surgeon, and apothecary in Ireland.

This does not appear to be an exceptional number of sick persons either, for if we take the census before, we find that on the 30th March, 1851, there were even more persons sick at their own homes in Ireland, viz.—48,291.

The average pay of the Dispensary Medical Officer is as we have already seen, £87. An ordinary carpenter will earn from 30s. to £2 a-week, and not be obliged to work after hours, or on Sunday. His education probably cost him only £20, he need not keep an expensive establishment, live like a gentleman, or under any circumstances keep a horse. Yet he is better paid than the dispensary doctor whose education probably cost £1000—who must keep up an expensive establishment, live like a gentleman, and often is obliged to keep a horse. It is true that the doctor may practice besides, but so may the carpenter increase his pay by doing extra work in after hours, this is optionable with him, but the doctor is obliged to work at most unseasonable hours without any additional pay, whenever called upon; that this is of frequent occurrence is a fact on which it is unnecessary to dwell.

If we take into consideration the close alliance between the health and the wealth of any community or country, and that the sick poor of Ireland are entirely dependent on the exertions of the dispensary doctors—is it sound economy on the part of those gentlemen who have the

amount of remuneration given to dispensary doctors so much under their control, is it doing justice to the poor, or is it fair to the doctor, that he who attends the poor man from his cradle to his grave, so often too at the risk of his own life, should receive no better pay than the man who makes his coffin.

That the dispensary doctor is of all officers connected with a Union perhaps the one most instrumental in keeping down the poor-rates may be readily proved, for take the rate-books during any epidemic, fever, cholera, &c., and see how the rates go up, and Why? Owing to sickness and death. The breadwinner of the family sickens and dies, and the rest of the family have nothing for it but to go into the Union Workhouse, or become a burden on the rates in some other way, and in the case of a young family, probably for years to come; whereas, if by assiduous attention and care that life be saved, that family probably becomes indirectly a source of revenue instead of a burden; besides the doctor is almost the only officer belonging to a Union who is exposed to the danger of infection. It is not too much to say that almost every case of fever in Ireland passes through the hands of one or other of the dispensary doctors.

Thus we see that it was on a sound economic principle that dispensary doctors were first appointed in Ireland, and if it has been deemed advisable to increase the pay of the medical officer in the Army, Navy, and other departments of the public service, depend upon it, it is no less so in the case of dispensary doctors. The answer that the poor-rates are already too high, and that we can't afford to increase the salary of the dispensary doctor, is calculated to leave an impression which is not quite correct; for instance, such as this, that if the pay of the dispensary doctors all over Ireland was increased say £50 a piece, it would cause an increase of the poor-rates, at, say, the rate of 3d. or 4d. in the pound at least. But is this a fact. No, certainly not. The Poor-law valuation of Ireland in the year 1865, and it has since increased, was £12,935,164, or within a fraction of 13 millions; and

now that the consolidated fund pays half the Union medical expenses, it will not require the assistance of even a ready-reckoner to prove that a fraction over one half-penny in the pound increase to the poor-rates would double the pay of the Dispensary medical officers all over Ireland; and if we take the Poor-law valuation of cities, take for instance that of the two Dublin Unions, which is £860,863, a fraction over one farthing in the pound increase of poor-rates would double the pay of the 26 dispensary doctors belonging to those two Unions—and on glancing over the annals of taxation and public expenditure, the eye will rest on many an item on which much larger sums have been expended of much less importance than the public health.

In reply to the statement that the whole time of the dispensary doctor is not devoted to the discharge of his duties, perhaps it might be fair to ask the question, at what particular time of the day or night is he not on duty, when is he not required to be in readiness to attend any person requiring his aid? When is his time his own? his dispensary duties are paramount to all others. All other engagements vanish before an urgent red-ticket; he must attend it whenever presented, or run the risk of dismissal without any appeal. His work does not even stop here. When the sick are all attended to, the dangerous lunatic appears upon the scene, and by a new Act of Parliament the dispensary doctor must attend at the police office, whenever called upon to do so, to certify to cases of dangerous lunacy, and to use the exact words of the Act “without fee or reward.” It is unnecessary to dwell on the fact that in some of the Dublin districts, the medical officers had to attend at the police-office to examine no less than three lunatics in one day. With regard to the doctors of rural districts, it is to be sincerely hoped that the words “without fee or reward” do not mean without travelling expenses.

The dispensary doctor must live in his district as a general rule, in order that he may never be out of the way, which often entails considerable extra expense. He cannot be a coroner lest it should interfere with his dispensary duties.

Even if the time of the dispensary doctor was not wholly devoted to his dispensary duties, is no allowance to be made for the risk he runs in the performance of his duty, is no allowance to be made for the large sum expended on his education in becoming a member of probably one of the most expensive professions, and which remains unproductive for so long a time, as a man must be twenty-three years of age to become a dispensary doctor.

Take, on the other hand, the case of men connected with government and public offices, and even private mercantile establishments. In these cases, as a rule, it is not necessary to expend a large sum of money on an expensive professional education. They enter on their duties at a much earlier age, say from sixteen to eighteen; in many instances they commence at that age with a salary as high as the dispensary doctor ever receives—their pay increases from year to year—their hours of business are, as a general rule, from ten till four or six hours—they can live wherever it may suit their health or their pocket, provided they are at their office at those hours, the rest of their time is absolutely at their own disposal; or if at any time they have any extra work, they receive extra pay—they have, as a rule, a longer or shorter holiday in the year, during which time a substitute is provided for them without any anxiety on their part, as well as when they cannot attend from ill health, and their salary runs on as usual, and in the ordinary way of business they are not exposed to any risk from infection—in all these cases, travelling expenses or allowances for the keep of a horse are given when the work cannot be reasonably expected to be performed without such aid. It is not too much to say that the dispensary doctor's work in many parts of Ireland cannot possibly be performed without a horse, and even under more favourable circumstances, as in cities, the number of patients requiring attendance at their own homes is so great, that car-hire forms no inconsiderable item of the dispensary doctor's yearly expenditure.

Now these gentlemen are paid on a much more liberal scale than dispensary doctors, they receive retiring allow-

ances or pensions and in many cases a provision is also made for their widows and children in case of their death.

In the case of army and navy medical officers, it was found to be necessary some years ago to increase their pay to 10s. 6d. a-day on entering the service. This increases from time to time, and at the end of twenty-five years service, when the officer may be still a strong man and only forty-six years of age, he can retire on a pension of a £1 a-day. Their services are not of a more arduous nature than those of the dispensary medical officer, they also can practice if they like, and if stationed for any length of time in one place often do practice. In India it is the rule. It may be said that they have expensive mess expenses and uniform to provide; on the other hand, their house-rent is paid, and when sent abroad, in most cases, or when extra services are imposed on them, their pay is increased.

If any additional arguments were required to prove that the pay of the dispensary doctor should be increased, we may mention a well-known fact that the expenses of living in every department have probably doubled, and the price of labour has risen proportionably since 1851, when dispensary doctors were first appointed, but not so their salaries, which, in most instances, remain the same. At that time also the qualification of surgeon was sufficient for him to possess; now he cannot obtain that office without having a double qualification, as well as a midwifery diploma.

As for the emolument derived from vaccination and registration, about which so much has been said from time to time, that the general public imagine probably that it is of a fabulous amount. Now, with regard to vaccination, this is an operation which the medical officer must perform, and there are, in consequence, extra hours devoted to the performance of that operation, which are in Dublin two hours a-week; and how are they paid for it, 1s. for each case of successful vaccination, while in England and Scotland, the remuneration for each successful case is 1s. 6d. is performed within two miles of the residence of the vaccination, 2s. 6d. when beyond that distance. Now the total number of children successfully vaccinated by dis-

dispensary doctors during the year 1865 was 169,142, for which the total amount paid was £8673, on an average of £11 for each dispensary doctor. The amount of additional labour that this may impose in certain cases may be collected from the letter of a dispensary doctor in THE JOURNAL OF THE IRISH MEDICAL ASSOCIATION of February 12th, where he states that he was obliged to travel, in 1867, 832 miles to vaccinate 200 children, out of which number 150 were inspected as successful, yielding only £7 10s. for the work; he further remarks, that in addition he had no shelter provided for horse or vehicle.*

With regard to registration, this is an office which need not be held by the dispensary doctor. In several instances, many, we dare say, over Ireland, the dispensary doctor is not registrar either by his own desire or otherwise. Here some other person performs the office, and receives exactly the same fees as the doctor would have done, if he held it. Now, if there is any truth in the statement that the doctor's time is not entirely devoted to his dispensary duties—why take so much credit for that item, which is extra work done in extra hours, and for which, in many instances, the dispensary doctor does not really receive the pay. And now what is this wonderful source of emolument? what is the pay in Ireland?—1s. for each birth and death, and 6d. for each Roman Catholic marriage, a sum which would not pay a scrivener for doing it, independently of the penalties imposed, attendance at police offices, &c.; and the accuracy with which each registry must be made, and the

* The number of deaths from small-pox during the decade ending 6th June, 1841, was 58,006; during the decade ending 30th March, 1851, the number of deaths from small-pox decreased to 38,275; and during the decade ending 7th April, 1861, they diminished to 12,727, showing a decrease in mortality from 1 in 20, to 1 in 64. Some idea of the number of deaths from small-pox during the present decade, may be obtained by a reference to the latest returns, where we find that the number of deaths from small-pox in the year 1864, was 854; in the year 1865, 347; in the year 1866, 187; and in the year 1867 they had diminished to 20.

trouble and expense connected with the correction of a mistake, and after all to what does it amount?—in the year 1865, 145,227 births, 93,738 deaths, and 21,689 Roman Catholic marriages, which gives an average of £15 to each dispensary medical officer, supposing that every one of them were registrars.

Thus we find these two much boasted of items amount to in the total an average of £26 per annum for each dispensary doctor, and as the pay for vaccination in England and Scotland is double that for vaccination here, it serves but as an additional argument to prove that the dispensary doctors of Ireland are both overworked and underpaid.
