

1890.  
NEW ZEALAND.

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# HOSPITAL AND CHARITABLE INSTITUTIONS IN THE COLONY

(REPORT ON), BY THE INSPECTOR OF HOSPITALS.

*Presented to both Houses of the General Assembly by Command of His Excellency.*

The INSPECTOR of HOSPITALS to the Hon. the MINISTER of EDUCATION.

SIR,—

I have the honour to lay before you the following report on the hospitals of the colony :—

In my last report I dealt at considerable length with the general aspects of our hospital and charitable-aid systems, with the view of enabling all concerned to realise the facts bearing on the Bill then before Parliament. This year it is not necessary to do more than state in detail the expenditure for the year, except in those cases where something calling for remark has occurred in the interval. In Auckland the difficulty between the honorary medical staff of the hospital and the Charitable Aid Board has culminated in a complete change of system. In spite of successful efforts on my part to mediate between the parties on two previous occasions, the crisis was brought about by what seems to me the unreasonable refusal of the staff to enter their names in the attendance-book on every visit. Of course this was merely the last straw which determined the Board to take a course of action they had long contemplated—namely, to place the whole management of the hospital under a medical superintendent resident in the house, with a salary of £500 a year, and a qualified assistant. As I pointed out to the Board before they did this, the result has been that the medical profession has been practically excluded from the hospital, for it was not to be expected that in a city like Auckland they would consent to be treated as mere consultants whenever their services were wanted without any opportunities of independent practice being given them in return. The Board have been fortunate in getting a man in Dr. Collins of large hospital experience and great self-confidence to undertake the difficult task of managing the Auckland Hospital in such circumstances, and I can only hope that he will be able after a while to conciliate the goodwill of the profession in Auckland.

In Dunedin the agitation which had arisen over the alleged neglect of patients by the male nurses and the defects of the hospital buildings has partially subsided. The Board have undertaken to remedy all defects as soon as possible. The chief questions now for consideration are two: (1.) Whether certain teachers of the Medical School should be *ex officio* members of the hospital staff, and not subject every year to election by a somewhat capricious Board; and (2.) Whether the proper development of the Medical School, of which the hospital is the backbone, does not require that a beginning should be made in building a new hospital providing all modern requirements for treatment and teaching.

In some hospitals—as, for instance, Invercargill and Oamaru—the demand for throwing open the hospital to the medical profession, which is inevitable when towns attain a certain size, has been more or less vigorously preferred. In my opinion the time is not ripe in either of these places for the change.

On the west coast of the Middle Island, especially in the cases of Hokitika and Ross, the hospital system has broken down, and I look forward with great interest to the consolidating Bill that I understand is to be laid before Parliament.

In nearly all the other hospitals I observe a steady progress in economy, and in all of them a very keen local interest secures an almost entire absence of neglect or unkindness. Indeed, it is nothing less than wonderful to see what keen solicitude is felt about the management of these institutions all over the country.

It will be observed that the daily cost per head has fallen considerably in many places since last year. In the cases of Coromandel and Cromwell, however, the cost has increased this year