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ST. GEORGE HISTORICAL SOCIETY BULLETIN

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24 Duff Street,
ARNCLIFFE. 2205.

June 1984.

Dear Friend and Member,

The June Meeting will be held as follows:-

Date: Friday Evening, June 15th, 1984, at 8.00 p.m.

Place: Council Chamber, Town Hall, Princes Highway, Rockdale.

Business: General.

Syllabus Item: Mr. Vaughan Evans will tell of: 'The Parramatta River Service'.
This should be a very interesting subject, which you are sure to
enjoy. Mr. Evans is well known to us. He will illustrate
this subject.

Supper Roster: Captain: Miss Callister, with Mesdames Preddy & Teychenne.

Ladies please bring a plate.

Mr. R. Lee,
President.
Phone 570 1244.

Mrs. B. Perkins,
Publicity Officer.
Phone 587 9164.

Mrs. E. Eardley,
Sec. & Bulletin Editor.
Phone 59 8078.

Mrs. E. Wright,
Treasurer.
Phone 599 4884.

Miss D. Row,
Social Secretary.
Phone 50 9300.

Mr. A. Ellis,
Research Officer.
Phone 587 1159.

"That friend who serves, and seeks for gain, and follows but for form,
Will pack when it begins to rain, and leave you in the storm."

.... Shakespeare.

A cheerio call to Mrs. R. Lee, Mr. Welch, Mrs. E. Wright, not forgetting other Members who may be on the sick list. We do hope you will soon be well again, and join us at our meetings.

The Annual Meeting will take place in July 1984. Please do come along.
Yearly Subscription is due then, also election of Officers for 1984 - 85.
New blood is good for any organisation. Will you think about it ??????

SPECIAL NOTICE.

The St. George Historical Society is pleased to announce that the following books, Nos. 1 - 7 written and illustrated by the late Gifford H. Eardley for the Society, have been reprinted and are now available. Books Nos. 8 and 9 have been compiled by Mrs. Bronwyn Perkins.

No. 1.	"The Wollie Creek Valley" (Reprint now available))	
No. 2.	"Kogarah to Sans Souci Tramway")	
No. 3.	"Saywells Tramway - Rockdale to Lady Robinson's Beach")	Books No.
No. 4.	"Arncliffe to Bexley Tramway")	1 - 8
No. 5.	"Our Heritage in Stone")	
No. 6.	"All Stations to Como")	\$2.50 each.
No. 7.	"Tempe and the Black Creek Valley")	
No. 8.	"Early Churches of the St. George District")	
No. 9.	"Early Settlers of the St. George District" - now)	No. 9
	available, Price \$4.00 plus postage.		\$4.00.

For your copy of the above books, please contact one of the following:-

Mrs. E. Wright - Phone 599 4884, Miss B. Otton - Phone 59 4259 (after 8 p.m.)
Mrs. E. Eardley - Sec., Phone 59 8078, Mr. A. Ellis - Phone 587 1159.

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2NBC-FM STEREO 90.1 - St. George Historical Society -
 Tuesday Evenings 6.30 p.m. - 6.45 p.m.

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| Tape 54 - 15th May, 1984 - Footpaths in the old Municipality of Bexley - Part 1. | - D. Sinclair. |
| Tape 55 - 22nd May, 1984 - Footpaths in the old Municipality of Bexley - Part 2. | - D. Sinclair. |
| Tape 56 - 29th May, 1984 - First Provision of Mail Facilities in the Rockdale Area. | - E. Eardley. |
| Tape 57 - 5th June, 1984 - Street Names & Postal Facilities in the old Bexley Municipality. | - E. Eardley. |
| Tape 58 - 12th June 1984 - A History of Carlton, Part I. | - B. Perkins. |
| Tape 59 - 19th June 1984 - A History of Carlton, Part II. | - A. Ellis. |
| Tape 60 - 26th June 1984 - A History of Carlton, Part III. | - B. Perkins. |
| Tape 61 - 3rd July 1984 - A History of Carlton, Part IV. | - A. Ellis. |
| Tape 62 - 10th July 1984 - Some Produce Merchants of the Eastern St. George District & The Motor Cycle Clubs of the St. George District. | - D. Row. |
| Tape 63 - 17th July 1984 - Memories of Days Long Past at Kogarah Superior Public School. | - M. Callister. |
| Tape 64 - 24th July 1984 - St. Davids Church of England, Arncliffe | - C. Wilding. |
| Tape 65 - 31st July 1984 - The Napoleon Street Tram Stop, Sans Souci. | - D. Row. |
| Tape 66 - 7th August - An Old Time Journey to the Cooks River Settlement. | - M. Callister. |
| Tape 67 - 14th August - Samuel Schofield - A Pioneer of Rockdale. | - C. Wilding. |
| Tape 68 - 21st August - Paddy's Market Hay Street, Sydney, 1920 - 1971. | - M.D. Fleming. |
| Tape 69 - 28th August - The Colonial Medical Service Part 1, The General Hospital Sydney 1788-1848. | - M.D. Fleming. |
| Tape 70 - 4th September - Our Heritage in Stone - Book 5. | - M. Cumming. |
| Tape 71 - 11th September - Early Settlers of the St. George District. Vol. 1, Book 9. | - M. Cumming. |
| Tape 72 - 18th September - The Colonial Medical Service Part II. | - M.D. Fleming. |
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- Tape 73 - 25th September, 1984 - The Environs & Ecology of Nanny Goat Hill at Turrella - M.D. Fleming.
- Tape 74 - 2nd October, 1984 - The Rosevale Nurseries, Rocky Point Road, Cooks River. - M. Cumming.
- Tape 75 - 9th October, 1984 - Rockdale Methodist Church - Jubilee - 1858-1908. - M. Cumming.
- Tape 76 - 16th October, 1984 - The "Echo", October 16th, 1890. - S. Richter.

THE COLONIAL MEDICAL SERVICE.

II. The Administration of the Convict
Hospitals of New South Wales.

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Modern Medicine of Australia
Vol.17, No.2. 1974.

*"to gather in the sick from the streets and to
nurse the wretched sufferers, wasted with
poverty and disease."*

Saint Jerome's ideal for the first nosocomium in Western Europe could well have been written of the convict hospitals of New South Wales, so accurately does it depict their function and the social status of those who entered their portals. Admission was no matter of choice, but of desperation: the wise stayed aloof and suffered their illnesses in their homes.

The defects of these hospitals were those of their times, magnified by deficiencies of manpower and resources and the turbulent conditions in the penal Colony, which, in its foundling years, was itself beset by recurrent crises threatening its very existence. Little could be spared for the sick and the institutions which housed them. Despite all vicissitudes, the convict hospitals served the Colony capably, and in another era they became the nucleus of the general hospital system of today. The foremost of the group and the first founded, the General Hospital, still survives as the Sydney Hospital, continuing an illustrious history and tradition of service which commenced in February 1788, when the Colony's first hospital (later to become the General Hospital) was erected on the west side of Sydney Cove.

The Colonial Medical Service was essentially a hospital service. In Sydney it remained as such until the General Hospital was transferred to civilian control to become the Sydney Infirmary in 1842 (the total evacuation of the General Hospital was not accomplished until 1848). Elsewhere, as the Colony expanded, district hospitals were established wherever the population of convicts and military forces was large enough to justify the placement of a Colonial Surgeon. In each such district the hospital was the base from which the surgeons provided an itinerant service to Government institutions and out-posts, as well as an inpatient service to eligible persons.

For twenty-five years after Foundation, the Colonial Medical Service provided for the total medical needs of the Colony, including hospital and personal medical therapy. During this period the population was predominantly convict or convict in origin, the military being the next most populous group. After

this period, as the proportion of free and freed persons in the population increased, private practice and private institutions emerged to cater for the medical requirements of this group. More and more the hospitals provided service for convicts, ex-convict paupers and other socially indigent persons and became in fact, as well as by repute, 'convict hospitals'.

The hospitals involved, their locations and the chronological periods during which they functioned as units of the Colonial Medical Service were:

The General Hospital Sydney	(1788 - 1848)
Norfolk Island	(1788 - 1815 & 1825 - 1844)
Parramatta	(1790 - 1848)
Liverpool	(1821 - 1848)
Windsor	(1812 - 1846)
Newcastle	(1804 - 1848)
Port Macquarie	(1822 - 1846)
Bathurst	(1824 - 1842)
Goulburn	(1834 - 1842).

Colonial Administration (1788 - 1836).

The Colonial Medical Service was a branch of the Colony's civil service. Principal Surgeon John White's status as a professional Head was firmly stated in his Commission... "We, (i.e. George III) do, by these presents, constitute and appoint you to the Surgeon to the Settlement within our territory called New South Wales" (1). He was responsible to Governor Phillip as Governor of the Colony and not as Commander-in-Chief of its military forces. Even the titles Surgeon, Surgeon to the Settlement and Chief Surgeon used by White until 1791, and then Principal Surgeon, emphasized his civil status and distinction from the military surgeons of the New South Wales Corps.

Two hospitals were established during White's regime - at Sydney and Norfolk Island. There was never any doubt about White's control over the hospital in Sydney. Some doubt, however, does exist about the administration of the hospital at Norfolk Island. It was staffed by Colonial Surgeons and convict nurses, but was treated in dispatches by Governors Phillip and Hunter as though it were an independent institution subject to immediate military direction. This is understandable as Norfolk Island was a secondary penal Colony remote in communication from the major settlement. The approach to its administration was one of expediency, no doubt influenced also by White's preoccupation with the problems of the hospital at Sydney.

Governor King left no doubt as to the authority of Thomas Jamison, one of White's successors, over the convict hospitals.... '(The Principal Surgeon) has the charge and

superintendence of the hospitals; makes his daily and occasional reports to the Governor; resides at Sydney, and accounts for all stores and necessities received quarterly.(2) This despatch also confirms the immediate responsibility of the Principal Surgeon to the Governor and his direct right of access to the Head of Government.

The edict by Governor King in 1806 on the civil status of the medical service and its hospitals was not generally accepted by the Military and confusion and conflict of authority was generated. In Sydney the establishment of the Military Hospital, which was independently staffed, allayed any potential source of friction between civil and military authority in the administration of the General Hospital. The presence of the Governor and his immediate oversight of the civil and military services was also a restraining influence.

Such was not the situation in the districts where the Military Commandants had delegated authority for civil and military administration. Resentment was easily aroused when the Colonial Surgeons emphasized their civil status by insisting on their right to administer their hospitals. Thus in 1810 a violent clash took place at Newcastle between Commandant Lt. Purcell and Assistant Surgeon Horner, which led to blows and the resignation of Horner. Macquarie was quite definite in ruling in support of Horner; (3). again, with the appointment of William Evans to replace Horner, Macquarie was emphatic.(4)

The conflict arising from the exercise of the Governor's authority over military staff was widespread during this early period of the Colony's development. Frequent challenges occurred during Bligh's tenure as Governor culminating in his deposition. Bligh was not consistent in supporting the principle of civil administration of the convict hospitals and allowed D'Arcy Wentworth to be court martialled when he resisted the order of Captain Abbott of the N.S.W. Corps to receive into the hospital two government servants. This led Jamison, then Principal Surgeon, to complain to the Home Authorities.. "to have the medical duty better defined, and a proper line of duty pointed out, in order to prevent improper interference in that department in future."(5)

By a strange quirk of fate it was Wentworth again, obstinate and irrepressible, who was responsible for the final decision on the civil status of the medical department and its hospitals. He was court-martialled in 1817 for charges preferred against him by Col. Molle. An objection to the trial on the grounds that the Court was not competent to proceed because Wentworth was "not amenable to Martial Law from the Tenor of his Commission" was upheld by Macquarie, whose action was supported by Crown Law opinion from London (6). Thereafter there was never any doubt that the convict hospitals were responsible to the civil administration through the Head of the Medical Service.

They were incorporated into the Colonial Civil Service when it was established as an arm of Government in 1827, from which date their administration became a function of the Colonial Secretary's Department.

Governor King in stating the authority of Thomas Jamison over the convict hospitals also outlined their function .. "All persons of the civil department, prisoners and other employed by Government are received into the hospitals, where they are supported by the Crown during their illness and convalescence .. The convicts assigned to individuals are also received into the hospital." (7) Wherever located, the convict hospitals were the base from which treatment was extended to patients from Government Institutions, such as the Female Factory at Parramatta, the Orphan School in Sydney, the Gaols, etc. There was no contact with the Lunatic Asylum which was separately administered and staffed. Yet another function was imposed towards the end of the second decade of the 18th Century inpatient care of the pauper sick.

By 1820 the proportion of free persons in the Colony had increased rapidly with the advent of immigration and settlement. The numbers were swelled by the emancipists and freed convicts, most of whom remained in the Colony in the absence of any plan for repatriation to England. A native population was also emerging from the offspring of convicts, settlers and officials. Poverty was rife and opportunity lacking to most. (8) ...

The condition of the pauper sick was pitiable. There was no opportunity for them to obtain medical attention except at the convict hospitals, a course many of them avoided, as it necessitated association with the criminal population. Their lot was relieved somewhat after 1826 with the establishment of the Sydney Dispensary as a private charity. It provided outpatient and domiciliary treatment, leaving in-patient therapy to the institutions of the Colonial Medical Service.

A further obligation of the Colonial Medical Service was to provide medical treatment to members of the military services. The responsibility of the military forces to provide their own medical service did not arise until after the arrival of the New South Wales Corps with the Second Fleet in 1790. Until that date the General Hospital catered for the marines and other military personnel. There is evidence that a military hospital was established between 1811 and 1820, probably located in Sydney, on the site of the present Fort Street School, with a capacity of 100 beds (9), Later in 1823, the Military moved from this location to the South Wing of the General Hospital. It would appear the Military Surgeons and staff cared for military personnel and this ceased to be a function of the General Hospital, or rather that sector of it under the control of the Inspector of Colonial Hospitals from 1823 to 1836. The need for a separate military medical and hospital service ~~is~~

disappeared when the medical service was reorganized on military lines from 1836 to 1848.

In the districts there was a tendency towards a separate military hospital if the numbers of Army personnel so warranted. Thus Macquarie in 1826 lists a military hospital of 20 beds at Port Macquarie as well as the Colonial Hospital. Similarly at Newcastle there is mention of a military hospital of similar capacity.(10) Generally, however, outside Sydney convict hospitals received military patients as well as other eligible persons.

Military Administration (1836-1848) -

In 1836 the Colonial Medical Service was reorganized and became a segment of the military forces of the Colony under John Vaughan Thompson as the first incumbent of the newly created post of Deputy Inspector General of Hospitals. The opportunity to effect this change arose from the transfer of the penal Colony from Van Dieman's Land to Norfolk Island (then re-established from 1825) and the need to reorganize the administration of the former, including its medical service.

The inclusion of the medical service in N.S.W. in the programme of reorganization was justified by the British Government on the grounds of economy. Other factors which influenced the decision were the anomaly of having Colonial and Military Surgeons providing for the same segment of the population, but with different administrative loyalties and the knowledge that transportation would be phased out as the Colony progressed towards self-government.

The effect of the decision was to provide a unified service under a single authority to hold the status quo with a continuing and strict financial scrutiny over its establishment, expenditure and activities. Thus the Colonial Medical Service was converted into a strictly hospital service, thrusting upon the civil government the responsibility to provide visiting medical services for its civil establishment and institutions.

The basis of reorganization was a report by Sir James McGrigor in which he proposed a separate military medical establishment for Van Dieman's Land and N.S.W., each under the immediate control of "a Superior Staff Officer for the purposes of Controlling the Medical Department connected with the Military and Convict Branches of the Services in those Colonies"(11). Of necessity, as general hospitals did not then exist to provide inpatient care for the civilian population, hospitalization of the pauper sick remained with the convict hospitals, the cost being met from civil funds. The change was of greater significance to the administration of the hospitals rather than to their function, which was by now well defined and did not alter materially after 1836.

The change in status of the medical service (and the hospitals) was summarized by William Dawson in 1844 in his support of a

testimonial for Busby as "assimilated in rank and pay and in the nature of its duties to the Medical Staff of Her Majesty's Army." (12)

The duties of the Deputy Inspector General as head of the hospital service and his lines of authority and channels of communication were laid down by McGrigor in his formal instructions to Thompson(13)

- (i) To revise immediately all existing medical establishments connected with the Military and Convict Departments, so as to be placed under Hospital Regulations of the Army.
- (ii) To undertake personal inspections, initially and periodically, of each station and hospital and report to the Governor.
- (iii) Not to vary any of the medical establishments or construct new hospitals and buildings without previous sanction of the Government of England.
- (iv) To be guided generally in his administration by Army 'Instructions' to the Principal Medical Officer of Foreign Stations'.
- (v) To organize and control the distribution of medical stores through the Deputy Purveyor....
- (vi) To revise the scales of diets for use in hospitals. This obligation implied not only initial revision to set uniform standards through the convict hospitals, which Thompson did, but continuing supervision to see that these standards were applied appropriately. He was reprimanded in 1840 by Sir James McGrigor for neglect of this duty, which McGrigor emphasized was personal to him and not to be delegated to the prescriber's sole judgement.
- (vii) To establish a quarterly Board of Survey on stores and medicines.
- (viii) To make reports on civilians and civil establishments to the Governor. Professional reports on Army personnel were to be directed to the Director General of Hospitals and expenditure returns to the Secretary of War.

Thompson was most unpopular with both civil and military authorities because of his truculent manner and arrogant assurance of his own

capacity and status. He was disdainful of his colleagues and his avowed policy was to replace the Colonial Surgeons with Military Surgeons in the hospitals. In this there was probably some justification as, with few exceptions, the Colonial Surgeons had grown physically and intellectually old in the medical service and were inferior in professional competence and training to the Military Surgeons.

Friction arose between Thompson and the Colonial Secretary because of Thompson's disregard of the latter's role as intermediary between the Deputy Inspector General of Hospitals and the Governor, in those matters of the administration of the hospitals where civilian patients were involved. The dispute was settled by the Under Secretary of State for the Colonies by the unusual formula of informal and formal communication. Thompson was to have direct and personal intercourse with the Governor without the interposition of the Colonial Secretary. If later official submissions became necessary, because of these discussions, they were to be made either through the Military Secretary or the Colonial Secretary as appropriate (14).

The relationship between the Deputy Inspector General of Hospitals and his medical staff was quite definite. All communications from the medical staff to any superior authority must pass through him, and all appointments and exchanges (to the limit of the establishments laid down) were to be made by him. (15) The establishments were determined by the Director General of Army Hospitals in Great Britain.

In many ways the assimilation of the convict hospitals into the Army system was an advantage as ancillary support and services could be obtained from Army facilities. The domestic establishments of the hospitals were placed on a rational basis with less dependence on convict staff and greater supervision by qualified Army personnel. These changes reduced the authority of the Colonial Surgeons over the administration of their hospitals leading to further discontent and resentment. It was such a conflict of authority between the Deputy Purveyor (supported by Thompson) and Medical Superintendent Mitchell at the General Hospital, which started the chain of events culminating in Mitchell's rebellion at this intrusion into his status, which led to his dismissal for insubordination. Surprisingly, in view of Thompson's policy of replacement of civil medical staff by Military Surgeons, Mitchell's successor was a civilian recruit, Dr. Kinnear Robertson.

Thompson was replaced by William Dawson in 1844, when it was obvious transportation was to cease. His was the unenviable task to preside over the demise of the convict hospitals. The hospitals at Bathurst and Goulburn were discontinued in 1842 and Windsor in 1846. They passed to civilian control. The hospital at

Norfolk Island closed in 1844 when the Island was evacuated and those at Port Macquarie, Newcastle and Parramatta were transferred to civil use in 1846, 1848 and 1848 respectively, and likewise the General Hospital and the Liverpool Hospital in 1848. The General Hospital was handed over to the Board of the Sydney Dispensary into which it was incorporated to become the Sydney Infirmary and later the Sydney Hospital. The Colonial Surgeons remaining volunteered for service in Van Dieman's Land to which they were transferred, other than Patrick Hill, who remained to continue in the re-established Civil Medical Service.....

(To be continued).
