

# **Report of the Committee of the Convention of Poor Law Medical Officers.**

## **Contributors**

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Royal College of Surgeons of England

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# REPORT OF THE COMMITTEE

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Chas. F. J. Lord, Esq., Secretary, Hanover-square.

## CONVENTION

### POOR LAW MEDICAL OFFICERS.

JULY

1848.

COMMITTEE ROOM—4, HANOVER SQUARE.



# THE COMMITTEE.

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The Resolutions passed at the Convention have been considered by the Committee as "Instructions" or "Suggestions." They may be summarily stated as follow:—

I.—That the highest qualification of a cultivated mind and professional capability, with great expenditure of time and physical strength, are parcelled out into operation through the Poor Law system for the benefit of the sick poor; that the present system is so essentially faulty, that the Surgeon is invariably unfairly dealt by, and the

## REPORT.

THE Committee appointed at the Convention of Poor Law Medical Officers, held at the Hanover Square Rooms, on Wednesday, October 27th, 1847, consider it right at this period to place a report of their proceedings before their constituents and the Profession generally.

Animated by a deep sense of the soundness of their principles, and of the objects contemplated; encouraged also by the number and character of those gentlemen from whom they received their delegated trust, no time was lost in zealously entering on the duties imposed upon them.

Although the profession is sensible of the great defects in the present system of Poor Law Medical Relief, almost every man affected by its operation, has hitherto been inclined to consider his own case, as special, and one of peculiar hardship; it is believed, however, that the facts obtained, and the inferences to be drawn from the labours of the Committee, will have the effect of merging all sense of individual grievance, into that of a deep feeling of general oppression and injustice. This is operating not only on the Poor Law Medical Officers, as a body, but also, on the Sick Poor, whose interests, at most critical periods, are injuriously affected by its influence: hence, the necessity for renewed and increased exertion on the part of the profession, and for an appeal to the public generally for its future co-operation and support.



The Resolutions passed at the Convention have been considered by the Committee as "Instructions" or "Suggestions," by which to shape their proceedings. They may be summarily stated as follow:—

1.—That the highest qualification of a cultivated mind and professional capability, with great expenditure of time and physical strength, are perpetually called into operation through the Poor Law Surgeon for the benefit of the sick poor; that the present system is so essentially faulty, that the Surgeon is invariably unfairly dealt by, and the sick poor are more or less injured.

2.—That the payment given by Boards of Guardians is utterly out of proportion to the duties, exertions, and expences which devolve on the Medical Officer, as well as to the advantages conferred on the suffering paupers.

3.—That to remedy these grievances the Convention pledges itself, by its standing Committee, to use the most persevering and temperate means, to collect and digest information on the subject; to memorialize the Secretary of State for the Home Department and the Poor Law Board, and to communicate with the Colleges of Surgeons and Physicians, and other influential and corporate medical bodies.

The third of these Resolutions is obviously the only one which has a practical bearing on a working Committee: hence, one of their earliest determinations was to transmit a series of enquiries in a tabular form to every Union Surgeon; facts and figures being the basis on which every effort at improvement must be founded.

More difficulty and difference of opinion arose than might have been expected in fixing on the form for the enquiries appertaining to the duties and remuneration of the Poor Law Medical Officers. That at last agreed upon, though well adapted to elicit the gross detail, and to obtain a succinct state-



ment of the opinions of each Surgeon making the return, was, after all, defective, inasmuch as it made no provision for calculations or remarks on in-door or Workhouse cases. This omission, however, was in many instances met by the volunteered information of the officers attached to the Union Houses.

So soon as the answers were received, it became necessary to collate the figures and opinions they contained; with this view, it was suggested that a Sub-Committee should be formed—yet the gentlemen nominated for this service, though anxious to perform it, found themselves quite unable to do justice to the subject—the aid of a practised statist was required.

The professional assistance of Mr. Brooks was therefore engaged. To this gentleman, and to Mr. Farre of the Registrar-General's Office, who handsomely gave his advice and assistance, the Committee are particularly indebted for the Report on collating the returns made by Poor Law Medical Officers; from which the following extracts are of most significant importance:—

“Returns have been received from 434 Unions, comprising no less than 805 Medical Districts, which, considering the laborious and time-engrossing occupation of the Poor Law Medical Officer, may be considered a very large proportion.

“The whole of the Returns have been arranged in 11 Divisions, corresponding with the 11 Divisions adopted by the Registrar of Births, Deaths, and Marriages, and the Poor Law Commissioners.

“The Salaries received are generally stated with sufficient clearness, and the averages set forth in the Tables, may be relied on. With regard to the amounts received for *extras*, however, there is great difference, many including therein the amounts received for Midwifery, Vaccination, Surgical operations, Trusses, and other appliances—and others stating the amount exclusively of some one or other of these. The difference those exclusions make in the deduc-



tions is, however, very trivial, seldom amounting to more than one penny or a *few pence* per case.

“By several of the returns, it appears, that on the issuing of the order of the Commissioners for the allowance of Extras, several of the Boards of Guardians, for the purpose of evading it, reduced the Salaries of the Medical Officers\*—others (a few only) gently constrained the Medical Officers to compound for all extras, by a small fixed addition to the annual salary;—whilst others *have systematically and rigorously evaded it, by peremptory instructions to the Relieving Officer* to send all cases of accident, or cases requiring surgical operations, to the Hospitals to which the Board subscribes. This is much complained of, not on account of the mere loss to the Medical Officer of the fees, only, but for the injury and risk suffered by the patient during the removal—sometimes in carts, over bad roads, for many miles.”

The Committee beg to direct a marked attention to this fact, as illustrative of injustice to the Surgeon and inhumanity to the crippled poor—practised by Boards of Guardians to avoid an expenditure of a trifling fee, intended by the Poor Law Commissioners as merciful to the Pauper and just to the Surgeon.

“The payments for Midwifery, it will be seen, range from 10s. (never less) to £2, according to the cases, distance, &c.; but are sometimes at a fixed medium rate for all cases. The medium rate, however, generally appears to be to the disadvantage of the Medical man.

“The opinions given on the several modes proposed for remunerating Medical Officers, are, of course, very varied, as are also the facts and arguments urged in their support, of which the following afford a very brief summary.

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\* In some Unions, the Croydon Union for example, the sum paid to Medical Officers, including extras, was even less in amount than the salaries originally paid to them.



“1. *As to Payment per Case.*

Of the Returns made .....	805
There are Approving .....	103
Disapproving .....	362
	<hr/> 465
Who give no opinion upon it .....	340

“2. *As to payment by a fixed Salary based upon the number of Cases attended and the mileage.*

Of the Returns made .....	805
There are Approving .....	428
Disapproving .....	38
	<hr/> 466
Who give no opinion .....	339

“3. *As to payment for Extras, exclusive of Midwifery.*

Of the Returns made .....	805
There are Approving .....	501
Disapproving .....	95
	<hr/> 596
Who give no opinion .....	209

“4. *As to payment by fixed Salary founded upon the number of population and area to be fixed by the Commissioners.*

Of the Returns made .....	805
There are approving .....	351
Disapproving .....	73
	<hr/> 324
Who give no opinion .....	481

“In regard to the first mode (payment per case,) the opinions given *pro.* and *con.* are almost invariably expressed



in the most explicit and decisive language; and there is a remarkable—a very remarkable uniformity in the answers of all those who disapprove of it, as to the principal reason to be urged against it, viz: that if payment per case were adopted the Guardians, Overseers, and Relieving Officers, in their anxiety to keep down the expences, would refuse orders for medical relief in all but the most serious and dangerous cases; and thus that the great majority of the paupers would be utterly unable to procure medical relief until their sickness had become desperate, and entirely disabled them.

“That the few cases for which orders would be given, would be of the most serious, and none of them of a trivial, character, which would be most unjust upon the Medical Officer; and that the humanity of the Medical Officer would be unduly and incessantly taxed by attending upon pauper cases, which he would with reluctance see perishing for want of Medical aid, but which he must administer at his own expence.

“On the other hand those who approve of this mode urge, that under it there would always be some proportion between the work done and the remuneration to be received; that it is the least complicated plan; and, therefore, likely to be most satisfactory to the Guardians, Ratepayers, and Medical Officers: and a few (though but a few only,) congratulate themselves that it would save their attendance upon a great number of trivial cases—and cases not strictly pauper cases, with which under the present system they complain they are inundated.

“2nd. In regard to the second proposition, there are many who approve of a fixed salary; but who express a doubt whether it should be based upon the number of cases attended and the mileage, or upon those data in connection with others—for instance, the relative numbers of the permanent and casual paupers. Several suggest



a fixed salary based upon the number of permanent paupers at the beginning of each year, with so much per case for all additional or casual cases occurring during the year; others approve of the application of this mode to Town Districts, but deem it inapplicable to Rural Districts of great extent, and with a scattered population: others again approve of the system, but doubt the practicability of fixing *a rate of mileage*; some suggesting so much (3d. to 1s.) per mile for each case, or for each visit; whilst others (and they appear to be by far the most intelligent, and those who have most reflected upon the subject) suggest that the salary should be fixed at so much per case, upon the average number of cases attended during the preceding two to five years—and be annually revised; and that instead of specific sums for mileage, the rate per case on which the salary is to be fixed should be lowest in Town Districts, where the population is dense and within certain limits—higher in medium Districts of greater extent and less density—and higher still in those large Districts where the population is widely scattered and the cases few, and the expense of horses is indispensable.

“3rd. In regard to the payments for extras, almost all are satisfied with the amounts allowed; but many require that many other cases should be included, and many complain that the extras are not allowed for cases in the Union House as well as out of it. Many disapprove of them, as the frequent cause of bickerings between the Medical Officer and the Board,—others approve of them, as affording an inducement to the Medical Officer to keep up his anatomical and surgical knowledge, instead of sending his cases to hospitals.

“All, I believe, without any exception, stipulate that Midwifery should be considered an extra.

“In reference to a fixed salary, based upon the *population and area*, to be settled by the Commissioners, many



of those who disapprove, urge that the *character* of the population, whether greatly pauperized or otherwise, is a most essential element, and that the mere number and area would afford no adequate data on which the salary ought to be based. Many object to the Commissioners having to fix the salary, as not possessing the requisite knowledge, or a due appreciation of the duties, &c.,— (as others think they are decidedly the fittest parties, and from their liberality, in regard to the extras, have confidence in their judgment; *and all who express any opinion on the subject greatly prefer the Commissioners to the Boards of Guardians.*

“A considerable number, however, *volunteer* a suggestion, that the salary should be fixed by and under the advice of a Medical Officer or Board connected with the Poor Law Commissioners—others, that there should be District Inspectors under this Officer or Board; that *they should be appointed and paid by Government*, and that their duties may be advantageously combined with certain others pertaining to the sanitary condition of their localities.”

The document from which the foregoing extracts have been made, taken as a whole, furnishes much material for Legislative interference.

Many of the Committee's sittings have been occupied in preparing and discussing various plans for the better administration of Poor Law Medical Relief, based upon the returns just alluded to. However easy it may be to find fault with an established system, few who have not made an effort to remodel, unless armed with something like absolute power, can be aware of the difficulty of framing a comprehensive plan, embracing honestly, within the pale of its operation, the interests of all concerned.

The fifteen Resolutions or Suggestions agreed to by the Committee, for presentation with a Memorial to Sir George



Grey were arrived at, after various amendments and much laborious examination of different opinions, and their bearings on each antagonistic interest. It is believed that they are adapted to secure to the sick poor, prompt, humane, and skilful professional aid, and that through them, the Medical Officers will be better recognized as labourers worthy of their hire, yet at the same time be recompensed with a fit regard to economy toward the taxes from which they are to be paid, and to the position in the social scale of those for whose advantage and relief they are exclusively called into action as a Poor Law Medical Staff.

When these Resolutions were matured, it became necessary to prepare an introductory Memorial, explanatory of the evils existing under the present system.

The following is a copy of the Memorial and Resolutions.

To the Right Honorable Sir GEORGE GREY, Bart.,  
*Her Majesty's Principal Secretary of State for the  
 Home Department.*

*The Memorial of the Chairman and the Committee of the  
 Medical Officers of Unions in England and Wales,*

SHEWETH,

That your Memorialists were duly appointed and authorized at a Convention of Delegates, representing nearly 3000 Medical Officers of Unions, assembled at the Hanover Square Rooms, on the 27th of October, 1847, to act in their behalf, with a view to obtain an amelioration of the present system for administering medical relief to the poor.

That your Memorialists have since that time corresponded with every Union Surgeon in England and Wales, and have been favored with replies to several important inquiries relating to the subject of medical relief, and are thus enabled to state with confidence the evils of the present



system, and the grievances which press most heavily upon this useful and important class of public officers.

Your Memorialists do not exceed the truth when they state, that the Medical Officers of Unions perform the most important service that science can render to humanity,—and they would remind you that three millions of Her Majesty's subjects are entrusted, in the hour of sickness and of suffering, to their professional care and skill, and that the poor and the nation at large derive great advantages from their arduous and indispensable labours.

That owing to the defects in the present arrangements, the duties of the Union Medical Officer, under any circumstances a source of great anxiety, are become vexatious, harassing, and oppressive; and consequently cannot be exercised with that full measure of benefit to the poor which a better system would not fail to secure. That the body of Medical Officers, acting under the present arrangements, condemn the existing system as inefficient and unjust towards all concerned in its operation, and that the same opinion is shared by the majority of the Medical Practitioners of all denominations in the United Kingdom.

That amongst the grievances most generally complained of are the very low rate of payment afforded by Boards of Guardians for medical service, and the anomalous and unequal manner in which the payments are distributed. That in consequence of the present loose and arbitrary system, it appears, after a careful examination, that a rule obtains, whereby the remuneration *decreases* in the ratio that the duty *increases*,—a rule so obviously unjust, that it requires only to be stated to be condemned.

In illustration of this statement, your Memorialists may cite the case of the Axbridge Union, where the Medical Officer of one district, attending only 200 cases of sickness annually, and working an area of only 7100 acres, receives, on an average, 3s. 6d. per case; whilst his colleague in the



adjoining district, attending 1440 cases annually, and working an area of 17,420 acres, receives only 11d. per case. In the Northwich Union, in the Middlewich district, No. 1, with an acreage of 9,446, and a population of 3,258, the payment amounts to 6s. 2d. per case; whilst in Weaver-lane district of the same union, the acreage being 15,610, and the population 5,641, the payment is only 10d. per case. Again, in the Grantham Union, the Grantham district, with an acreage of 11,818, and a population of 8,734, the payment is only 7d. per case; whilst in the Burton Coggles district of that Union, the acreage is 11,864, and the population 1,288, and the amount per case is as high as 7s. 1d.

From the returns which have been made, it appears that throughout the country the rate per case varies from as low as 3d. to 14s. 4d. The average rate of payment for each case of sickness, as ascertained by Returns received from 805 Medical Officers is, 1s. 6 $\frac{3}{4}$ d. for the Metropolitan Districts within three miles of the General Post Office, and 2s. 7d. for country districts—whereas the average cost of drugs, alone, for a single case occurring in the practice of the Surgeons to Dispensaries, who relieve the same class of persons as the Medical Officers of Unions, amounts to 2s. 1 $\frac{1}{2}$ d., and for Hospital cases to 4s. 4 $\frac{1}{2}$ d.

Your Memorialists conceive that the low rate, and the wide disparity of payments which these instances present, sufficiently expose a system that can admit of such flagrant inconsistency and great individual hardship, whereby grave injury is done to the interest not less of the poor than to that of the Medical Officer.

Your Memorialists also respectfully request your consideration of the fact, that the present divided and conflicting authority exercised by Boards of Guardians and the Poor Law Commissioners over Union Surgeons, operates in a most unsatisfactory and injurious manner on the



interests of this body; for, although on the one hand the Poor Law Commissioners act as a Court of Appeal from the decisions of the Boards of Guardians, who are unfitted by their habits and avocations, and frequently disqualified by their want of information on Medical subjects, to pronounce a just opinion upon the questions relating to Medical relief often brought under their jurisdiction,—yet, on the other hand, the instructions of the Commissioners are often neglected, and their orders pertinaciously resisted by the Boards of Guardians, thereby creating a feeling of uncertainty and distrust in the administration of the law, which is very annoying and vexatious to the Medical Officer.

Your Memorialists, therefore, earnestly pray that a system so invidious and oppressive in all its relations be amended, and that some measure for securing a just and uniform scale of payment for Union Medical Service be speedily adopted; and your Memorialists believe, that by redressing these established grievances, and awarding to Medical talent and toil a more equitable requital in accordance with the broad principles of public justice, humanity, and sound policy, the Legislature will conciliate general favour among all classes of the people, that it will also increase the efficiency and usefulness of Medical Officers, largely contribute to the well-being and comfort of the poor, and eventually reduce the large amount of rates now expended in aiding the necessities incurred by the prolonged sickness, and consequent destitution, of the labouring classes of this Empire.

Your Memorialists believe that the justice sought for the Medical Officers of Unions would be promptly rendered to them, if the payment of the salaries were removed from the Unions and placed upon the Consolidated Fund,—and if a proper staff of Medical Inspectors were appointed to regulate the duties of Medical Officers, and to exercise over



them, the necessary supervision : and your Memorialists, in accordance with these views, respectfully beg to submit to you the following heads of a scheme for carrying out these objects :—

1st.—“That in the opinion of your Memorialists, it is essential that the payment of Medical Officers should be by a fixed Salary, exclusive of Fees for Midwifery and important Surgical cases.

2nd.—“That the amount of Salary might justly be fixed ;—either by an estimate of the average of cases attended during a series of past years, considered in connection with the area of the Medical District ; or by the payment of a certain sum per head on the population, corrected by the consideration of the relative density and poverty of the District.

3rd.—“That making every allowance for the difference which must exist in the remuneration of private and public practice, it would not be just that the Salary should be based on a less amount than 6s. 6d. per case, with the charge varying with the area.

4th.—“That Medical Officers of Workhouses should be paid a separate Salary, based on the average number of Inmates, at not less than 7s. to 10s. per head.

5th.—“That it is just and proper, and conducive to the interests of the Poor, that an extra payment should be made, as at present, for Midwifery and for important Surgical Cases ; and that it appears to your Memorialists advisable that the Fees should be paid for cases occurring in Workhouses, as well as in Out-door cases.

6th.—“That to the cases of Surgery requiring payment, enumerated in the General Order of the Poor Law Commissioners, should be added :—

Fractures of the Clavicle ;—

Fractures of the Skull ;—

Retention of Urine, when requiring repeated introduction of the Catheter ;—

Severe Burns and Scalds ;—

And that £3 be paid for Compound Fracture of the Arm.

7th.—“That the payments allowed for Midwifery and Surgical Cases under the General Order of the Poor Law Commissioners are satisfactory in amount.



8th.—“That in order to remove difficulties in the way of a more equitable payment of Medical Officers, and considering that half the Union Medical expenses are already paid from the Consolidated Fund, it is highly desirable that the whole expenses of the Medical attendance on the Poor should be removed from Unions to the Consolidated Fund.

9th.—“That it is expedient that there be a Director General of the Poor Law Medical Department appointed by Government, and exercising supervision over Poor Law Medical Practice, in the manner of the other Public services.

10th.—“ That it is expedient that there should be Inspectors General of Poor Law Medical Practice appointed by Government, and acting under the orders of the Director General.

11th.—“That the Inspectors General acting each in a district assigned to them, should examine the Infirmarys of Workhouses, inspect the Reports of the Medical Officers, inquire into cases of alleged negligence, &c. &c., and that matters of disputed payment should be referred to them.

12th.—“That the Medical Officers of Unions should be appointed by Boards of Guardians as at present, subject to the approval of the Director General; that their Qualification should be as at present ordered, but that all future modifications of the qualifications should be made by the Director General.

13th.—“ That the appointments of all Medical Officers should be permanent, that is, to endure until they die, resign, or are dismissed for some valid cause.

14th.—“That the Forms of Books or Reports should be approved by the Director General, and should be as short and simple as is consistent with the requirements of the Public service.

15th—"That the access of the Paupers to the Medical Officers should be made as ready as a due distinction between those who require Parochial attendance, and those who do not, will admit. That in doubtful cases where illness exists, and there appears to be temporary destitution only, the Board may grant Medical relief by way of Loan; that in such cases a Fee of \_\_\_\_\_ be paid by the Board of Guardians to the Medical Officer."

Signed in behalf of the Committee,

THOMAS HODGKIN, M.D.

*Chairman.*



At this period, however, the attention of the Committee was turned to the consideration of a series of Resolutions proposed by Lord Ashley in the House of Commons, for the better administration of Poor Law Medical Relief. These resolutions occasioned considerable embarrassment to the proceedings of the Committee. It was clear that the plan proposed by Lord Ashley did not embrace all that was considered needful for an efficient reform, but it was felt that his remedial measures might be sought for with zeal, if only as an earnest of future good—an instalment of relief; further, the general cause might have suffered, had a want of unanimity been apparent among the movers of the measure in the profession. After much deliberation and anxiety, it was resolved to seek an early interview with his Lordship, in order to discuss the subject. The interview solicited having taken place, and certain alterations having been agreed to by Lord Ashley, at the suggestion of the deputation, coupled with other explanations, the following resolution was adopted:—

“That the Committee, though convinced that more is needed to effect all the improvements required in the system of Poor Law Medical Relief, does hereby pledge itself to give its aid to Lord Ashley in carrying such resolutions, and recommends them to the active support of the Poor Law Medical Officers, and of the Profession.”

The Committee consequently suspended the publication of their resolutions, and the final consideration of the memorial to Sir George Grey, until Lord Ashley's motion had been discussed in the House of Commons; in the interim, communications were made to the Colleges of Physicians and Surgeons, and to the Society of Apothecaries, soliciting them to petition, respectively, the House of Commons in favor of Lord Ashley's motion. Mr. Wakley was also asked to oblige the Committee by giving his support to the measure in his place in Parliament. Nearly a month, however, elapsed before Lord Ashley had an



opportunity of bringing forward his resolutions in the House, which being lost, though ably pressed by Lord Ashley, and warmly advocated by Mr. Wakley and other Members, the Committee again pursued their original course. It was forthwith agreed that the Memorial and Resolutions, as finally revised, should be immediately sent to the Secretary of State for the Home Department, and that he should be solicited to grant an interview to a Deputation from the Committee, assisted by members or representatives of the Medical Corporations and Associations. In acknowledging the receipt of the Memorial and Letter from the Committee, Sir George Grey pleaded the great pressure of public business which prevented him from immediately fixing a time for receiving the Deputation, but stated that he would be happy to do so, so soon as circumstances would allow him.

The Committee still feeling the importance of actively pressing their cause in all available quarters, judged it well to employ the interval in obtaining an interview with the President of the Poor Law Commission. The time was favorable for this step, as the subject had so recently been before him through Lord Ashley's Resolutions, which he had somewhat sweepingly opposed, and as it was again to receive attention through the promised audience with the Home Secretary. The Resolutions, of the Committee were prepared, and it was no longer barred from agitation by delicacy to Lord Ashley. The result of this interview has already been published.

Much importance has all along been very properly attached to the Deputations of the Committee to the Medical Corporations. The Poor Law Medical Staff has, by the avowed sympathy and extended or promised co-operation of those influential bodies, acquired an advantageous position, which, as a section of the profession, it could not otherwise have attained.

Accurate details of all the chief points of interest which passed at those interviews, having appeared in the Medical Journals, it is unnecessary again to publish the particulars. The Com-



mittee embraces the opportunity of expressing, in a marked manner, the high sense of obligation felt at the assistance that the corporate bodies respectively, and all collectively, have given the cause of the Union Surgeons.

Where such gracious aid has been so cheerfully extended by several, it may be invidious to signalize one as being particularly praiseworthy; yet the Union Medical Officers will long remember with peculiar pleasure the hearty fellow-feeling which was evinced by the College of Surgeons, in petitioning the House of Commons in favor of Lord Ashley's Resolutions, and, subsequently, in accompanying the Deputation to Sir George Grey, when their cause was warmly pleaded, by the President of the College of Surgeons, Mr. Travers, and by its Vice-President, Mr. Stanley.

The Committee are aware that they may be expected to dwell upon two such important proceedings as the interviews with the President of the Poor Law Commission, and the Secretary of State for the Home Department, but as circumstantial accounts have already been in print, it would be swelling their Report to a needless length to republish the same.

Relative, however, to the interview with Mr. Buller, the Committee draw attention to the statement which he made, after promising to try to improve the Medical Entry Books, that it was his intention, immediately after the rising of Parliament, to take up the *whole* question of Poor Law Medical Relief, with the hope of adjusting what he already felt was the most difficult part of all his responsibilities. This statement and admission may be taken as evidence of the excitement the matter has made in the right quarter, which must not be lost sight of by the Poor Law Medical Officers, whose unprotected and precarious interests demand unremitted and vigilant attention, till a satisfactory amendment of the present system be adopted. Another motive is here furnished for collecting important facts, and duly placing them before the notice of the Committee, that they may be brought to bear on the Poor Law Board in the most effective



manner, not merely directly but also indirectly, through the strength of public feeling.

Sir George Grey, assured the Deputation of the interest he felt in the matter, although the subject more immediately belonged to Mr. Buller, with whom he would confer upon it; he also said that the question of *expense was subordinate* to what was necessary to secure efficient Medical Relief. There can be little doubt of the money question being, after all, the grand difficulty to be overcome; even Mr. Buller smilingly remarked to the Deputation which waited upon him to urge the appointment of a Medical Board and Inspectors, that he feared the Deputation took the same view of the Consolidated Fund that was fashionable in the House of Commons; it was, unfortunately, not so inexhaustible, and in the present day, less so than usual; but he inclined to consider Medical Relief a question *distinct* from ordinary Poor Law Administration, and one which should be put on a *separate* and more comprehensive footing. It is obvious that important changes in this department will, ere long, be brought into operation. How far these will work well for the remuneration and position of the Medical Officers, will mainly depend upon the animus of Mr. Buller; hence, the necessity for the utmost vigilance and exertion on the part of the Committee and Convention, that the President may take no false step in well-intentioned efforts to ameliorate the present system of Poor Law Medical Relief.

It will be borne in mind that towards the close of last year, circular letters requiring much information on the prevalence of disease and other Sanitary matters were issued to the Union Surgeons by the Metropolitan Sanitary Commissioners. As no remuneration was attached to answering these letters which were addressed, as was the case on a former occasion, to Poor Law Medical Officers, it was deemed right by the Committee to seek an interview at Gwyder House on the matter. In as much as the Poor Law Medical Officers had been considered by the Commission as the best parties to furnish the information required,



it was advisable to secure to them for the future, in case of any measure being passed on the subject, a just compensation for their services. This consideration, coupled with the important bearing the duties of Poor Law Surgeons always have upon public health, might authorize the Sanitary Commission to concur in the Memorial sent to the Home Secretary in their behalf, or to make some other public effort in their favor.

Lord Robert Grosvenor (President), with the other Commissioners, gave a lengthened audience to the Deputation, and admitted in general terms the grievances endured by Poor Law Surgeons, but felt that no power was furnished by their Commission to interfere in the matter, or grant any payment for past services which the Sanitary question had received at the hands of the Medical gentlemen acting under the Poor Law. "*The Health of Towns' Bill*" would, no doubt, make arrangements for the future; in the absence of which, however, the Metropolitan Sanitary Commissioners had availed themselves of the information in the hands of the Parish Surgeons, for which they were very much obliged. It was felt needful to seek this interview, as tending to mark the sense of the Committee that these, and similar unrequited demands on the time and knowledge of Medical men for public objects, however laudable in themselves, are quite foreign to the official duties of Union Surgeons.

Various cases of general importance to the administration of Medical relief, and to the Poor Law Medical Staff more especially, have been watched by the Committee, in some instances, even investigated, and in all treasured up with a view to their ulterior bearing on the subject. The Committee have often noticed an improved feeling in regard to their claims as evinced by Boards of Guardians, and more especially by the Authorities of Somerset House. Illustrative of this may be cited the augmentation of the salaries of the Medical Officers of the Holborn, and other Unions.

Nevertheless it has been most painful to witness such in-



stances of injustice to Medical Officers as have been furnished by the Croydon and Huddersfield cases, and the marked hostility of the Chesterfield Union.

Soon after the meeting of the Convention, it was suspected that intimidation was used to prevent the free action of Medical Officers, which was confirmed by the circular letter of the Chesterfield Union. The Committee lost no time in calling gentlemen so assailed to a steady, yet temperate, perseverance in their objects—urging the high character of their enterprise, and the unworthiness of all who used any unfair measures to impede its progress, as well as of those who succumbed to such influence.

The judgment given in a higher court than a coroner's, has shewn in the notorious Croydon case, at how low an estimate the dictum of a jury inflamed against a Union Surgeon, should be held by dispassionate men; yet the verdicts recorded at some inquests, have shewn a favorable disposition on the part of juries.

Mr. Tatham's case at Huddersfield, is another happy illustration of a temper in high quarters eminently friendly to the interests of the Poor Law Medical Staff.

The Committee strongly advise publicity to be given in every instance of injustice or suffering traceable to any mal-administration, or defective provision of the present system of Poor Law Medical Relief. At the same time they think it right here pointedly to remark, that the objects for which the Convention took place, and for which the Committee were appointed, having avowedly a connection only with the Medical Poor Law Staff, and those officially controlling it,—all matters of personal grievance between Medical gentlemen, must surely be beyond the bounds of the Committee's deliberations and interference; yet, within the past few months, several cases have been pointedly pressed upon their notice, in which their adjudication was sought in reference to professional etiquette, and the sins of competitive antagonism. Deeply deploring the occurrence of such cases, the Committee would earnestly impress on the Poor Law Medical Officers the



vital importance of disinterested co-operation, and the cultivation of the Christian spirit of doing to others as we would that they should do to us. Under the present pressure of a redundant population, and competitive struggle, one man's interest must often cross his neighbour's; but every wise man will feel that he damages himself when he accepts an appointment which he can only hold at the sacrifice of a rival's *due*, and the compromise of his own character as a gentleman. No greater obstacle to a systematic improvement of the present plan of Poor Law Medical Relief exists, than the readiness with which medical men are found to accept situations which others have resigned under an indignant sense of ill-usage and a stingy payment. A strong, but erroneous impression, possesses the public mind that this willingness to take office under a system denounced as so bad, arises, after all, from some unexplained sinister advantage accruing to the Medical attendants on paupers. If professional gentlemen do not become true to one another, it is to be feared, no Convention can suggest, nor Government legislate, for the best interests of even the Poor Law Medical Staff.

Although the Committee, on a retrospect of their exertions, cannot point to much advantage *secured*, the review is by no means discouraging. Attention is more than ever alive to the subject. For the first time the Poor Law Medical Staff has spoken out "unâ voce" their deep sense of their grievances, their firm, temperate resolve to seek, and by perseverance to obtain, redress. Not their appeal alone, but the encouraging voice of the whole Profession, as raised by the Colleges of Physicians and Surgeons—by the Apothecaries' Society—and by other Medical Associations, has been addressed in support of the objects of the Convention, both to the Home Office, and to the House of Commons. Domestic and foreign politics have so remarkably occupied the Government during the past part of the Session, and must also during the remainder of it, that few in or out



of Parliament have been, or will be, able to give the subject of Poor Law Medical Relief the grave attention, or helping hand which is admitted on all sides to be its due. The coming recess must not be passed in inactivity, each man should put his shoulder to the wheel, remembering "*Dimidium facti, qui cœpit, habet.*"

Let it be prominently borne in mind, that the great body of the Rate-payers who elect the Local Guardians, and influence powerfully the Legislature of the country, are indifferent on the subject *chiefly* through ignorance of the wide spread evil. Every Medical Officer, and every disinterested, philanthropic member of the profession, should use time and argument to inform and influence his friends and patients; particularly should this be done toward such gentlemen as have seats in the House of Commons, that they may be able to agitate and advocate the question as one of national policy and honor, as well as of justice and benevolence.

A reference to the Treasurer's Report exhibits the necessity for fresh subscriptions. Scarcely were the operations of the Convention commenced when the demands for printing, advertising, postages, &c., made on his feeble resources, caused him to report to the Committee that "the receipt of subscriptions was tardy and inadequate."

It is believed that some Medical Officers have hesitated to avow an attachment to the Convention through their peculiar position with Local Boards; such at least, while they remember *which* is said to be "the better part of valour," should not forget *what* "are the sinews of war," and remit accordingly subscriptions for the past as well as for the current year, that the exertions of the Committee may be continued unimpaired.

The Committee cannot close their report without expressing their thanks, on behalf of the Medical Staff, to the Council of the National Institute for the liberal use of their Rooms, without which a considerable item of expense would have been incurred for the rent of an office necessary for conducting the



# POOR-LAW MEDICAL RELIEF.—AT A MEETING OF MEDICAL OFFICERS OF POOR-LAW UNIONS,

and others, held at the Hanover-square Rooms, on Wednesday, October 27,

JOHN BURTON, M.D., of Walsall, in the Chair,

The following Resolutions were unanimously adopted:

"1. That the medical men charged with attendance on the poor are required to be thoroughly and practically acquainted with every branch of their profession; that they are liable to be called at the shortest notice, and without assistance, to treat the severest forms of disease, and the most formidable injuries which every species of accident may produce; as well as to attend the most difficult and appalling cases which obstetric practice can present. That in the discharge of these duties they have not only to contend with the anxieties inseparable from such a weighty responsibility, but are brought into situations the most trying and repulsive, not only from the multiplied annoyances which attend them, but from concentrated contagion and other causes of disease to which many of this valuable class of men have been victims. That the sacrifice of time, labour, and rest, which they are required to make, is great and unlimited; and that the pecuniary expenses necessarily incurred in visiting their patients, and supplying the means of relief, are often unavoidably heavy. That, in addition to these trials, inherent to their office, there are others of a moral character very liable to be concomitant with them, and of a kind most painfully to affect minds of a highly honourable and sensitive class, to which it is sufficient merely to allude. That the mode in which these services are required to be performed, and the scanty remuneration awarded to the medical men engaged in them, constitute a grievance which cannot be too strongly stated, and for which, redress should earnestly be sought. That in many instances the number of persons amongst whom the casualties of disease and accident may occur, and the area to be traversed in visiting the patients, are so great as to render early, constant, and satisfactory attendance physically impossible. That the pecuniary remuneration, being granted on no fixed principle or scale, varies greatly in different localities; but that in almost all it is so disproportionately small, and in very many of them falls so far short of the expense incurred, as to render a large portion of the medical relief bestowed on the sick poor a tax on individual members of the medical profession, instead of resting, like clothing, food and other forms of relief, upon the rate-paying parishioners in general."

"2. That the medical relief at present provided for the poor must be faulty and inadequate, as respects both the patients and the public, is the necessary consequence of the errors which have been pointed out as inherent in the system itself. That, though an immense amount of unrequited professional assistance is afforded, the limits of physical capability and of pecuniary resources, preclude medical officers from the possibility of giving prompt professional assistance in many instances. That it results from these defects in the system that patients, who might by early and efficient treatment be quickly cured or relieved, and placed in a situation to support themselves and their families, may become a charge on their parishes for aggravated sickness, and burial, or for protracted relief to themselves and their families. That the extra expense is not confined to that which might be made apparent from the parish books, but tends to swell the sums expended in hospitals, dispensaries, orphan asylums, and other institutions, besides an incalculable amount of individual charity."

"3. That this Convention pledges itself to seek in the most persevering but temperate manner, the redress of the grievances which have been set forth; that for this purpose a subscription be raised, and a Standing Committee be appointed to collect and digest information on the subject; to memorialize the Secretary of State for the Home Department, and the Poor-law Commissioners; and to communicate with the College of Physicians, the College of Surgeons, the Society of Apothecaries, the Provincial Medical and Surgical Association, and the National Institute of Medicine, Surgery, and Midwifery, in order to obtain the active co-operation of those bodies. That the Committee be empowered to re-assemble the Convention, and to take such other steps for the promotion of the object confided to it, as it may deem expedient."

"4. That the best thanks of this meeting be given to JOHN BURTON, M.D., for the important services which he has afforded to this Convention, in consenting to take the chair on the present occasion; to the Council of the National Institute of Medicine, Surgery, and Midwifery, for their kindness and co-operation, and more especially for lending the use of their rooms; and also to the editors of the *Times*, the *Medical Times*, the *Lancet*, and the *Provincial Medical and Surgical Journal*, and to other gentlemen connected with the public press, for their able exertions to obtain a reform of the present system."

The following gentlemen constitute the Committee,

Thomas Hodgkin, M.D., Chairman.  
Thomas Martin, Esq., of Reigate, Vice-chairman and Treasurer.  
Edward Boulger, Esq., Blechingley.  
John Burton, M.D., Walsall.  
Adolphus Barnett, M.D., Limehouse.  
Samuel Byles, Esq., Hackney-road.  
George Bottomley, Esq., Croydon.  
William Cantrell, Esq., Wirksworth.  
Nathaniel Clifton, Esq., Islington.  
Edward Daniell, Esq., Newport Pagnell.  
George T. Dale, Esq., Commercial-road.  
Alfred Ebsworth, Esq., Bulwell.  
James Heygate, M.D., F.R.S., Derby, President of the Provincial Medical and Surgical Association.

Henry W. Livett, Esq., Wells.  
John Liddle, Esq., Alie-place.  
Charles F. Lord, Esq., Hampstead.  
William Lobb, Esq., Aldersgate-street.  
Peter Martin, Esq., Reigate.  
Joseph Thomas Mitchell, Esq., Kenington.  
John A. Pearson, Esq., Woolton, Liverpool.  
George Ross, Esq., Farringdon-street.  
James Stedman, Esq., Guildford.  
Thomas H. Smith, Esq., St. Mary Cray.  
Richard Thomas Tasker, Esq., Melbourne.  
James F. Valance, Esq., Stratford.  
Edward White, Esq., Lamb's Conduit-street.

The Committee earnestly appeal to the general body of the Medical Profession, whether connected with Poor-law Unions or not, to aid them in their present effort, which, if successful, will put an end to a grievance which is not only afflicting but degrading to the whole medical profession, and at the same time will serve the cause of humanity by placing medical relief on a better foundation. To facilitate the collection of information, Medical Poor-law Officers throughout England and Wales are respectfully requested to furnish the Committee with their names and places of abode.

As considerable expenses must be incurred, the Committee earnestly request donations and subscriptions, which may be forwarded by Post-office order, or otherwise, to the Treasurer, Thomas Martin, esq., Reigate.

THOMAS HODGKIN, M.D., Chairman.  
T. PIERS HEALEY, Honorary Secretary.

Offices, No. 4, Hanover Square,  
Nov. 8, 1847.



Resolution of Meeting of  
Medical Officers of  
Our Dear Ancestors