

Each Soldier Costs Can. Government \$3,000

WASTAGE OF PUBLIC FUNDS—LACK OF EFFICIENT METHODS COSTLY IN THE OPERATION OF CANADIAN MEDICAL SERVICE OVERSEAS—EACH SOLDIER COSTS CANADIAN GOVERNMENT \$3,000 BEFORE HE GETS TO THE FRONT

Lack of proper organization and handling of casualties has cost the Canadian Government a large sum of money, estimated in the millions. According to the report of Col. Herbert Bruce on the operation of the Canadian Army Medical Service overseas, before a Canadian soldier reached the front he had cost the Canadian Government at least three thousand dollars.

Reforms have been instituted which have resulted in greater efficiency and a considerable saving of public funds.

Col. Bruce reports on the methods originally in vogue as regards casualties and the improvements made, as follows:—

DISPOSAL OF CASUALTIES.

The following report is compiled in an effort to make plain the close co-operation required between the branch under the director of recruiting and organization, and the Medical Service, in the system for the handling and disposal of casualties as undertaken by the former department.

Owing to the lack of precedent, and experience, in the Canadian service, the question of handling and disposing of casualties presented numerous difficulties at its inception. The primary object of such an organization should be (a) the reduction of wastage to a minimum, by returning as many casualties as possible to active service in the firing line; (b) the expeditions discharge of such as were found unfit for further service.

On the commencement of operations, undertaken with the above-mentioned ends in view, great difficulty was experienced in obtaining action from the reserve units in the training division, who were not handling the casualties reporting to them on completion of hospital treatment in an effort to comply with these principles.

A MENACE TO TRAINING

This situation came to a head in May, 1915, when it became apparent that the reserve units were becoming choked with unclassified casualties who were present in the lines—no action being taken with regard to their disposal and their position as "unemployed" was proving a serious menace to the training of the fit men, both from the economical and disciplinary standpoint.

The units were fully alive to this dangerous situation, and were anxious for an adjustment, but claimed that their hands were tied owing to the lack of the necessary machinery. There existed a grave shortage of competent regimental medical officers, and the few available were being constantly transferred and interchanged.

AN IMPOSSIBLE PROGRAM

Correspondence was passed drawing attention to the fact that it devolved upon one single medical officer to attend to the requirements of a reserve battalion carrying a strength of upwards of 1,500, among them several hundred casualties, the C.A.S.C., with its strength of 900 and the Engineers' Training Depot, of 600—making a total of 3,000 men; an impossible problem for one M.O., since the casualties required constant supervision and attention.

Many of these casualties should have been undergoing training, being really fit men, with a view to again being drafted overseas for active service. And, again, many were really unfit for further service, and should have been discharged and returned to Canada. But it was impossible for the harassed medical officers, working singly, to attempt this classification.

Strenuous endeavors were made to overcome or relieve the situation, and many suggestions were offered. The following extract from a communication addressed to Major-General Carson and the startling disclosure included in his reply are quoted:

"Owing to the very demand for medical officers all the M.O.'s belonging to the Training Depot Units have been utilized overseas, with the result that it is found necessary to parade the sick men to the various hospital, which are in some cases over a mile away. This is not fair, and certainly not satisfactory. . . . This is a matter that should be taken up without delay, and the D.M.S. should certainly provide permanent medical officers for the Training Depot. . . . The general officers commanding takes decided exception to the method in force as organized by the D.M.S."

General Carson's reply is as follows:

"Bring this matter before the attention of the general officer commanding, so that he may issue the necessary instructions to ensure that a proper medical officer will be attached and kept attached to this and all other units. We have at the present time first class medical officers serving with the British forces because we are told that we do not need them. If it is necessary to withdraw medical officers from any one of our units for lack of them we certainly do need them."

NO IMMEDIATE IMPROVEMENT

It was naturally anticipated that an immediate improvement would result, but it was found necessary on the 20th November, nearly two months later, to bring to the attention of the D.M.S., London, the fact that the complaints regarding the shortage of medical officers in the area was still prevalent. It was suggested at that time that the medical officers be recalled from the general hospitals in France, where they were in many cases being used to no advantage.

During this time, and for several months following, casualties were increasing in the lines of the reserve battalions and with the exception of evident discharge cases no action was being taken to dispose of them. Small parades were being held periodically of those casualties considered by the battalion medical officers to be fit for light duty. This classification was made without the aid of a medical board, and merely on the opinion of the medical officer examining the man.

Arrangements were, therefore, made with the A.D.M.S. to appoint medical boards for the purpose of boarding all uncertain cases in the lines. All men not actually and absolutely "fit or full duty" were paraded before these boards, and 5,635 were immediately found "fit" and were returned to their units for despatch overseas.

LITTLE PHYSICAL UPBUILDING

No effort had been made to undertake the physical upbuilding of men discharged from hospitals with a view of reclaiming them from the casualty class and again establishing them as soldiers fit to return to active service. It is admitted that this proposition was within the province of the medical organization to handle but no effort being made to undertake operations, it devolved upon a department in another branch of the service—forced to give the matter attention by the exigencies of the situation.

A scheme was therefore prepared and put into operation having as its primary object the reduction of wastage and the reclaiming of casualties to duty in the front. The scheme was based on the fact that there were 20,000 unfit duty men in the area of whom 5,000 were really "fit for duty" and a situation that could not be ignored, as the monetary expense to the government of maintaining these 20,000 useless men was enormous, apart from the fact that they were required as reinforcements.

NEW PLAN ADOPTED

The Canadian Casualty Assembly Centre was therefore evolved and put into operation, and two standing medical boards appointed to deal with the casualties as required. At the outset the same difficulty of transferring and interchanging of the medical officers arose, and, although the department objected very strongly to the removal of two medical officers experienced in board work, they had proceeded overseas, and no further action could be taken.

In the face of these difficulties the Casualty Assembly Centre commenced operations, and transferred to their strength every casualty in the lines, boarding these men as they reported, and classifying them according to their disabilities; (a) fit for duty; (b) fit after physical exercise; (c) discharge.

Those in category (a) were immediately returned to their units, to be included in the first draft overseas. Those in category (b) were despatched to one of the command depots, there to undergo physical training until graduating as "fit." Those in category (c) were discharged direct from the discharge depot at Bath with the least possible delay.

SAVING OF FUNDS EFFECTED

As a result of such operations the wastage has been reduced by over 50 per cent; increased efficiency in the training battalions has been promoted by the removal of casualties; the discharge and return to Canada of the

(Continued on page 8)

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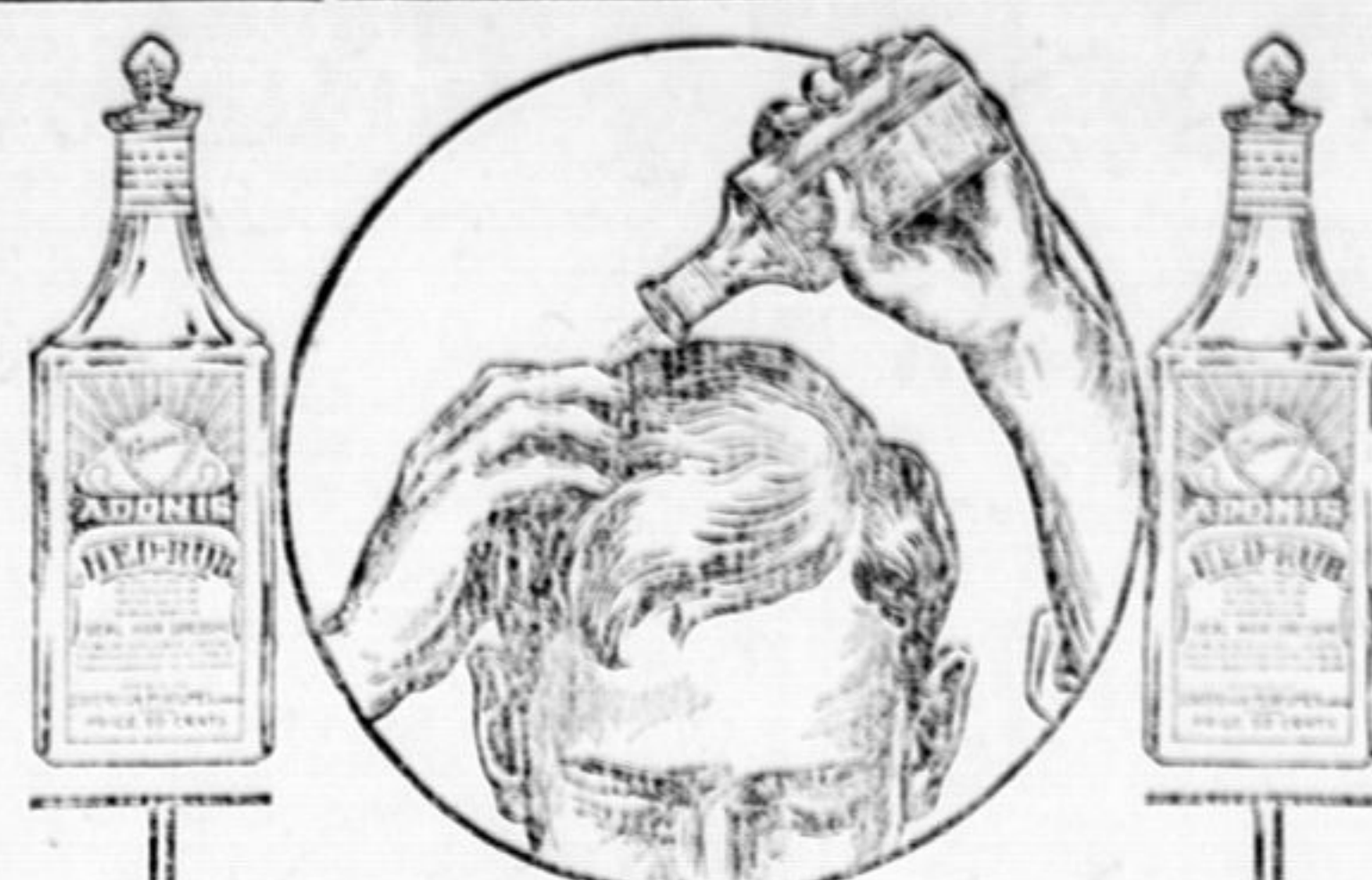
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