

1922

19

516

20

卷之三

C O
43535

M
GOVERNOR
NORTHRUP

COMF
193

DATE

10TH AUGUST 1922

13

10

31 NOV 22

ANSWER

342 J. F.

卷之三十一

PROZESSOR CFS GBT

Agree curtailment of imports & sends a desirable alternative proposal rendered necessary by reasons.

卷之三

卷之四

— See Shang

With a small

the approach

details, since clearly one must
step in to ascertain his fate.
In the original plan of the
Society it was provided that

Two points seem to me to call for special notice

(1) Part 7 our professional
advisers would meet in Washington
at the suggestion that the
research staff should undertake
part-time medical work. They
have already drawn up a

Subsequent Paper

~~805~~ 46230

MINUTES.

MINUTES NOT TO BE WRITTEN
ON THIS SIDE.

to connect with the Range medical Report for 1920,
to the lack of facilities
for pathological investigation
in rural provinces & to
the ~~difficulty~~ of determining
importance of accurate
data.

Dr. Price 11257.00
as one of us is to
dinner - I would
like to know
what further action
is required.

The first point does not
indicate how the C.R.A.
view the ultimate
reserve. This is
drawn up that she has
been allowed so much
money, & this is the
best we can do with it.
But if he really feels that
the money allowed is
not enough for essential
services we should see
his case, and in that
event it may well
be considered that
something else must

get the medical services
and have more than
£125, 000.

There is also the
question whether before
arriving at a decision
we may consult the
C.R.A. Dr. Price
and to what extent

the question is a financial
one, and it is really only
the local people who can
judge the details of
adjustment between the
funds available and the
service required. I do not
think the C.R.A. will wish
to have them endorse the
view which is generally
recognised that no
entitlement of medical
care shall take place
that is not absolutely
demanded by the
individual.

financial situation.

I submit a draft at

for review.

Very truly yours,

John A. Shultz

President

to the members in

along the first step

Mrs

7-14-22

GOVERNMENT HOUSE,

NAIROBI,

KENYA.

O
43535

10th August, 1922.

31-100-2

Sir,

With reference to your telegram of 25th July relating to proposed retrenchment in the Native Staff. I have the honour to inform you that I have agreed that the rate of medical activity, as in August of the same year, my suggestions have been taken into consideration sole-

ly for the purpose of economy in view of the fact that the Financial and Economic Committee of the General Medical Officer are directed to limit his Estimate of medical care for 1923 to the sum of £125,000, and the retrenchments stated in my telegram No. 852 of 11th July together with others among the subordinate staff are those entailing a withdrawal of £100,000 which are the only possible causes of this figure. Furthermore if the native staff are to be reduced by 10% it is my opinion that the retrenchment should be carried out at an early date in order to give time for settling on leave pay and other emoluments during the course of the year.

2. The proposals mainly affect the administrative areas and by far the greater proportion of the remaining staff will be posted for work in the native reserves.

3.

RIGHT HONOURABLE

Winston Churchill, P.C., M.P.,

SECRETARY OF STATE FOR THE COLONIES,

DOWNING STREET,

LONDON, S. W.

File 4020
P.O.
43032

3. A change of policy is entailed by the suggestion as to withdrawal of the subsidies to Kiswahili and abolition of dental services both of which have been made the subject of separate appendices Nos. 700 of 21st June and Confidential 308 of 5th August 1922, respectively.

4. The retirement of eight members of the medical staff whose names are given in my telegram of 11th July would be brought about by the withdrawal of medical officers from:-

(a) Lamu. (b) Kismayu,

the posting of District Surgeons

(a) Eldoret, (b) Nakuru;

by the reduction of two medical officers at Mombasa, part of the purely medical work being undertaken by the staff of bacteriologists, and by the reduction by one of the present relief staff.

5. Lamu and Kismayu from which it is proposed to withdraw medical officers are both small stations, with few officials, while the native hospitals are minor institutions of which until recently the native population have availed themselves but little. The shipping at the two stations is almost confined to coasting vessels trading from Zanzibar. I am of opinion that the work at both Lamu and Kismayu can be undertaken by efficient assistant or sub-assistant surgeon. The question of the cession of Jubaland to Italy of course affects the question of staff at Kismayu.

6. The work at Nakuru and Eldoret is such that I think it should be undertaken by District Surgeons. At both places there are small native hospitals which are occupied mainly by employees of the local settlers; the

official population is small and likely to become less and the work has hitherto been mainly of a private nature. It is not proposed to remove the Sub-Assistant Surgeons from either Nakuru or Eldoret. At the present moment Government has sanctioned the appointment of a District Surgeon at Eldoret and an efficient officer is in residence. At Nakuru in the event of my proposal as regards personnel to be retrenched being accepted, a suitable candidate for the post of District Surgeon will be coming.

7. The reduction of two officers at Nakuru will be brought about by the conversion of the present King's African Rifles Hospital, which is too large for present requirements, into a general native hospital. A small capital expenditure will be required for adapting and extending existing accommodation and the result will be a more efficient and up-to-date institution than the present one. The new hospital will be in charge of the Resident Surgeon of Nakuru, who will be his medical officer. The hospital will be assisted by a Dispenser and a native nurse under supervision of the Resident Surgeon. Native out-patients who will be treated at the present hospital will be so. The bacteriological staff, which it is not proposed to reduce, will be required to undertake some of the work in visiting officials and their households at private residences.

8. A staff of 22 will, under the proposed arrangements, be available for posting at the following existing stations in the numbers shown:-

Naivasha.....	3
Machakos.....	1
Marsabit.....	1
Port Bell.....	1
Gauka.....	1

Kisumu and District	8
Kakamega.....	1
Health Office, Nairobi.....	1
Kigii.....	1
Frontier Districts.....	3
Leave and Casualties.....	6.

9. The reduction in the staff of nursing sisters can be brought about by the proposed handing over of Eldoret European Hospital to the community and by a combination of duties.

The staff would be distributed as follows:-

Proposed Staff at Nairobi, Matron	Nursing Sisters
Proposed Staff at Mombasa Hospital, Matron	Nursing Sisters
Proposed Staff at Kisumu Hospital, Matron	Nursing Sisters
Proposed Staff at European Hospital, Mombasa, Matron	Nursing Sisters
Proposed Staff at Health Office, Mombasa, Matron	Nursing Sisters
Proposed Staff at Kigii Hospital, Matron	Nursing Sisters
Proposed Staff at Frontier Districts, Matron	Nursing Sisters
Proposed Staff at Leave and Casualties - Nursing Sisters	Nursing Sisters

10. The reduction proposed in the staff of Sanitary Inspectors and the abolition of eight posts.

Under the proposed scheme the staff of 19 only 12 appear.

The work at present being done by others will be carried on by the reduced staff.

The posts of Sanitary Inspector and Sanitary Overseer are accepted.

Working with independent contractors.

To procure and distribute

Mombasa.....	3
Nairobi.....	4
Kisumu.....	1
Leave and Casualties.....	4.

Under the proposed scheme the distribution would be:-

Mombasa.....	3
Nairobi.....	4
Kisumu.....	1
Leave and Casualties.....	3.

Two names have been put forward for retrenchment with an idea that a suitable candidate for the post of Sanitary Overseer can be obtained locally, thus obviating expenses in connection with passage etc., and securing an appointee having a knowledge of the language and the natives.

11. As regards subordinate staff the proposals contemplate the following reductions in the sanctioned establishment:-

Assistant Surgeons.....	8
Sub-Assistant Surgeons.....	39
Compounders.....	102

The sanctioned staff is:-

Assistant Surgeons.....	12
Sub-Assistant Surgeons.....	60
Compounders.....	18.

The ranks of the above grades are at the present time very much under-strength and the staff at present available is:-

Assistant Surgeons.....	7 of whom one is on leave pending retirement
-------------------------	--

Sub-Assistant Surgeons...38 of whom one has recently been invalidated.
--

Compounders	12.
-------------------	-----

The reduction on the present establishment would be brought about partly by the elimination of the less efficient but mainly by the closing of the following out-stations of which Nos. 1 and 6 are essentially Native towns and (10) c. serve both European and Native areas.

- | | |
|-----|-----------------------|
| 1) | Naivasha |
| 2) | Eldama Ravine |
| 3) | Londiani |
| 4) | Kabarnet |
| 5) | Rumuruti |
| 6) | Embu |
| 7) | Kericho |
| 8) | Makindu |
| 9) | Voi |
| 10) | Kyambu |
| 11) | Nyeri |
| 12) | Kilindini Dispensary. |

Of the above the hospitals at Voi and Makindu and the dispensary at Kilindini exist mainly for the benefit of the Uganda Railway and their closure would involve the transport of the sick to either Mombasa or Nairobi.

The above 12 stations during 1921 treated a total of 28,072 patients of which the largest number

5,608, was treated at Nyeri and the smallest, 674,
at Kabarnet.

12. I trust that you will be disposed to
approve these proposals for the reasons stated in
my first paragraph.

I have the honour to be,
Sir,

Your humble, obedient servant,

F. J. D. M.

G.O.P. 1000

European Hospitals

Native Hospital.

The Hospital
and Casualty

Overseas

bacteriologist should do

ordinary medical work

c. B. R. C.
open to a ~~test~~ ~~test~~ ~~test~~

YODER
in the interest of my class

UNIVERSITY
18th Nov 1944 ^{1944/11/18} (5772) ~~shuttle~~

6' and would be glad

Dr. R. M. Yoder to Dr. W. G. T. MORRIS

RENO, NV.

P. M. O. 2 5:45 P. M.

generally - gather he is

able to ^{REHABILITATION}
survive due to reattachment

proposed can be carried

out without serious incision

XMAS AT LUR
to health of community

and (11)

Roughing