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HOSPITALS AND CHARITABLE INSTITUTIONS OF THE COLONY

(REPORT ON THE), BY THE INSPECTOR OF HOSPITALS.

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

The Inspector of Hospitals and Charitable Institutions to the Hon. the Minister of Education.

Sir,-

In studying year after year the working of our hospital and charitable-aid system I am more and more struck with two things: First, the tendency in every charitable movement to look to the initiative of the State; and, second, the consequent ostracism of charity. I desire to draw attention to the genesis and effects of that extraordinary development among us of the sentiment of benevolence so impulsive in its character, and so strongly vicarious in its methods, and which I consider to be one of the greatest characteristics and one of the chiefest dangers of our colonial communities. In searching for causes we must often go far afield. In tracing down the stream of tendency the chief thing is to make sure that you have got into the main current. There is no doubt that the main current of this impulsive humanitarianism, so markedly vicarious, of our people has its main source in the Christian doctrine of the brotherhood of man that, like

sunrise on the sea, marked the inauguration of our era.

Up to the great reaction of the sixteenth century the king's justice, supplemented by Christian charity, covered the functions of law and (optional) morality. That part of conduct which society has to make compulsory if it would secure its own existence is law. Now, among us, the wonderful thing is, that we seem to have despaired of charity and duty, and perhaps our most marked tendency is to place under legal compulsion as large an area of human conduct as possible. Up to almost our own time the movement of progress was in the contrary direction. The goal was to confine the State's action so far as possible to the security of person and property, and the measure of Britain's superiority over other nations was held to lie in the extent to which the activity of her citizens could with safety be left free from compulsion. How has it come about that our idea of freedom has been so transformed? The Protestant reaction was against the supremacy of the Church and the king. Private judgment in matters of faith and private enterprise in action were the new ideals of freedom. The whole movement which culminated in England just before the birth of her younger colonies meant the reinstatement of the individual, and the curtailment of community. Once it was admitted that in matters of faith every man was free, it became manifest that this freedom carried with it the right and duty of every free agent to provide also for himself and his family. If, however, the worker so takes his destiny upon himself here as well as hereafter it must be at his own peril. Success may, indeed, rown his efforts—he may become a millionaire; but then, on the other hand, what if he fail? Oh, that is another matter. Then, indeed, he must be handed over to the minimum compulsory charity whose symbol is Bumble. Surely this can never be what our fathers meant by freedom. This means for most of us simply freedom to starve. Just so, but you would have it; and that is the alternative offered by justice from the basis of your own claim for the right of

1—H. 22.

H.—22.

system with a generative impulse issuing in an amazing transfiguration, first of the colonies, and then, reflexively, of the empire itself. Britain was painfully, yet obscurely, conscious that something was very much amiss in her organization, some grievous maladjustment between the workers and their environment, and, behold, she was already in labour with a new birth, a renovating idea. That is nature's method of reformation. Somewhere in the organism, and somehow impregnated, a vital germ is lodged without observation and waits till the time is ripe. In this new idea of the true relation of the individual to the community, which found expression through Kant and Darwin, there lay latent portentous presages of change. The great popularising writers, as, for instance, Carlyle and Ruskin, and the poets, transformed the dismal view of society writers, as, for instance, Carlyle and Ruskin, and the poets, transformed the dismal view of society presented by the economists. A new revelation was given of the peril to the nation of an inadequate view of the nature of the individual. It was not safe to substitute the frying-pan for the censer. The old idea, self-love, as defined by "each man for himself," had led to chaos. It was not true that, given security by law for person and property, the individual reason and conscience might be safely trusted for all the rest. It was not true that charity would supplement the shortcomings of justice, and that national harmony would result from that ideal of freedom. This the majority were driven at length to see meant for them that each man of freedom. This the majority were driven at length to see meant for them that each man must work out his own salvation or damnation, as the case might be. That theory had actually issued in damnation for large masses of the people. Men must recast their ideas of freedom and justice, for was it not clear at length that in capitalistic England freedom had come to mean freedom to go to the devil each in his own way, and that justice meant "Devil take the hindmost"? Not merely justice, but faith and hope and charity, must be recast in another mould. Of the sister graces, Faith, Hope, and Charity, Hope alone is always inextinguishable: she springs eternal. Faith has always been liable to periods of eclipse during which the timorous, the real infidels, are terrified she may expire in the clutch of the dragon. The reason is that because of her unappeasable yearning for systematic completeness Faith will persist in crystallizing herself too soon. She is impatient of the slow march of science with its exhaustive method. Life is too short, so she takes the selective method of the poet—selective for a purpose discernible by the individual—and accordingly her reign is catastrophic. The socialist has despaired of her last individualistic construction where heaven is defined as a deferred consolation for the injustice and misery of life. He will have none of this bourgeois ideal of heaven by doubleentry, so he is going to found a new heaven and a new earth, from which faith is to be excluded just as Plato banished the poets from his republic, for did they not calumniate the gods? Faith is discredited in his eyes, and Charity must bundle and go with her sister, for did she not cling to her like ivy round a ruined tower? The democracy hate her, for was it not she with her meretricious allurements that glorified the sanctuary of Mammon?

In the early life of the colonies, while the traditional spirit of laissez faire was still powerful,

In the early life of the colonies, while the traditional spirit of laissez faire was still powerful, it was gradually found that the social sanction (richesse oblige) was too weak to enable commercial charity to make up for the defects of justice. The social sanction, in spite of its power in an old country, had failed with all its hold upon the past, "the heroic wealth of hall and bower." Some of its most potent elements at Home were incapable of transplantation here, while others were slow growing and took too long to mature. So it came to pass that the inadequately restrained rapacity of the individual in the "early days" was allowed to appropriate our most valuable lands in unreasonable quantities. This gradually brought about an acute struggle between the old ideas of property and the new colonial spirit of collective community with its resolve to nationalise the lands. The example of the colonies in this department of public policy reacted most powerfully on the legislation of the Empire, for did it not array the national conscience against its own policy in

Ireland?

Here we find ourselves, then, in the midst of a violent recoil of our majority against the bourgeois construction of earth and heaven. The humanitarian reaction which began, approximately, with the Victorian era has armed itself here in New Zealand with the trident of taxation in despair of Justice, for has not her bandage simply prevented her from seeing the capitalist sitting in the scale of her balance, and is not her sword rusted through? This three-pronged taxation, our new-found means of social salvation for the democracy, is to raise revenue, but also to foster native industries and nationalise the land. I believe that my experience of the working of our charitable-aid and hospital system has shown such dangerous elements in this humanitarian reaction as makes it dangerous to go further in the direction of using taxation not merely for revenue, but also as an instrument for social reform. I crave indulgence if I seem to introduce matters which may be considered irrelevant, but let us ponder this new departure, for the question is vital.

What is the one thing needful for our humanitarian reaction arming itself with the trident of taxation as its great means of social reform? The old prescription, "Know thyself." What means this new spirit, and what are its elements of danger? As I have indicated, charity has among us become vicarious, and therefore hateful to the working-classes. Even an old-age pension becomes offensive if she is allowed to touch it. And can we wonder at it? Was not she, as well as Faith, her sister grace, seduced into an improper intimacy with Mammon? But society has now to face the demands for their rights in the name of Justice of those who heretofore asked only for a dole from Charity. The whole of the helpless and dependent poor have so effectually been taught to consider themselves members of the family, and such undoubtedly they must be acknowledged by their mother society to be, however degenerate they have become. She is their mother. They will no longer be kept in ignorance of their rights in such a nursery as State Charity kept. What if we are weak, deformed, vicious, criminal, insane, idiots, imbeciles, inebriates, many of us incorrigible? Did we ask you, O mother, to bring us into the world? Why have you farmed us out so long to the salaried tenderness of Charity, who is no better than she should be, and, besides, has brutally ill-treated us, earning her wages by simply keeping us out of sight? The time has come when the clay can and does say to the potter, Why hast thou made me thus?

H.-22.

Charity must be discharged, we demand justice. A seat at the board and by the fireside of our mother. Even if we are bad, you, at any rate, must put up with us, for your neglect has made us

what we are. At any rate, you have got to keep us.

Society, convicted of sin, stands aghast at the appalling task which her own neglect in the past has set her. At first, as was natural, her distress was hysterical and paroxysmal. She would rush headlong into all sorts of irrational and fantastic atonements. She has actually spent in harebrained and futile schemes much more a thousandfold than would have prevented these Helots from ever existing. Observe, her immediate impulse was merely to recover her self-respect, and not to show any intelligent regard for the outcasts. This was the characteristic of that movement of social reform which coincides roughly with the Victorian era, and which may be called modern humanitarianism. The first fruits of the frantic repentance of society were subtly and spiritually selfish. Gradually reason and common-sense are beginning to interpenetrate her remorse, and it is becoming apparent to the reflecting among philanthropists that Charity's new alliance with science shows signs of emerging in a rational philanthropy. Society's remorse and repentance must cease to be merely self-regarding. She must think more of her victims and less of herself. Above all, she must form a clear idea of the magnitude of her mission of amelioration. She must try to understand her victims and the influences which have made them what they are. This axiom of rational remedy she is now almost prepared to hear discussed. She will accept it as her postulate by-and-by.

The Victorian era, as I have said, may be taken as coextensive with this reforming reaction. Though a hundred and twenty-four years have elapsed since John Howard began his crusade, yet it was as late as 1813 when Elizabeth Fry revealed the state of things in the Newgate of her day. She found "women chained to the ground lying in a dark cell, on straw changed only once a week, clothed only in a petticoat hardly visible for vermin." That was a harrowing sermon, containing seed which, however slow to germinate, at length sprang up as in the parable. The reforming movement went on, gathering in volume as it went. The long peace, the papid multiplication of wealth and luxury, generally softened down the indifference to pain which accompanied the rugged strength of our grandfathers. They were careless of the infliction of pain, but then they were willing to endure it. Meredith has given us an immortal type of this masculine age in "Kirby the Old Buccaneer." Dickens and Reade were, however, the more congenial prophets of sympathy, and they have largely formed the public sentiment of our time. It would take me too far to analyse the incalculable effects on our sympathy with pain, of the abolition of surgical pain by anæsthetics, or to show (as no good can come to man but evil shadows it) how our rapidly intensifying sensitiveness to pain (hyperæsthesia) has at length developed in us an intolerance of, and a shrinking from, pain so great and even effeminate that our grandfathers would scornfully deny that they could have had

anything to do with the begetting of us.

Hard on the advent of the anæsthetic came the widespread craving for narcotics, a most momentous and influential ingredient in our neurotic pathology to-day. Consider in this connection Exeter Hall, and all that it symbolizes, whilst the old Adam is at work among Matabeles (Trooper Halkett), Soudanese, and Afridis. Consider, also, how nature is trying unconsciously, through the tremendous invasion of athletics, to save herself from total emasculation. She is afraid, without being clear as to the meaning of it, that the rough animal may disappear before she can afford it. Will even war be required to save our manhood? Who can estimate the loss or gain in the exchange we seem to be making when we replace our grandfathers' carelessness in inflicting and enduring pain with a far smoother but deadlier unscrupulousness, such, for instance, as lately marked the action of some South African syndicators. It is to the full as perilous to our national welfare to make passionate pity for all pain our guide as we have found it to be to erect the individual as an end for himself. This gives rise to many evils which, I fear, we are shutting our eyes to, and these evils I would sum up in our fostering those tendencies that make for degeneration. The central fact in organic nature, and the fact which makes the whole intelligible, is the struggle for existence, if we will only look at it in its twofold aspect. Looking on the one we see in it nature's provision for all kinds of superiorities, without which all goodness would rot off the earth. The other side (separable only by the conditions of our intelligence) shows us nature's method of eliminating all incompetence by the slow process of degeneration. The dread alternative is nakedly faced. No humanitarian sentiment here. The universe of life could not exist on any other terms. To be strong is happiness; to be weak is misery. So far as nature goes, without human co-operation justice means success, and mercy is called forth by failure, with its various stages of vice and disease. Before the advent of man, on whom nature has laid the whole burden of amelioration, justice and mercy meant this simply: Succeed and be blessed; fail and be damned. Degeneration takes charge of the elimination of the unfit; vice and disease, its ministers, marshal the recalcitrants to death. With the graving-tool of destiny God is disclosing the statue immanent in the block. But what of the chips and the shavings? Is there no mercy for them? The mercy of God must flow through the intellect and conscience of man. God made man in his own image, his coadjutor and fellow-worker. Happiness for man is the unfolding of this Divine kinship. Man's reward is the smile on the stern face of Duty, and his proper work to raise the fallen. But how? By patient investigation of the laws of degeneration. Thus, Degeneration is the awful minister of Justice, and her processes are slow and hidden as the evolution she subserves. This fact has always been known to the wise, but science at length is able to decipher the processes of decay. Ceasing to aspire we begin to die; decomposition sets in the moment the vital force begins to ebb. Decay begins at the top in the dissolution of our latest and most precious acquisitions. We can demonstrate, at any rate, its grosser effects in the cortical cells and fibres of the brain. On the mental side it is easier to grasp the significance of the facts with which every one is familiar. At any rate, no intricate scientific apparatus is required. Degeneration first manifests its insidious effects in diminished resisting-power under temptation. All mental superiority has for its elements vivid sensations, vividly recalled as images by memory; and all inferiority, conversely, has dulled and blurred feelings, dimly recalled as images or motives. This is

H.—22.

the fundamental fact both on the intellectual and moral side. Vividness or dulness of feeling in all varying degrees is the common measure of excellence or defect. All education has for its end to stimulate the dull into vividness both in thought and conduct. Omitting the intellectual side of the fact, consider the rationale of motives to action (assuming the instinctive simply as such). The power that deters from, or urges to, an action under deliberation depends on our vivid grasp of the consequences of former deeds. A man's action is vigorous according as his memories are vivid and Feebleness of original impression and distance in time are the enemies of vivid recall. The strong man in thought and conduct is he who can allow for this diminishing effect of distance, who has a high endowment for moral perspective, and who has a keen appreciation of the relative greatness and real attractiveness of things. As a great sage once said, "The good man is he who is able now to realise what he will feel in the retrospect"—when the chickens have come home to This diminishing effect of distance in thought and conduct is most easily resisted by those whose feelings are keen. Their powers alike of appreciation and resistance when temptation assails depends on the degree in which former experience returns vividly. The able man, then, whether in thought or action, in science or conduct, is he whose vision is vivid. This is the point at which degeneration grips us. For its essence is that it blunts the feelings and blurs the image under recall. The drunkard resolves mightily while as yet his head aches and his mouth is like a lime-kiln, but, alas, it is a vanishing gleam. Vice generally thus means callous and blunted feelings, and that means weakening will, requiring ever a stronger and stronger dose of stimulant to make it respond: that is why man never is but always to be blest. The whole significance of stimulation is here—i.e., in the law of fading vividness—and the wise know that man's proneness to the use of stimulants lies in the power of certain things to brighten and recall the gleam that vanishes with such accelerating rapidity each time we avail ourselves of their influence. Failing alcohol, men will fall back on an alkaloid. The cells of all our bodily tissues obey the same universal law, and all disease is essentially loss of power in these cells to respond to normal stimulation. It is habit that corroborates every acquisition of power, and it is habit that is the agent of degeneration with its inveterate accumulation into vice and disease, whether bodily or mental. "Can we prohibit degeneration?" is like asking, Can we prohibit excretion? Can we retard it? Yes, up to a certain point; beyond that, reason bids us to facilitate the process. But how? By secluding degenerates from the possibility of procreation.

I have traced in outline the great movements that have resulted in making charity vicarious and therefore abhorred of the democracy. The new demand is for the legal enforcement of the rights of the "submerged tenth," the means—taxation. This is the key-note of our legislation. It behoves us, therefore, to make clear to ourselves above all things what exactly is meant by this demand for justice. Are we on the basis of an extended municipal and county franchise to give a legal right to maintenance, without restraint on propagation, to all who can successfully simulate inability to earn their own living? That is the question of questions for our legislators to ponder. This sentimental philanthropy operating through taxation prevails among us to an extent that has probably never been equalled anywhere. Nowhere is this spirit so plainly manifested as in our charitable-aid and hospital administration. As long ago as 1888 I wrote in my report as follows: "The law of competition, being co-extensive with organic life, has for its maxim, 'The wages of sin is death,' no matter whether the sin be individual shortcoming or inherited defect. Without this as its fundamental law human society would either never have originated or, having, like Minerva, been miraculously born full-grown, it would straightway have rotted out of existence. This is the condition—namely, that each should be able to hold its own—that nature has made the test of survival or mere existence as distinguished from well-being. In human society, however, this law, that each herring must hang by its own neck, is modified and controlled by a higher law on which depends the possibility of the family, the tribe, the nation—i.e., the golden rule of conscience. All our social problems—charity, land-nationalisation, sanitation, protection, education—come to nothing more than this: How far is it safe and salutary to suspend the former in favour of the latter—i.e., to be good-natured at the expense of justice? Our circumstances have stimulated our good-nature to an

To the cold-blooded question of Cain—"Am I my brother's keeper?"—the best of our race in all generations have instinctively replied, We at any rate feel ourselves to be so, and, if we would escape bloodguiltiness, we must be. Every heroic deed has its root in this. To what is due the forlorn struggle of the trades-unionist? Is not even our co-operative worker trying to carry his

weaker brother on his back?

Surely in past reports I have made it obtrusively clear that our subsidised propagation of the unfit is grotesquely absurd. If want of keen feeling, inherited or acquired, is the beginning of degeneration, and vice is due to increasing bluntness, intellectual and moral; if want of vividness in sensation passing into stupidity is vice merging into crime, then surely whatever tends to petrify feeling is condemned. Could human ingenuity invent a system so perversely adapted to blind all feeling of self-respect and independence in our people as our subsidised charity? My experience as a public officer whose chief business is to analyse the social significance of the tendencies manifested within my departmental scope leads me to say, with all the emphasis at my command, that any community that attempts to concede the right of the degenerate to procreate without restraint is merely subsidising the survival of the unfit. A law tacitly admitting, as ours does, not the right to a bare subsistence merely, but even to modest comfort of all who can assume a sufficiently plausible appearance of poverty is simple delirium. Our lavish and indiscriminate outdoor relief, whose evils I am tired of recapitulating—our shameless abuse of the hospital system—

H.-22.

the crowding of our asylums by people in their dotage, kept there because there is no suitable place to send them to, and many of them sent by friends anxious only to be relieved of the duty of sup-

porting and caring for them—what is it all coming to?

If society is to be saved from breaking down under the tremendous load of degenerates in esse and posse that it will persist in carrying on the taxes we most accept the portentous significance of degeneration. We must try to grasp its rationale, and see to it that our attempts at palliation no longer are permitted to intensify the process of blunting the people's self-respect. To use taxation as we are doing—as an instrument of social reform—with any safety, we must somehow provide for the elimination of the unworthy who have become incorrigible. Otherwise the burden will become too heavy for the whole available motive-power of all the religion, all the virtue, and all the good-fellowship extant among men. It will simply leave the field clear to the predaceous demagogue.

It is the old task of Sisyphus: You must alter the grade of that hill, else for ever that "shameless" stone will continue to roll back. Is it not time that, on the hustings, in Parliament, the Press, and the pulpit, this mawkish sentimentalism should be made ashamed of its imbecility? Is there no longer extant among us enough robust manhood and common-sense to cease this sickening cant of cheap philanthrophy—cheap, i.e., to our private pockets, but insanely lavish with the taxes? As if all this were not enough, we have enfranchised woman, and it remains to be seen whether she will prove herself the apostle of common-sense amidst this abyss of insincerity and humbug. Surely they as a sex are interested in purifying the fountains of life. Must the mother always weep

I used to be hopeful of the sobering effect of Direct Taxation, but now the outlook is less nising. Until we make up our minds to seclude—till they become safe—our degenerates promising. and incorrigibles even direct taxation in the interests of the "have-nots" can only bring universal beggary. Taxation of the few by the many in their own interest is the rock ahead of our

democracy, especially with our notions of tridental reform.

As if the State had a vested interest in the degradation of its people, I find that they, as fathers, mothers, brothers, sisters, are responding to our efforts to sap their self-respect by doing their utmost to throw the cost of maintaining their relatives on the taxpayers. I constantly hear the plea urged that as taxpayers and old colonists they have a right to send their relatives to State One of the heaviest and most thankless of my multifarious duties is to resist to the best of my ability the swelling tide of pauperisation. Given on one side the full current of our vicarious philanthropy, all the believers in our sympathetic taxation, with direct access to members and Ministers by those who do not like compulsion to pay what they see their neighbours so easily get out of, and on the other a public officer of whose duty it is a mere trifling addendum that the whole onus of resistance should rest on him, and what can the democracy expect? Consider that nobody cares whether the officer collects the money or not, but that anybody who can be got at cares a great deal indeed, and takes care that he shall feel it if he is too persistent in his exactions, and who can wonder if the time be approaching when the public shall have such servants as its supineness deserves?

In all our hospitals and charitable institutions the enforcing of payment for maintenance is left to local bodies, many of whose members are full of this humanitarian zeal, while they are absolutely ignorant of the evils which attend its exercise. Many more of these members are ambitious of a public career, and utilise our charities as stepping-stones to popularity. All the inmates of our charitable institutions and all the adult recipients of outdoor relief have votes, and that, I say, is a great evil in such circumstances as ours. We have the worst possible form of administration for our charities. The local bodies are multiplied so absurdly that the ratepayers and contributors are absolutely tired of voting at the endiess elections, and their representatives are year after year elected in the most haphazard fashion. Nobody cares anything about it. I endeavoured last year, with the help of Mrs. Neill, to let in a little light on the proceedings of the Wellington Benevolent Trustees, with little effect. This year, indeed, some little care was taken to see that some contributors were present at the annual meeting besides the candidates, who for so

many years past practically elected each other.

Another serious evil is that these members are appointed annually. Now, universal experience proves that there is no public office where inexperience is so mischievous and its effects so terribly expensive as in dispensing public charity. Even the shrewdest and hardest-headed defenders of the public purse are unable to resist the appeals and the sights of misery, real and feigned, that come before them, and by the time they are beginning to understand a little their year is up and they mostly retire in despair. Let there be but one or two persistent men on the Board, and nothing is more certain than that, in the present comatose condition of public feeling, they, with the secretary, will get control of the whole expenditure. The evil results of such a state of things are infinite, and nobody takes the slightest trouble to even notice them. Some day the Demos will cry out in its dreams, and some poor official victim will be sacrificed to its repose. One of these evil results has often thrust itself on my attention. I mean the impossibility of enforcing any discipline whatever in these institutions. There are so many in search of a mission to secure popularity, and there is no means so cheap and effectual to this end as an agitation to expose some abuse of authority—as if it were still anywhere extant—or, if possible, something like cruelty. drunken old reprobate, quite incapable of truth, can easily be found to bring horrible charges against the officers. A letter or two in the papers act like a spark in a magazine, so susceptible and inflammable is our humanity, so explosive our virtue, and so cheap. Nothing short of a Royal Commission will serve as a sop to Cerberus. I have seen dozens of them, and never one worth a penny of the money squandered on them. There is hardly a week that some Commission or other is not at work keeping up turmoil in one or other of our institutions. At a certain hospital a short time ago (one of many such experiences) I had a series of the most horrible charges made to me against the master and matron, which I took down in writing and carefully investigated. I

H.-22.6

found every one of them to be malignant fabrications. The man who made them was a depraved, disreputable villain, an habitual liar, without a trace of shame, and was well known to be so. He had been dismissed from the institution many times for being drunk and abusive, and making gross charges against the officers, yet so afraid were the Board and the secretary of the man's plausibility and the proneness of the public to fits of raying on this subject that he was constantly plausibility and the proneness of the public to fits of raving on this subject that he was constantly readmitted in spite of the officers. At last he practically took charge. I happened to be inside the building, with the window lifted a little way, and I heard him insult everybody, especially the officers, in the most outrageous way. He threatened what he could do to them, and defied them with insult. They were afraid, the Board were afraid, and the secretary. The position was a scandal. I wrote to the Board describing the state of affairs. The Board, as soon as I became responsible, acted at once, and now there is peace. They wrote to thank me for my letter, which relieved them of such a difficulty. Such are the experiences that have convinced me that in the existing mood of public sentiment no popularly elected body can govern these institutions, and much less can any public officer, until these incorrigibles and degenerates are restrained.

Our hospital system is also greatly abused. The trustees, everywhere except in Auckland, are lax in enforcing payment from persons who are able to pay their maintenance. In Auckland last

Our hospital system is also greatly abused. The trustees, everywhere except in Auckland, are lax in enforcing payment from persons who are able to pay their maintenance. In Auckland last year £3,140 was collected, in Dunedin £1,393, in Wellington £1,617, in Christchurch £524. The column of figures in the reports on this subject ought to be seriously pondered, for it is very significant. The outdoor department in some of our hospitals, and especially in Wellington, is attaining alarming proportions. I have drawn attention to it year after year, and I have personally remonstrated with members of the Board. They, too, are naturally afraid of resisting the popular demand for cheap medical treatment, and are apt to forget that they are administrators of a public charity. They say they do their best, and perhaps it, would be upressonable to expect of a public charity. They say they do their best, and perhaps it would be unreasonable to expect them to resist the current of vicarious humanitarianism that runs so high in this town. Here, whenever any movement of a philanthropic kind is started, the first thing as a matter of course is to get up a deputation to wait on the Minister for a subsidy. Medical fees are so high and the hospital doctor so popular that it is difficult to refuse a permit to the hospital. I am glad to find that this year the doctors are beginning to try to check this evil. It never seems to occur to people that medical fees must be high wherever a doctor has sufficient standing to enable him to exact them. For the rest, what with friendly societies on the one hand and the hospital on the other, the pressure on the profession is very great. In all our centres of any size this pressure creates a demand for hospitals, in order that an existing doctor may be subsidised or a new one induced to settle. The usual procedure is: The doctor suggests to some of his influential friends that the district is entitled to a hospital quite as much as such-and-such a place. The local editor is enlisted, letters appear in the paper, some active and ambitious member of the local body sees possibilities in the movement. He heads a deputation to the Minister. Nobody counts the cost. I have resisted to the utmost in such cases, but always in vain. At this moment claims on claims are being urged, and all the obstruction naturally falls to me, and everybody who is interested knows the fact. If things go on as they have been doing, I see nothing for it but that the practice of medicine be taken bodily over by the Government. Certainly this is the point at which the tide of socialism can most easily break through, for the gap in the bank is a big one already.

The question is very serious, and is daily becoming more so. Ever since Lister taught the world the part that is played by the microbe and sepsis in disease, it is clear that to operate successfully in serious cases the doctor must have the fullest control of the conditions of treatment. It cannot be denied that hospitals properly constructed, drained, lighted, and ventilated, with demand for hospitals, in order that an existing doctor may be subsidised or a new one induced to settle.

cannot be denied that hospitals properly constructed, drained, lighted, and ventilated, with skilled nurses and suitable appliances, offer, both to the patient and the doctor, such advantages as no private house can afford. The plea for the extension of the State's functions in this direction is therefore becoming steadily more irrelatible. This is what the argument comes to. Why not in every place where a doctor can settle found at least a cottage-hospital, that we may get his services cheap; and, where one cannot yet make a living, also found a hospital to enable him to do so? What does it matter if there be no longer any prizes in the profession worth struggling for? That, they think, is no concern of theirs. There are always plenty more doctors. Little do they know that there is no such dangerous enemy of society as an unscrupulous doctor, nor one that the State ought to look after more sharply. This would be going a long way towards taking over the whole practice of medicine by the State. We are half-way there already. Has not the State control of the medical register, and can it not regulate fees far more easily than it can fix the living-wage? It can be done by a Bill, just as you can regulate the

weather by fixing the barometer at "Set fair."

Still another phase of this complex question may justify a few words. Our hospitals have practically ceased to be charitable institutions. We have done our best to teach people that it is now a matter of justice, and tridental justice at that. All modern hospitals must have private wards for those who can pay for them. Very good; why not? How many persons from a distance have to come to our large towns for medical treatment? How many lodgers in private houses and hotels who cannot be properly cared for except in a hospital? Are we not to make any provision for these? Admit them to the hospital, then. Are you prepared to allow the doctor to charge for operations done in the hospital a fair fee over and above all hospital charges? doctor to charge for operations done in the hospital a fair fee over and above all hospital charges? Are you prepared to face the consequences of this and allow hospital rooms, hospital nurses, hospital medicines, and other public appliances to be used for the doctor's private patients. If you are not, do you expect men of any standing in the then conditions of practice to give their services for nothing, or for a mere paltry salary, to persons who would, in ordinary circumstances, be their private patients outside? One of the inevitable consequences of this tendency will be to throw all our hospitals into the hands of inferior men. And then, how are you to prevent a doctor in practice and who is also attached to a hospital from foisting on it any patient from the part of the patients of the property of the patients of the patients of the patients of the property of the patients whom he has taken all he can get in fees, in the well-assured confidence that he will not be asked to pay there; or, if by chance he should be, all he need say is that he cannot pay? If it be replied

H.-22

that the Board of Trustees have full power to fix the doctor's salary, either these extra payments must be matter of private arrangement, or they must be included in the salary, which must then be enlarged. How could a case like this be met? A certain district hospital had an energetic trustee who lived at a centre some miles away. He wanted to raise the doctor's salary, paid out of taxes mostly, by £50, provided the doctor would visit the village once a week at his own cost, and charge the same fee as in the hospital town. In short, the ways and devices are numberless in which our hospitals must continue to be abused even as they are now; and what can we expect if the stigma of charity be removed, and justice takes her place? This is where we are drifting to. I only ask that we should do it with our eyes open. The real difficulty in this as in all our other institutions is that, in the present state of public sentiment, the right men—the men who in point of ability and integrity can be safely trusted with such functions—are not available. We are like the swine of Gadara plunging down a steep place into the sea, possessed by this devil of vicarious charity masquerading as one of the Christian graces. Even the Churches have become infected. For their rescue-work the Anglican and the Catholic Churches, as well as the Salvation Army, are subsidised. The Presbyterian Church of Otago tried it, but, reminded of their traditions, they retired.

Again, look at the leaps and bounds by which our system of female nursing is growing. Stimulated by the demand for an eight-hours day, so desirable in itself if we could only organize society so as to get it, our hospital trustees show a tendency to grant this even where it is not required—I mean in such hospitals as must have a considerable staff to cope with the typhoid season. This happens in some hospitals which, yet, as a rule have easy times because the patients are few. I know hospitals where the nurses are increasing far too rapidly in number—during the slack times they are simply in each other's way—where their demands for every comfort are so loud and persistent in the mouths of their humanitarian champions that it looks as if the whole system must break down of its own weight.

In all these things I have pointed out, together with much that no one sympathizes with more than I, there is still to be discerned much that comes of thoughtless extravagance fostered by

State subsidies, and a very great deal of a corrupting and degenerate philanthropy.

The practical outcome of our overlooking the continued accumulation of degenerates among our people by our fostering of all kinds of weakness will necessarily be, if it continues, that society will itself degenerate. Taxation will increase by leaps and bounds, and the industrious and selfrespecting citizens will rebel, especially if taxation is expected to meet all the demands of a Legislature that puts our modern humanitarian idea of justice in the place of charity. Even if the socialist does come, there is a hope that he will see the absolute necessity of preventing the present subsidised propagation of the unfit. He may be expected to see what degeneration means, and to insist that its increase shall stop. While the State is bound to admit that these unfortunates are her children, for whose birth and parentage her own selfish neglect in the past is responsible, yet she must in self-defence take control of them. All of a certain degree of inveteracy must be committed to State institutions, where they shall be kindly but firmly treated—well fed, well lodged, well clothed. Their faculties for improvement must be carefully estimated, and tasks set them which are not beyond their strength. Their lives, left to themselves, have been hopeless failures, because their passions are beyond their control. By our former and existing treatment they are only made worse at enormous expense, attempting their punishment, their control, or their cure by methods confessedly absurd.

I venture to agree with President Alexander Johnson, of the American National Congress of America last year, that the time has come when every civilised State must say to the degenerate, "I have tried punishing, curing, reforming you, and I have failed; you are incurable, a degenerate, a being unfit for free social life. Henceforth I shall care for you; I will feed and clothe you, and give you a reasonably comfortable life. In return you will do the work I set for you, and you will abstain from interference with your neighbour to his detriment; and one other thing you will abstain from—you will no longer procreate your kind; you must be the last among your feeble and degenerate family." As for the cost of all this—we are already wasting far more by our present foolish methods than wise and complete care would cost. This was contained in embryo in the

Bill of 1890.

ARROWTOWN HOSPITAL.

Number of pa Admitted duri	tients or	n 31st Marc year	ch, 1897	···	•••	•••	10 87	
	Total	under treat	ment	···				97
Discharged	•••	•••	•••		••		90	
Died	•••		•••	•••	•••	•••	5	
Remaining on	31st M	arch, 1898						2

Sex.—61 males, 36 females.

Localities from which Patients came. — Arrow, Macetown, Cardrona, Skipper's, Wanaka, Gibbston, Lower Shotover.

Country.—England and Wales, 15; Ireland, 7; Scotland, 20; New Zealand, 41; Switzerland, 2; Prussia, 1; Tasmania, 3; Victoria, 6; Denmark, 1; Germany, 1.

Religion.—Church of England, 27; Presbyterian, 55; Wesleyan, 4; Roman Catholic, 10; Lutheran, 1.

Total collective days' stay in hospital, 1,880; individual average days' stay, 19.38. Daily average cost per head, 7s. 6½d.; less patients' payments, 5s. 11d.

Outdoor Patients.—Individual cases, 117; attendances, 157.

	\mathbf{R}	EVENU	JE A	AND	Expenditure.					
Reve	enue.	£	s.	d.	Expe	enditure.		£	s.	d.
From Government		173	3	0	Rations		• • • •	148	4	5
Local bodies		152	15	0	Wines, spirits, ale, &c.			6	17	6
Subscriptions and donation	ons	170	17	1	Surgery and dispensar	y		43	12	6
Patients' payments		147	9	9	Fuel and light	•••	• • •	27	15	0
Balance from last year		168	6	9	Bedding and clothing	• • •	•••	6	13	0
					Furniture and earthen	ware	•••	22	4	9
					Salaries and wages		• • •	368		8
					Funerals	•••		2	0	0
					Repairs		•••		10	0
					Additions to buildings	• • •	··· <u>·</u>	39	15	0
					Printing, advertising,	postage,	and	_		_
					stationery	• • •	• • •	6	14	0
					Insurance	• • •		8	14	9
*					Other expenses	•••	• • •	51	4	4
Total		£812	11	7	Total	•••	•••	£743	16	11

Inspected 9th March, 1898. Dr. Thomson resides in the grounds, and I heard everywhere of his attention to his work. In this district there is an outlying mining centre called Macetown, lying high up on the ranges, and a proposal was mooted that the doctor's salary should be increased by £50 on condition that he should visit Macetown once a week, and treat patients there on the same terms as at the centre—Arrowtown. I pointed out that this would be an ingenious way of providing the people of Macetown with cheap medical advice at the cost of the colony. I understand that this view of the case has now been admitted. The Arrowtown Hospital is well managed in every respect.

ASHBURTON HOSPITAL.

Number of pa Admitted dur	tients o	on 31st M year	arch, 189 	7		•••	$\begin{array}{c} 12 \\ 183 \end{array}$	
	Tota	l under tr	eatment	•••	•••			195
Discharged		•••	•••				175	
Died		• • •		•••	•••	• • •	8	
Remaining on	31st M	Iarch, 189	98		•••			12

Sex.—170 males, 25 females.

Outdoor Patients.—None.

Localities from which Patients came.—Ashburton County, 190; Lake Heron, 1; Timaru, 1; Christchurch, 1; Hanmer Plains, 1; Rangiora, 1.

Nationality.—English, 52; Irish, 53; Scotch, 19; New Zealand, 58; Australians, 7; Welsh, 2; others, 4.

Religion.—Church of England, 74; Presbyterian, 41; Roman Catholic, 48; Wesleyans, 18; others. 14.

Total collective days' stay in hospital, 4,291; individual average days' stay, 22. average cost per head, 5s. $6\frac{3}{4}d$.; less patients' payments, 4s. 11d.

REVENUE AND EXPENDITURE

REVENUE AND EXPENDITURE.										
R	evenue.		£	s.	d.	Expenditure.		£	s.	d
From Government	•••		508	7	1	Rations		304	9	4
Local bodies			490	0	0	Wines, spirits, ale, &c		14	6	6
Patients' payments	• • •		138	9	0	Surgery and dispensary		151	3	0
Other sources	•••		8	0	0	Fuel and light		53	12	1
Balance from last yea	ır		155	11	1	Bedding and clothing	•••	18	8	6
-						Furniture and earthenware		51	9	4
						Washing and laundry	• • •	2	5	0
						Salaries and wages	• • •	441	18	10
						Funerals		15	1	6
						Repairs		25	1	10
						Printing, advertising, postage,	\mathbf{a} nd			
						stationery		.8	6	7
						Interest		0	2	6
						Insurance		15	15	0
						Other expenses	• • •	91	18	11
Total	•••	£1	,300	7	2	Total	£1	, 193	18	11

Inspected 23rd September, 1897, and 31st March, 1898. Three of the single private rooms are being converted into one long ward, and there has also been added a room for the use of convalescent patients, with a library attached. These have been erected by local subscriptions subsidised by Government. Mrs. Mackay has had some difficulty in getting a suitable assistant nurse during the past year, but the housekeeping department of this hospital is admirable—managed with economy.

AUCKLAND HOSPITAL.

Number of p Admitted dur				7		138 1,300
	Tota	l under tre	atment			1,438
Discharged		•••	•••	•••	• • • •	1,181
Died	•••	•••	•••	•••	• • •	118
Remaining of	n 31st M	Iarch. 1898	3	• • • •		139

Sex.—1,006 males, 432 females.

Localities from which Patients came. - Auckland City and suburbs, 869; Auckland District, Localities from which Patients came.—Auckland City and suburbs, 869; Auckland District, 353; North Auckland, 62; South of New Zealand, 48; Coromandel, 32; Thames, 27; shipping, 47.

Nationality.—English, 382; Scotch, 80; Irish, 192; New Zealand, 618; Australian, 57; Canadian, 10; American, 10; German, 20; Swedish, 18; Indian, 8; Japanese, 4; Belgian, 2; Italian, 1; Maltese, 3; Spanish, 2; Portuguese, 4; Mauritius, 2; Ceylonese, 2; Swiss, 1; Newfoundland, 1; South Sea Islands, 7; French, 3; South African, 3; Greek, 1; Dutch, 4; Danish, 3.

Religion.—Church of England, 708; Roman Catholic, 329; Presbyterian, 188; Wesleyan, 115; Baptist, 28; Lutheran, 21; Congregationalist, 10; Salvationist, 11; Church of Christ, 9; Hebrew, 9; Unitarian, 1; Plymouth Brethren, 8; Freethinker, 1.

Total collective days' stay in hospital, 44,132; individual average days' stay, 30·69. Daily average cost per head, 4s. 1½d.; less patients' payments, 2s. 11d.

Outdoor Patients.—Individual cases, 389; attendances, 5,276.

	KEVENU	JE AND	EXPENDITURE.			
Revenue.	£	s. d.	Expenditure.	£	s.	
From Government	3,085	0 2	Rations	2,258	12	2
Local bodies	3,085	0 2	Nurses' Home maintenance	607	1	7
Subscriptions and donations .	28	11 3	Wines, spirits, ale, and porter	43	6	9
D	350	4 10	Surgery and dispensary	963	15	10
and the second	2,686		Fuel and light	745	16	10
Rents	107		D. J.J J	200	3	5
Tuenus	101	11 4	170 1 1 1	108	_	7
						10
			Washing and laundry	276		10
			Salaries and wages	2,819		6
			Water-supply	211	14	9
			Funerals	32	2	3
			Maintenance of grounds	124	6	4
			Repairs	516	0	6
			Printing, advertising, postage, and		•	•
•			at a time and	107	15	1
						7
			Legal expenses		11	9
			Insurance		18	9
		*	Proportion of office expenses	227	15	. 0
			Interest	7	5	9
			Other expenses	59	0	6
			1			
Total	£9,343	12 2	Total	£9,343	12	2
2.0001 882 88	20,010			~0,010		

This hospital has been inspected by me three times during the year. The turmoil among the nursing staff which had prevailed for a considerable time seems to have settled down. On my last visit it appeared as if a feeling of good-will between the nurses and the matron was beginning to emerge, and that the vexed question of the proper authorities to appoint probationers would gradually settle itself. Some years ago, when the present system of having a medical superintendent to take charge of the hospital was being discussed, I was obliged to express my doubts of the wisdom of the plan. Ever since I have been actuated by a desire to indulge in no criticism that I could avoid, in order to give every opportunity of proving itself successful to the new method of government; and I call attention to the matter now simply in order to urge the necessity for caution regarding the recent proposal to have two resident assistants to Dr. Baldwin. What with attempts to limit the nursing staff to eight hours' work a day, and a well-paid medical superintendent with two assistants, there is a great danger that the organization will break down of its own weight. The alarming prevalence of typhoid fever in this district ought to cause great searchings of heart to those who are responsible for the water-supply and the sanitary arrangements of Auckland and its suburbs. The actual working of the hospital, apart from the problems arising from the organization of the medical and nursing staff, is satisfactory. The greatest credit is due to the Board for the careful way in which the patients' payments for maintenance is looked after. In this respect their example is a credit to the district and a guide to the colony.

2—H. 22.

BLENHEIM HOSPITAL.

Number of pa Admitted dar	tients on 31st Marcing the year	ch, 1897			$ \begin{array}{ccc} & 28 \\ & 164 \end{array} $	
7 0' 1 1	Total under treat	ment	• • •	•••		192
$egin{array}{ll} ext{Discharged} & \dots \end{array}$		•••	•••	•••	153 14	
Remaining on	31st March, 1898	•••	•••	•••		25

Sex.—117 males, 75 females.

Localities from which Patients came. Marlborough, Nelson, West Coast, Canterbury, Napier,

Wanganui, Wellington, Auckland.

Country.—England, 48; Ireland, 8; Scotland, 20; New Zealand, 102; Germany, 4; Wales, 1;

Australia, 5; France, 1; China, 1; aboriginal, 2.

Religion.—Church of England, 99; Roman Catholic, 23; Presbyterian, 35; Wesleyan, 24; Salvationist, 2; Lutheran, 3; Plymouth Brethren, 5; Freethinker, 1.

Total collective days' stay in hospital, 9,984; individual average days' stay, 52. Daily average cost per head, 4s. 4d.; less patients' payments, 3s. 9d.

REVENUE AND EXPENDITURE.

	_		_		_			_		_
* A	Revenue.		£	s.	d.	Expenditu	re.	£	s.	d.
From Government	•••		912	5	10	Rations		522	11	0
Local bodies			524	19	5	Wines, spirits, ale, &c		27	2	0
Subscriptions and d	onations		41 8	11	6	Surgery and dispensary		253	7	10
Rents	• • • •		8	8	0	Fuel and light		218	17	3
Patients' payments			293	17	0	Furniture, earthenware, and	dra-			
Other sources			2	7	6	pery		229	4	5
						Salaries and wages		658	18	5
. **						Water-supply		63	6	9
						Funerals		14	0	0
						Repairs		75	17	4
						Printing, advertising, postage				
						stationery		40	15	6
						Interest		1	2	9
						Insurance	• • • •	15	17	9
5.5						Other expenses		39	8	3
			·				• • • •			
Total		• . •	£2,160	9	3	${\bf Total} \qquad \dots$		£2,160	9	3
				_						_

This hospital was visited by me on the 27th January. Everything was found in good order. For years I have felt called upon to acknowledge the exceptional surgical activity of this hospital. A practice has gradually grown up, largely in consequence of Dr. Cleghorn's reputation, of persons from a distance able and willing to pay entering here as private patients. In addition to paying all hospital charges, some persons have paid the surgeon direct for operations. From many points of view this may seem to be quite fair, and for a time Dr. Cleghorn could not admit the reasonableness of my remonstrances; but he has written since my visit to say that he accepts my grow of the matter. view of the matter.

With regard to the site for the new fever hospital, I made certain suggestions with a view to facility for working it, but I am not disposed to press them against the wishes of the Board.

The accommodation for the nurses, formerly so unsatisfactory, is now good; but the old surgery is now a useless room. It would be an improvement if the passage were carried through, and the remaining space used for a ward kitchen.

The raising of the water-tower has resulted in a good supply of water.

CHARLESTON HOSPITAL.

Number of Admitted d			ch, 1897 		•••		$\begin{array}{c} 5 \\ 31 \end{array}$	
	Total u	nder trea	tment	•••				36
Discharged	•••			• • •		•••	27	
Died	•••	•••	•••	• • •	• • •	• • •	2	
Remaining	on 31st Mai	rch, 1898	•••	•••	•••		_	7

Sex.—36 males. Localities from which Patients came.—Charleston district and Nelson, Westport, and Cape

Nationality.—Irish, 14; Scotch, 5; English, 2; New Zealand, 13; Norwegian, 1; Swedish, 1.

Religion.—Church of England, 12; Presbyterian, 5; Roman Catholic, 19.

Total collective days' stay in hospital, 1,784; individual average days' stay, 49.55. Daily average cost per head, 5s. 6½d.; less patients' payments, 5s. 3d.

REVENUE AND EXPENDITURE.

Revenue.		£	s.	d.	Expenditure.		£	s.	d.
From Government	•••	237	14	1	Rations		171	16	7
Local bodies		123	6	8	Wines, spirits, ale, &c		3	9	0
Subscriptions and donations		115	2	2	Surgery and dispensary	•••	3	1	7
Patients' payments		21	10	4	Fuel and light		21	16	11
1 0					Bedding and clothing		12	17	4
					Furniture and earthenware		0	12	0
					Salaries and wages		240	0	0
					Funerals		6	Ó	0
					Repairs		11	12	0
					Printing, advertising, postage, a	ınd			
					stationery		8	16	2
					Insurance		2	7	3
					Other expenses		11	18	9
${\bf Total} \qquad \dots$	•••	£497	13	3	Total	•••	£494	7	7
					1				

Visited 24th January, 1898. I have no change to report in this institution. It still continues to be a comfortable old diggers' home. The doctor is very kind and attentive.

CHRISTCHURCH HOSPITAL.

Number of pa Admitted dur			arch, 1897 	•••		•••	$\begin{smallmatrix} 96\\1,229\end{smallmatrix}$	
TO: 1 1	Tota	l under tr	eatment		•••		1 140	1,325
Discharged Died	• • •	• • •	•••	•••	•••	•••	1,149	
Died	•••	•••	•••	•••	• • •	•••	105	
Remaining or	n 31st M	Iarch, 18	98 ,	•••		•••		71

Sex.—844 males, 481 females.

Localities from which Patients came.—Christehurch, 557; Suburbs, 393; North Canterbury district, 173; Lyttelton, 86; Otago, 1; Ashburton, 4; Timaru, 1; Waterton, 1; Wellington, 1; unknown, 108.

unknown, 108.

Country.—New Zealand, 578; England, 347; Ireland, 188; Scotland, 83; Australia, 32; America, 13; Germany, 12; Sweden, 9; Norway, 8; Italy, 6; Denmark, 6; Tasmania, 5; France, 3; Syria, 2; Wales, 2; Austria, 1; Canada, 1; Guernsey, 1; Spain, 1; Belgium, 1; China, 1; others, 25.

Religion.—Church of England, 589; Roman Catholic, 197; Presbyterian, 171; Wesleyan, 69; Methodist, 40; Lutheran, 24; Baptist, 19; Salvation Army, 17; Bible Christian, 6; Congregational, 5; Church of Christ, 3; Plymouth Brethren, 3; Jewish, 2; unknown, 180.

Total collective days' stay in hospital. 27.786: individual average days' stay 20.97 Deily

Total collective days' stay in hospital, 27,786; individual average days' stay, 20.97. Daily average cost per head, 5s. 7½d.; less patients' payments, 5s. 2¾d.

Outdoor Patients.—Individual cases, 886; attendances, 4,160.

REVENUE AND EXPENDITURE.

Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government		5,506	6	8	Rations	1,882	16	0
Local bodies		4,841	17	3	Wines, spirits, &c		10	4
Subscriptions and donations		34	2	0	Surgery and dispensary	585	19	5
Bequest		3,800	0	0	Fuel and light	876	3	0
Patients' payments		555	10	0	Bedding and clothing	268	10	5
Other sources		44	6	4	Furniture and earthenware	42	19	0
Balance from last year		2,197	6	3	Salaries and wages	3,234	15	7
v					Funerals	29	3	0
					Repairs and additions to buildings		0	11
					Printing, advertising, postage, and			
					stationery	52	1	1
					Commission	8	15	0
					Insurance	73	14	11
					Casual ward, Lyttelton	87	17	4
				1	Other expenses	320	18	11
Total	£	16,979	8	6	Total	£12,616	4	11

Mrs. Neill and myself have frequently visited this institution during the year, and on each occasion have found it to be well administered. I am disappointed to find that the new Marks Ward, owing to delays from various causes, is not yet in occupation. The slates, which had been ordered from Home, caused a long delay, and now the plastering has been so bungled, either by the architect or the contractor, that, in my opinion, it will all have to be broken down and done over again. Nothing short of that can be satisfactory. I hope the Board will not tolerate any patchwork. As I pointed out when the plan was adopted, the cost of this ward addition has amounted to nearly double the architect's estimate. The beautiful view of the river and grounds could not, unfortunately, be taken advantage of for the large wards, and it seems a grim sort of irony that such an outlook should be reserved for the opthalmic, who are better in the dark. The position of the matron in this hospital seems for various reasons difficult to define, and is, I think, one of peculiar difficulty. The former matron seemed to have little to do with the nursing staff, and did not appear to have a friendly acquaintance with the patients. I hope the new matron's duties will be carefully determined in relation to those of the house surgeon and steward respectively.

AKAROA HOSPITAL.

Number of pa Admitted dur			[arch, 1897 	• • • • • • • • • • • • • • • • • • • •	•••	•••	$\begin{array}{c} 1 \\ 35 \end{array}$	
	Tota	l under ti	eatment		•••	•••		36
Discharged		•••	• • •	• • • •	•••	•••	34	
Died	• • •	•••	•••	•••	•••	• • •	2	
Remaining or	31st N	Tarch, 189	98				_	

Sex.—26 males, 10 females.

Locality from which Patients came.—Akaroa County.

Country.—New Zealand, 14; England, 4; Scotland, 2; Ireland, 6; France, 2; Denmark, 2;

Italy, 3; China, 3.

Religion.—Church of England, 18; Presbyterian, 5; Roman Catholic, 11; Lutheran, 2.

Total collective days' stay in hospital, 574; individual average days' stay, 16. Daily average cost per head, 11s. 7d.; less patients' payments, 10s.

REVENUE AND EXPENDITURE.

	R	evenue.		£	s.	d.	Expen	diture.	£	s.	d.
From Gover	${f nment}$	•••		143	15	3			 112	6	4
Derived fro							Wines, spirits, ale, and		 3	7	6
Hospital .		which it	is a				Surgery and dispensary	•••	 27	8	0
branch ho	spital		• • •	143				•••	 25	15	9
Patients' pa	yments	***		44	12	0	Salaries and wages		 150	0	0
							Other expenses		 13	4	11
: 1							<u></u>				
,	Total		• • •	£332	2	6	Total	•••	 £332	2	6
]					

I inspected this hospital on the 22nd March, 1898. There happened to be no patients on that date. Everything was in good order. The matron, Mrs. Penrose, is capable and careful, and Dr. Hargraves is very attentive.

COROMANDEL HOSPITAL.

Number of pa Admitted dur			•••		 7 96	
	Total	under tre	atment		•••	 103
$\begin{array}{cc} {\rm Discharged} \\ {\rm Died} & \dots \end{array}$		•••		•••	•••	 86 10
Remaining on	 31st M				•••	 7

Sex.—96 males, 7 females.

Localities from which Patients came.—Coromandel, 22; Auckland, 4; Waikato, 5; Opitonui, 2; Australia, 6; Napier, 3; Hawke's Bay, 3; Cabbage Bay, 2; Whangapoua, 5; Kennedy's Bay, 5; Otago, 8; other places, 28.

Nationality.—English, 16; Irish, 17; Scotch, 9; New Zealand, 42; Australian, 5; other

Total collective days' stay in hospital, 2,767; individual average days' stay, 26·86. Daily average cost per head, 8s. $6\frac{3}{4}$ d.; less patients' payments, 7s. 10d.

Outdoor Patients.—Individual cases, 120; attendances, 443.

REVENUE AND EXPENDITURE.

THE VENUE AND EXTENDITURE.										
Revenue.	***	£	s.	d.		Expenditure	3.	£	s.	d.
From Government	•••	903	0	11	Rations	•••		241	17	11
Local bodies		400	0	0	Wines, &c			20	11	0
Subscriptions and donations		413		10		ısary	• • •	66	-	10
Patients' payments		100	18.	9	Fuel and light		• • •	50	19	11
Other sources		0	15	0	Bedding and cloth	$\operatorname{ing} \ldots$		14	1	3
Balance from last year		494	18	1	Washing and laun			23	1	10
					Salaries and wages	3		461	8	0
					Repairs			13	17	8
					Printing, advertisi	ng, postage	, and			
					stationery	•••		4	18	4
					Insurance			2	14	3
					Other expenses	•••		285	11	10
	_				_					
${f Total} \qquad \dots$	£2	312	16	7	Total	•••		£1,185	2	10
							•			

Inspected 14th February, 1898. The arrangements for management and nursing are greatly improved since my last visit. There is now a resident caretaker and an assistant night attendant. There were nine patients resident, five of whom were chronic cases. I inquired into the circumstances under which the property of a deceased patient's effects were dealt with by the caretaker, and could find no satisfactory proof that the goods had been sent to the father, who complained that he never received them. I think the Board are bound to take some action in this case for their own reputations' sake. At any rate, they ought to insist on proof that the goods were sent.

A new hospital is now being built on a suitable site. I made a suggestion which seems to have roused the opposition of the Board—viz., that it was more important that the wards should

face the sun than that the building should look well from the road.

CROMWELL HOSPITAL.

Number of pa			ch, 1897	•••	•••	•••	3	
Admitted duri	ng the y	rear	•••	•••	•••	•••	50	
	Total	under treat	ment					53
Discharged	•••		•••	•••		•••	47	
Died	•••	•••	•••	•••	•••	•••	4	
Remaining on	31st M	arch, 1898	•••		•••	•	_	2

Sex.-47 males, 6 females.

Localities from which Patients came.—Bannockburn, 15; Cromwell, 7; Lowburn, 2; Hawea, 4; Mount Pisa, 2; Pembroke, &c., 5; Bendigo, 3; Kawarau, 6; Clyde, 2; Tarras, 3; Dunedin, 1; Nevis, 2; Luggate, 1.

Country.—England, 16; Scotland, 11; Ireland, 3; New Zealand, 16; China, 1; America, 1;

Tasmania, 1; Norway, 2; India, 1; Germany, 1.

Religion.—Roman Catholic, 4; Confucian, 1; Protestant, 47; Mahometan, 1.

Total collective days' stay in hospital, 1,331; individual average days' stay, 25·11. Daily average cost per head, 10s. 3\frac{1}{4}d.; less patients' payments, 9s. 2\frac{3}{4}d.

Outdoor Patients.—Individual cases, 31; attendances, 55.

REVENUE AND EXPENDITURE.

					711			_
Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government		369	9	5	Rations	101	12	7
Local bodies		270	2	3	Wines, spirits, ale, &c	9	0	0
Subscriptions and donations		83	15	6	Surgery and dispensary	44	5	4
Patients' payments		- 69	6	5	Fuel and light	26	7	6
Other sources		13	0	6	Bedding, clothing, furniture, and			
					earthenware	. 26	17	3
					Salaries and wages	387	1	4
					Water-supply	25	$\bar{0}$	õ
					Funerals	4	18	Ŏ
					Repairs		13	3
					Printing, advertising, postage, and	ū		•
					stationery	14	6	9
					Interest	0		ŏ
					Ingurance	8	$\overline{12}$	6
					Commission	4	10	9
						_		-
					Other expenses	21	7	10
m 1		0005		_	m .			
Total	•••	£805	14	1	Total	£684	10	1

Inspected 10th March, 1898. This institution is one of the most comfortable cottage-hospitals in the colony. It is well looked after by the committee, and the caretakers are capable and trust-

DUNEDIN HOSPITAL.

Number of p	patie	nts on 31st	March,	1897	•••		83	
Admitted du	ırıng	tne year	•••		•••	•••	1,054	
	-	Total under	treatme	nt				1,137
Discharged				•••		• • • •	932	
Died		•••		•••			106	
Remaining of	on 31	1st March, 1	898					99

Sex.—693 males, 444 females.

Localities from which Patients came.—Dunedin and suburbs, 696; Allanton, 5; Burnside, 5; Brighton, 5; Christchurch, 4; Clinton, 9; Clutha, 12; Catlin's, 8; Clyde, 2; Green Island, 9; Gore, 6; Hyde, 5; Hindon, 6; Inchclutha, 3; Kaitangata, 12; Lawrence, 5; Milton, 14; Mosgiel, 22; Middlemarch, 4; Maungatua, 4; Outram, 7; Port Chalmers, 22; Palmerston, 9; Peninsula, 12; Roxburgh, 6; Rayensbourne, 13; Seacliff, 9; East Taieri, 9; Waikouaiti, 15; Waitati, 9;

shipping, 22; others, 168.

Country.—New Zealand, 484; Scotland, 198; England, 197; Ireland, 127; Victoria, 30; New South Wales, 9; South Australia, 5; Tasmania, 5; Canada, 4; China, 21; Jersey, 5; Shetland, 5; Norway, 4; Sweden, 7; Germany, 7; United States, 4; France, 3; East Indies, 2; Denmark, 3; Fisher 19; Province of the control of the control

2; Finland, 2; Russia, 2; others, 14.

Religion.—Presbyterian, 408; Church of England, 318; Roman Catholic, 207; Baptist, 44; Confucian, 21; Congregationalist, 14; Church of Christ, 18; Church Brethren, 5; Freethinker, 1; Greek Church, 1; Jewish, 6; Lutheran, 13; Methodist, 5; Mahometan, 1; Primitive Methodist, 5; Plymouth Brethren, 5; Salvationist, 10; Wesleyan, 46; Society of Friends, 1; Latter-day Saints, 1; no religion, 7.

Total collective days' stay in hospital, 36,688; individual average days' stay, 32.26. Daily average cost per head, 3s. 11\frac{1}{4}d.; less patients' payments, 3s. 4\frac{1}{4}d.

Outdoor Patients.—Individual cases, 1,918; attendances, 6,943.

REVENUE AND EXPENDITURE

Revenue.	£	s.	d.	Expenditure.	£	s.	d.
From Government	 2,972	11	8	Rations	1,866	18	2
Local bodies	 2,700	0	0	Wines, spirits, ale, &c	150	14	6
Subscriptions and donations	 216	9	2	Surgery and dispensary	888	2	6
Patients' payments	 1,168	14	8	Fuel and light	784	6	7
Other sources	 321	16	6	Bedding and clothing	59	1	6
Balance from last year	 81	3	7	Furniture, earthenware, &c	285	3	9
				Salaries and wages	2,307	14	9
				Water-supply	105	1	0
				Funerals	6	15	0
			İ	Repairs	305	14	10
				Printing, advertising, postage, and			
			ĺ	stationery	66	1	2
				Interest	1	0	6
				Insurance	24	4	0
			ļ	Commission	11	2	6
				Honorary medical staff	110	5	3
				Other expenses	256	4	4
${\bf Total} $	 £7,460	15	7	$\operatorname{Total} \dots \dots$	£7,228	10	4
							_

Mrs. Neill and myself have made several visits to this hospital during the year. The management is good, the Trustees keenly interested in all that concerns the welfare of the patients and the staff, Mr. Burns is an excellent steward, the nursing staff is efficient, while the medical and surgical work is kept up to date by the stimulating influence of the Medical School. The Nurses' Home is a building admirably designed for comfort and stability. The one drawback to this hospital is that it never as a whole can be anything but an unsystematic collection of incongruous and experimental excrescences from an administrative centre designed originally for a radically different purpose. The money that has been spent here since the Commission of 1890 would have

gone far towards providing a modern hospital on a healthy site.

The new operating theatre is an up-to-date feature of this hospital, and the most perfect of its kind in New Zealand. A new kitchen is being built to replace the former unsatisfactory quarters allotted to the culinary department, and the foundations of a new children's ward cover a portion of the space between the Nurses' Home and the main building.

DUNSTAN HOSPITAL.

Number of p Admitted du	atients or ring the	on 31st M year	[arch, 1897 	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	$\begin{array}{c} 3 \\ 45 \end{array}$	
	Total u	ınder trea	tment					48
Discharged Died	•••		•••	•••	•••	•••	$\frac{42}{4}$	
Remaining o	n 31st M	Iarch, 18	98					2

H.-22.

Sex.—40 males, 8 females.

Localities from which Patients came.—Clyde, 13; Alexandra, 11; Matakanui, 1; Baldhill Flat, 2; Ida Valley, 1; Earnscleugh, 2; Black's, 6; Cambrian's, 1; Hawea Flat, 1; Kawarau, 1; Nelson, 1; Nevis, 1; Roxburgh, 1; Waikerikeri, 3; Blackman's, 1; Queenstown, 1; Drybread, 1.

Country.—England, 13; Ireland, 12; Scotland, 2; New Zealand, 14; Australia, 1; Tasmania, 2; China, 3; Orkney Islands, 1.

Religion.—Church of England, 23; Roman Catholic, 12; Presbyterian, 9; Confucian, 3;

Lutheran, 1.

Total collective days' stay in hospital, 1,750; individual average days' stay, 36·46. Daily average cost per head, 9s. 8\frac{3}{4}d.; less patients' payments, 8s. 9d.

Outdoor Patients.—36; attendances, 54.

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		REVENUE	AND	EXPENDITURE.

	 4 1 13110			EMI DIOILE.				
Revenue.	£	s.	d.	Expenditure.		£	s.	d.
From Government	 346	1	6	Rations		120	6	8
Local bodies	 270	2	8	Wines, spirits, ale, &c		9	1	6
Subscriptions and donations	 153	17	5	Surgery and dispensary		18	0	11
Patients' payments	 85	3	8	Fuel and light		34	12	5
Balance from last year	 4	10	0	Bedding and clothing		13	1	0
· ·				Furniture and earthenware	• • •	91	6	6
				Salaries and wages		399	7	6
				Water-supply	•••	39	9	.0
				$\mathbf{Funerals} \qquad \dots \qquad \dots$	• • •	13	10	0
				Printing, advertising, postage,	and			
				stationery		24	8	0
				Interest		0	4	0
•				Insurance	•	9	10	6
				Commission		26	18	5
				Other expenses		51	9	0
${\bf Total} \qquad \dots$	 £859	15	3	Total	• • • •	£851	5	5

Inspected 10th March, 1898. Notwithstanding the recent addition of an excellent new ward solidly built of stone, I was disappointed with this hospital. Mrs. Wilson had everything very clean, but her husband did not seem to me to be a suitable man for his position. The doctor is allowed by the Trustees to manage the hospital vicariously while he devotes his mind to other pursuits. The patients, I am bound to say, made no complaints, and they appear, when Dr. Hyde is otherwise occupied, to be well looked after by Dr. Gregg, of Alexandra, who attends to the hospital as a sort of supplementary medical officer.

GISBORNE HOSPITAL.

	eatients on 31st Mar ring the year	•••		$ \begin{array}{cc} \dots & 13 \\ \dots & 158 \end{array} $	
Discharged Died	Total under treatm	nent 		 	137
	n 31st March, 1898	•••	•••	•••	26

Sex.—127 males, 44 females.

Localities from which Patients came. —Cook and Waiapu Counties, and Borough of Gisborne.

Nationality.—British, 154; foreign, 17.

Total collective days' stay in hospital, 4,970; individual average days' stay, 29.06. Daily average cost per head, 4s. $2\frac{1}{2}$ d.; less patients' payments, 3s. $6\frac{1}{4}$ d.

REVENUE AND EXPENDITURE.

Revenue.	£	s.	d.	Expenditure.	£	s.	d.
From Government	 522	9	11	Rations	183	17	2
Local bodies	 320	0	0	Wines, spirits, ale, &c	15	12	0
Subscriptions and donations	 122	2	8	Surgery and dispensary	39	11	8
Rents	 25	0	0	Fuel and light	94	6	8
Patients' payments	 169	2	0	Bedding and clothing	31	1	3
Interest	 32	0	0	Furniture and earthenware	17	2	9
Balance from last year	 59	19	11	Salaries and wages	543	13	4
· · · · · · · · · · · · · · · · · · ·				Repairs	57	6	0
				Printing, advertising, postage, and			
				stationery	10	19	2
				Interest	0	3	3
				Insurance	18	14	9
				Sanitation	18	17	0
				Other expenses	15	10	2
Total	 £1,250	14	6	Total :	£1,046	15	2
				and the second of the second o			_

This hospital contained nine patients on the date of my visit, 13th July, 1897. Owing to the time of the steamer's arrival, I had to make my inspection very early in the morning. I found the night nurse on duty carefully attending to her work. Everything was in most gratifying order. The patients were very comfortable, and evidently well attended to.

GREY RIVER HOSPITAL.

Number of p Admitted du			March, 18 	97 	•••		$\begin{array}{c} 52 \\ 152 \end{array}$	
TO: 1 1	Total	under tre	eatment				_	204
$\operatorname{Discharged}$. • • •	• • •	• • •		• • •	126	
Died	•••	•••	•••	•••	•••	•••	26	
Remaining o	n 31st	March, 1	898		• • •			52

Sex.-180 males, 24 females.

Sex.—180 males, 24 females.

Localities from which Patients came. — Grey Hospital District, 192; Christchurch, 1; Wellington, 1; Jackson, 6; Nelson, 1; Otira, 2; shipping, 1.

Nationality.—British, 175; French, 1; German, 1; Spanish, 2; Danish, 3; Chinese, 10; Norwegian, 1; Swedish, 5; American, 1; West Indian, 2; Italian, 1; Finn, 1; Maltese, 1.

Religion.—Church of England, 65; Roman Catholic, 84; Lutheran, 8; Confucian, 10; Wesleyan, 30; Quaker, 1; Freethinker, 6.

Total collective days' stay in hospital, 18,023; individual average days' stay, 88·34. Daily average cost per head, 2s. 9d.; less patients' payments, 2s. 7½d.

Outdoor Patients.—Individual cases, 150; attendances, 231.

REVENUE AND EXPENDITURE.

70				7	T 11	•		,
Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government		1,769	3	10	Rations	745	2	2^{-}
Local bodies		650	0	0	Wines, spirits, ale, &c	80	3	8
Subscriptions and donations		932	0	2	Surgery and dispensary	75	8	0
Patients' payments		105	6	1	Fuel and light	151	19	6
Other sources		2	0	0	Bedding and clothing	102	2	2
					Furniture and earthenware	49	10	9
					Washing and laundry	93	0	0
					Salaries and wages	793	1	4
					Water-supply	6	15	0
					Funerals	40	10	0
					Repairs	181	3	10
					Printing, advertising, postage, and			
					stationery	67	13	10
					Interest	9	17	9
					Insurance	- 30	0	0
					Other expenses	60	7	3
Total	•••	£3,458	10	1	Total	£2,486	15	3
				<u> </u>				

Inspected 19th January, 1898. On the date of my visit this institution contained fifty male patients and two females, both chronics. Three-fourths of the total were refuge cases. Dr. Matthews is acting as locum tenens for Dr. C. Morice, with the benefit of Dr. Morice's (sen.) advice and assistance. It goes without saying, therefore, that the patients are well cared for in every respect. It did not, however, seem to me that the head nurse took her proper position as the head of the nursing staff. A very much-needed supply of surgical instruments has been ordered, at a cost of £60. Three-fourths of the patients are chronic cases. A serious effort ought to be readed to convert the existing building into an old man's home for the whole district from Ross to made to convert the existing building into an old men's home for the whole district from Ross to Reefton. A new hospital ought to be built for hospital cases proper. The abortive attempt to build an old men's home at Hokitika has served only to complicate the difficulties surrounding the problem of dealing rationally with the aged poor on this coast. It is now more hopeless to effect any satisfactory solution than it was some years ago, when I recommended a new refuge on a piece of suitable land somewhere in the Grey Valley. The line of least resistance now would probably be the suggested conversion of the Greymouth Hospital.

HAWERA HOSPITAL.

Number of pa Admitted dur			arch, 1897		•••	•••	4 53	
	Tota	l under tr	eatment		•••			57
Discharged		•••	•••		•••		48	
Died	•••	•••		• • •	• • • •		6	
910					9 4 9			
Remaining or	31st M	[arch, 189	98					3

Sex.—42 males, 15 females.

Localities from which Patients came.—Hawera, 46; Stratford, 4; Wellington, 1; Gisborne, 3; Nelson, 1; Taranaki County, 2.

Country.—England, 11; Scotland, 4; Ireland, 10; New Zealand, 28; Germany, 2; America, 1; Switzerland, 1.

Religion.—No record.

Total collective days' stay in hospital, 1,374; individual average days' stay, 24·10. Daily average cost per head, 12s. 8d.; less patients' payments, 10s. 10d.

Outdoor Patients .- No record.

REVENUE AND EXPENDITURE.

		,	,,			
	Revenue.		£	s.	d.	Expenditure. £ s. d.
From Government			372	4	6	Rations 156 6 4
Local bodies			372	4	6	Surgery and dispensary 79 2 0
Patients' payments			127	5	2	Fuel and light 45 13 6
						Bedding and clothing 23 13 11
						Furniture and earthenware 16 12 2
						Washing and laundry 11 10 0
						Salaries and wages 373 16 10
						Repairs and additions 80 9 1
						Printing, advertising, postage, and
						stationery 58 15 11
						Interest 17 17 5
						Insurance 7 17 0
Total			£871	14	2	Total £871 14 2

Inspected 17th April, 1898. A good deal of discussion has taken place in the district over the question as to whether this institution is not unnecessarily expensive. It is characteristic of local government in New Zealand to encourage all sorts of extravagant demands for public conveniences of all kinds when they could quite well do without them. The New Plymouth Hospital and the Wanganui Hospital furnish ample accommodation for this whole coast. Some years ago I urged this view on the Chairman and Secretary of the New Plymouth Board, in whose district Hawera is; but I might as well have talked to the south-west wind. The Hawera people would have a hospital, and now the local bodies grumble at its cost. It is now too late to do so. It must be kept in a state of efficiency, and after careful consideration I do not see how they can reduce the staff unless they shut it up altogether. Stratford and Hunterville are beginning to agitate for hospitals as well, and where this movement is going to stop I cannot see. It would seem that wherever an enterprising doctor settles a State subsidy must be got for him by means of a hospital. The Hawera Hospital is well managed, and good medical and surgical work is being done there. Unless a water-supply and drainage system is provided soon for Hawera, the hospital, if I am not mistaken, will have plenty to do without waiting very long.

HOKITIKA HOSPITAL.

Number of pa Admitted dur			larch, 1897		•••	•••	$\begin{array}{c} 37 \\ 163 \end{array}$	
	Total	under t	reatment	•••	****	,,,,	2	00
Discharged		•••					138	
Died	•••	•••	•••		,	****	28	
Remaining on	31st Ma	arch, 189	98					34 -

Sex.—148 males, 52 females.

Locality from which Patients came.—Westland.

Country.—England, 37; Scotland, 22; Ireland, 43; Germany, 11; Italy, 5; New Zealand and Australia, 63; China, 2; Austria, 6; Switzerland, 4; Denmark, 2; Sweden, 4; France, 1.

Religion.—Church of England, 64; Presbyterian, 50; Roman Catholic, 58; Lutheran, 10; Salvationist, 4; Wesleyan, 5; Baptist, 5; Freethinker, 4.

Total collective days' stay in hospital, 12,055; individual average days' stay, 60·27. Daily average cost per head, 3s. 9d.; less patients' payments, 3s. 7d.

Outdoor Patients.—Individual cases, 370; attendances, 937.

3—H. 22.

REVENUE AND EXPENDITURE.

Revenue.	£	s.	d.	Expenditure	e.	£	s.	d.
From Government	 1,155	7	4	Rations		645	12	4
Local bodies	 687	10	0	Wines, spirits, ale, &c		5 8	15	10
Subscriptions and donations	 372	1	1	Surgery and dispensary		200	5	. 2
Bequest	 35	0	0	Fuel and light		- 98	2	8
Patients' payments	 68	15	0	Bedding and clothing		57	7	7
Other sources	 36	13	0	Furniture and earthenware		25	12	9
Balance from last year	 10	19	9	Salaries and wages		755	15	0
· ·				Funerals		7	15	6
				Repairs		172	12	7
				Printing, advertising, postage,	and			
				stationery		49	8	10
•				Interest	• • •	0	2	0
				Insurance		24	4	0
				Commission	• • •	16	0	6
				Other expenses	• • •	126	19	11
			—					_
Total	 £2,366	6	2	Total		£2,238	14	8

The advent of Dr. Teichelman has given a great impulse to this institution. The nursing has also been thoroughly modernised, and on the whole the state of affairs is very satisfactory.

I would suggest, however, that, being so far from town, it is not desirable that the dispenser and the matron should be absent from the hospital at the same time. Owing to suspicious erysipelatous symptoms found on some wounds as soon as the first dressing was removed it was necessary to thoroughly clean and paint the wards. This has been done, and the result is a great improvement. The old battered bath and lavatory appliances attached to the medical ward are to be replaced as soon as possible.

The difficulty about the Old Men's Home, which is built quite close to the hospital, continues insoluble, and will remain so until the Benevolent Society take steps to make it possible for the Hospital Trustees to undertake the management under proper financial arrangements. I was present at a meeting of the Benevolent Society Trustees, and from the spirit they manifested I am hopeful that a modus vivendi will be found.

INVERCARGILL HOSPITAL.

Number of pa Admitted dur	atients ing the	on 31st Ma year	rch, 1897	7 	•••		$\begin{array}{c} 23 \\ 352 \end{array}$	
	Tota	l under tre	atment	•••	•••	,		375
Discharged							333	
Died	•••	•••	•••	• • • •		•••	28	
Remaining or	1 31st N	Iarch, 1898	3					14

Sex.—249 males, 126 females.

Localities from which Patients came.—Southland County, Wallace County, Lake County.

Country.—England, 75; Scotland, 63; Ireland, 55; New Zealand, 137; Tasmania, 5; Germany, 5; Victoria, 14; China, 4; India, 2; Denmark, 1; Wales, 1; West Indies, 1; Austria, 1; Holland, 3; Finland, 2; Italy, 1; Jersey, 2; Canada, 1; New South Wales, 1; Egypt, 1.

Religion.—Church of England, 132; Roman Catholic, 64; Presbyterian, 132; Wesleyan, 8; Salvationist, 9; Lutheran, 1; Baptist, 4; Confucian, 4; Plymouth Brethren, 5; Methodist, 6; Christian Disciples, 4; Congregationalist, 2; Evangelist, 1; Swedenborgian, 1; Unitarian, 1; no religion, 1.

Total collective days' stay in hospital 10,598; individual average days' stay, 28·26. Daily average cost per head, 5s. $11\frac{3}{4}$ d.; less patients' payments, 5s. 9d.

Outdoor Patients.—Individual cases, 933; attendances, 2,037.

REVENUE AND EXPENDITURE.

	Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government			1,513	17	5	Rationa	749	18	2
Local bodies			1,482	13	0	Wines, spirits, ale, &c	62	9	6
Subscriptions and d	onations		13		1		321		_
Patients' payments			128	9	2		261	12	10
Other sources			176	14	0	0 '	85	0	0
							124	16	1
						<i>y</i>	84	2	6
							1,010	19	9
						Water-supply	2	6	0
			•			Funerals	25	12	0
						Repairs	219	1	6
							55	0	0
					ļ	Printing, advertising, postage, an	$_{ m d}$		
					- 1	stationery	63	0	0
					ĺ	Interest	9	15	6
					ļ		14	4	6
						Other expenses	84	7	11
Total			69 914	15	_	Maka1	69 179	c	_
Total	•••	•••	£3,314	10	8	Total	£3,173	6	9
					-				

I inspected this hospital on the 4th March. I was pleased to find that at last the old wards on the male side had been pulled down. The new wing is well designed, and when it is finished this institution will be abreast of modern requirements. All the available ward space was occupied, and the usual work of the hospital was being carried on satisfactorily. I found the nursing staff in a state of turnoil, but after reconnoitring the position I thought it best to reserve the matter for Mrs. Neill's consideration. The matters at issue were such as to require a woman's touch to insure a correct diagnosis. Mrs. Neill made a special visit, and has written a special report for the Board, containing suggestions which seemed to me likely to meet the difficulty. I have come to the conclusion that there is a centre of disturbance in this institution, and I recommend the Board to watch it narrowly; and, having once ascertained the facts precisely, they should act with vigour.

KUMARA HOSPITAL.

Number of particle Admitted dur			Iarch, 18 		•••		9 80	
		J						
	Tota	l under ti	reatment					89
${f Discharged}$	• • •	• • •		• • • •	• • • •		68	
$\operatorname{Died} \ldots$			• • •		***	••••	5	
Remaining or	31st M	Iarch, 18	98		. •••			16

Sex.--71 males, 18 females.

Localities from which Patients came.—Kumara, 40; Dillman's, 22; Greenstone, 7; Callaghan's, 5; Stafford, 3; Cape Terrace, 5; Jackson, 5; Christchurch Road, 2.

Nationality.—English, 22; Irish, 18; Scotch, 13; New Zealand, 21; Welsh, 1; Chinese, 2; German, 5; Italian, 1; Swiss, 1; Swedish, 1; Australian, 3; Belgian, 1.

Religion.—Church of England, 28; Roman Catholic, 33; Presbyterian, 19; Wesleyan, 4; Confucian, 2; Lutheran, 3.

Total collective developments beginted at 200; individual control of the collection
Total collective days' stay in hospital, 4,909; individual average days' stay, 55·15. Daily average cost per head, 3s. $6\frac{3}{4}$ d.; less patients' payments, 3s. $1\frac{3}{4}$ d.

Outdoor Patients.—Individual cases, 110; attendances, 227.

REVENUE AND EXPENDITURE.

Revenue.		£	s.	d.	Expenditure. £ s. d.
From Government		464	4	10	Rations 239 3 3
Local bodies		266	5	1	Wines, spirits, ale, &c 10 13 0
Subscriptions and donations		169	19	6	Surgery and dispensary 89 9 3
Patients' payments		102	11	0	Fuel and light 67 19 9
*					Bedding, clothing, furniture, &c 53 2 11
					Salaries and wages 333 14 6
					Funerals 10 0 0
			٠		Repairs 43 6 0
					Printing, advertising, postage, and
					stationery 12 16 0
					Interest 6 12 6
					Insurance 6 9 0
Total	• • •	£1,003	0	5	Total £873 6 2
		200		₩,	

The medical and nursing arrangements at this institution are thoroughly satisfactory. Great interest is taken by the public in its welfare. Indeed, I am inclined to think the committee, if anything, err on the side of over-solicitude.

The garden is in its usual creditable condition.

T.A	W	$\mathbf{R}\mathbf{R}\mathbf{N}$	ACE:	HO	SPIT	٦AT

Number of pa Admitted dur				• • •		9 106		
	Tota	l under tr	eatment	•••				115
Discharged Died	• • • • •	•••	•••		•••	•••	100 9	•
Remaining or	1 31st M	farch, 189	98	•••	•			6

Sex.—77 males, 38 females.

Locality from which Patients came.—Tuapeka County.

Country.—New Zealand, 50; England, 15; Scotland, 19; Ireland, 23; China, 3; Victoria, 1; Italy, 1; Canada, 1; America, 1; Norway, 1.

Religion.—No record.

Total collective days' stay in hospital, 3,385; individual average days' stay, 29.43. Daily average cost per head, 5s. 1\frac{1}{4}d.; less patients' payments, 4s. 5d. Outdoor Patients.—Individual cases, 60.

REVENUE AND EXPENDITURE.

Rev	enue.		£	s.	d.	Expenditure.		£	s.	d.	
From Government	•••		260	8	6	Rations		275	17	5	
Local bodies			520	5	0	Wines, spirits, ale, &c		3	9	0	
Subscriptions and dona	$_{ m tions}$		70	2	0	Surgery and dispensary		47	7	7	
Rents		•••	1	11	3	Fuel and light		60	18	9	
Patients' payments			120	12	0	Bedding and clothing		15	11	5	
Other sources	•••		12	5	6	Salaries and wages		376	18	5	
Balance from last year	• • •		149	15	2	Water-supply		10	0	0	
						Repairs	•••	14	0	0	
						Printing, advertising, postage,	and				
						stationery		5	16	0	
						Insurance		3	4	0	
						Interest		0	2	6	
						Other expenses		57	3	5	
Total	•••	$\mathfrak{L}1$,134	19	5	${\bf Total} \qquad \dots$,•••	£870	8	6	
	•	==			_						

This hospital is progressing under the superintendence of Dr. Inspected 4th April, 1898. Newell. Several improvements have been made; notably, asphalting of the courtyard and a more satisfactory water-supply. The patients' comfort seems well looked after by matron and wardsman, and the order and cleanliness throughout were most excellent. The hospital is well supplied with fresh vegetables and fruit from its own garden.

MASTERTON HOSPITAL.

Number of pa			arch, 1897	•••	•••		7	
Admitted dur	ing the	year	•••	•••	• • •	•••	81	
	Tota	l under ti	eatment	•••			8	18
Discharged	• • •	•••	•••				74	
Died	•••	• • •	•••	• •	•••		8	
Remaining on	31st N	Iarch, 189	98					6

Sex.—55 males, 33 females.

Localities from which Patients came.—Masterton, 49; Pahiatua, 3; Eketahuna, 7; Mauriceville, 1; Tenui, 7; Taueru, 1; Carterton, 1; Brancepeth, 6; Mangamahoe, 3; Wellington, 2; Bideford, 2; Mangatainoka, 2; Tupurupuru, 1; East Coast, 1; Mangahao, 1; Dreyerton, 1.

Country.—England, 27; Ireland, 7; New Zealand, 36; Scotland, 4; New South Wales, 1; Victoria, 1; Germany, 2; China, 1; Denmark, 2; France, 1; Tasmania, 1; South Africa, 1; Belgium, 1; Jersey, 1; India, 1; Sweden, 1.

Religion.—Church of England, 37; Roman Catholia, 14; Prochytosian, 21; Westerne, 2

Religion.—Church of England, 37; Roman Catholic, 14; Presbyterian, 21; Wesleyan, 8; Salvation Army, 5; Lutheran, 1; heathen, 1; no religion, 2.

Total collective days' stay in hospital, 2,464; individual average days' stay, 28. Daily average cost per head, 7s. 4\frac{1}{4}d.; less patients' payments, 6s. 8\frac{1}{4}d.

experience of the second		$R_{\rm E}$	VENU:	E A	ND	EXPENDITURE.					
	Revenue.		£	s.	d.	Expe	enditure.		£	s.	d.
From Government			403	9	9	Rations	•••	•••	197	10	7
Subscriptions and d	onations		222	1	10	Wines, spirits, ale, &c.		• • •	6	2	3
Patients' payments	•••	• • • •	80	6	7	Surgery and dispensar	y			10	5
Other sources	•••	• • •	26	0	0	Fuel and light	• • •		40	12	6
						Bedding and clothing	•••	• • • •	57.		6
						Furniture and earthen	vare	• • •	50		2
						Washing and laundry	•••	• • • • •		10	0
						Salaries and wages	•••	• • • •	288		8
					İ	Water-supply	***	•••		15	0
,						Funerals	•••	٠.,	3	0	0
						Repairs	•••	• • •	31		6
					Í	Additions			45	0	0
						Printing, advertising,	postage,	and	. 4 -		^
						stationery	•••	•••	15	3	0
						Interest	•••	•••	9	16	3
						Insurance	••••	•••		10	0
					ļ	Commission	•••	•••	25	3	4
						Other expenses	•••		31	14	. 0
Total	•••		£731	18	2	Total			£950	15	2
									=		

I was pleased to find an efficient staff of nurses established here since my last visit. The nursing proper was good. The matron, Miss Heath, whom I had favourably known at Wellington Hospital, was on night duty attending a serious case, so I did not disturb her. I had occasion, however, to write, calling her attention pointedly to certain oversights which I have no doubt will be at once remedied. The male assistant did not seem to me to be of much use. The grounds and the garden show a falling-off from their former condition.

NAPIER HOSPITAL.

Number of p	atients	on 31st I	March, 18	397	•••	•••	29	
Admitted du	ring the	year	•••	•••	•••	. •••	386	
	Tota	l under t	treatment	i	•••			415
Discharged			•••	•••	• • • •	• • • •	362	
Died	•••	•••	•••	•••	•••	•;•	24	
Remaining o	n 31st 1	March, 18	398	• • • •	•••	•••		29

Sex.—281 males, 134 females.

Sex.—281 males, 134 females.

Localities from which Patients came.—Hawke's Bay and adjoining districts.

Country.—England, 112; Scotland, 24; Ireland, 37; New Zealand, 215; Australia, 3; Tasmania, 1; Germany, 2; Norway, 4; America, 3; Denmark, 3; Sweden, 2; Canada, 2; India, 2; France, 2; Chili, 1; Guernsey, 1; Chatham Islands, 1.

Religion.—Church of England, 205; Roman Catholic, 96; Presbyterian, 65; Wesleyan, 28; Jewish, 1; Lutheran, 4; Salvation Army, 2; Methodist, 2; Adventist, 2; Congregationalist, 5; Plymouth Brethren, 1; Baptist, 3; Freethinker, 1.

Total collective days' stay in hospital, 9,482; individual average days' stay, 22.85. Daily average cost per head, 6s. 11½d.; less patients' payments, 5s. 11¾d.

Outdoor Patients.—Individual cases, 1,055.

REVENUE AND EXPENDITURE.

THE VEHICLE AND THAT EMPTICALE.										
	Revenue.		£	s.	d.	Expenditure.	£	s.	d.	
From Government			1,050	8	10	Rations	746	18	1	
Local bodies			675	0	0	Wines, spirits, ale, &c	19	1	0	
Subscriptions and d	$_{ m lonations}$		401	19	1	Surgery and dispensary	265	1	4	
Bequest	***		232	11	9		196	19	6	
Rents			50	8	6	Bedding and clothing, furniture, and	l			
Patients' payments			458	16	2	earthenware	267	6	1	
Other sources			3	2	9	Salaries and wages	1,192	14	9	
Balance from last y	ear		435	7	6	Water-supply	29	0	0	
·						Additions to buildings, and repairs	390	5	10	
						Printing, advertising, postage, and				
						stationery	47	5	4	
						Insurance	60	11	6	
	•					Commission	19	6	6	
						Other expenses	61	3	2	
	*									
Total	•••		£3,307	14	7	Total	£3,295	13	1	
						e transfer of the second of t			_	

This hospital is managed very carefully, and is in a thoroughly satisfactory condition, both as regards the medical and surgical work, and the nursing is admirable. In one respect, however, 1 am obliged to make a grave protest against the custom which the honorary staff, by connivance of the Board, have allowed to grow up. Private patients are charged £3 3s. per week, and over and above this the patient is allowed to pay his doctor for operations, &c., any sum they may agree on. But further than this, and even worse from my point of view, any doctor in the district can send a patient into a private ward, attend the patient himself, and charge what he likes. I wrote the Board pointing out the manifest evils of this practice, and I intend, unless it is put a stop to at once, to move the Government to stop the subsidy.

NASEBY HOSPITAL.

Number of pa			Iarch, 1897	•••	• • •	• • •	$\begin{array}{c} 7 \\ 167 \end{array}$	
Admitted dur	ang the	ear	•••	•••	•••	•••	107	
•	Total	under tı	eatment		•••		1	.74
Discharged	•••	•••	•••	•••	•••		152	
Died	****	•••	•••		• • •	• • • •	12	
Remaining or	n 31st Ma	arch. 189	98					10

Sex.—119 males, 55 females.

Localities from which Patients came.—Hyde, 9; Rough Ridge, 3; Wedderburn, 5; Naseby, 42; Limeburn, 1; Kyeburn, 14; St. Bathan's, 15; Hamilton's, 7; Ida Valley, 8; Gimmerburn, 9; Patearoa, 15; Blackstone Hill, 11; Eweburn, 15; Invercargill, 2; Ophir, 2; Kokonga, 7; Dunedin, 1; Waihemo, 1; Cambrian's, 1; Waipiata, 3; Vinegar Hill, 1; Alexandra, 1; Matakanui, 1.

Country.—England, 27; Scotland, 25; Ireland, 33; New Zealand, 74; China, 4; Victoria, 4; Tasmania, 2; Germany, 4; Malta, 1.

Religion.—Church of England, 60; Roman Catholic, 43; Presbyterian, 61; Confucian, 4; Salvationist, 4; Wasleyen, 2

Salvationist, 4; Wesleyan, 2.

Total collective days' stay in hospital, 3,135; individual average days' stay, 18. Daily average cost per head, 8s. 7³/₄d.; less patients' payments, 6s. 8d.

Outdoor Patients.—Individual cases, 34; attendances, 60.

REVENUE AND EXPENDITURE

·	TAT	NEW	JED E	TND	HAPENDITURE.				
Revenue	•	£	s.	đ.	Expend	iture.	£	s.	d.
From Government	•••	504	11	6	Rations		245	8	4
Local bodies		332	13	6	Wines, spirits, ale, &c		22	19	6
Subscriptions and donations		130	3	9	Surgery and dispensary		180	0	9
Patients' payments		313	5	4			56	11	2
Other sources		7	4	9	Bedding and clothing		36	10	5
Balance from last year		291	10	0	Furniture and earthenwar	e	23	2	10
·					Washing and laundry		3	5	0
				- 1	Salaries and wages		549	7	10
					Water-supply		8	0	0
					Funerals		4	12	6
					Repairs and additions		146	2	4
				l	Printing, advertising, pos	tage, and			
					stationery		20	3	10
				ļ	Interest	.;.	0	8	3
					Insurance		23	10	0
					Commission		14	-5	9
				ł	Other expenses	•••	-23	9	8
m				_	<u>_</u>	•			
Total	£1	,579	8	10	Total		$\mathfrak{L}1,357$	18	2
				_ '					_

Inspected 11th March, 1898. It is always a pleasure to visit this hospital. The doctor is all that I could wish, and his treatment of and kindness to his patients are universally appreciated in the district. The nursing by Mrs. and Miss King is admirably done. A beautiful new operatingroom has been provided, and several other improvements have been effected.

NELSON HOSPITAL.

Number of p Admitted dur	atients ring the	on 31st e year	March, 189	97	•••		$\begin{array}{c} 24 \\ 166 \end{array}$	
	Tot	al under	treatment			. • • •		190
Discharged			•••				147	
Died		•••	•••	•••	•••	•••	19	
Remaining or	n 31st 1	March. 1	.898		22.2			24

Sex.—116 males, 74 females.

Localities from which Patients came.—County of Waimea, 186; Buller, 2; Wanganui, 1; Greymouth, 1.

Greymouth, 1.

Country.—New Zealand, 89; England, 55; Scotland, 9; Ireland, 16; America, 1; Germany, 3; Russia, 1; Victoria, 3; Norway, 4; Austria, 2; France, 1; India, 2; Wales, 4.

Religion.—Church of England, 97; Roman Catholic, 25; Presbyterian, 15; Lutheran, 7; Wesleyan, 20; Baptist, 9; Plymouth Brethren, 3; Hebrew, 1; Adventist, 3; Methodist, 1; Church of Christ, 4; Unitarian, 1; no religion, 4.

Total collective days' stay in hospital, 9,958; individual average days' stay, 52·41. Daily average cost per head, 4s. 2d.; less patients' payments, 3s. 7½d.

Outdoor Patients.—Individual cases, 926; attendances, 3,241.

		F	REVENU	JE A	ND	Expenditure.
H	Revenue.		£	s.	d	Expenditure. £ s. d.
From Government			924	14	9	Rations 386 4 1
Local bodies			1,005	12	6	Wines, spirits, ale, &c 10 9 0
Subscriptions and dor				14	9	Surgery and dispensary 234 0 9
Rents			114	0	0	Fuel and light 152 5 11
Patients' payments			276		3	Furniture and earthenware 129 13 8
Other sources			28		6	Salaries and wages 987 13 10
Other sources					-	Water-supply 34 0 0
						Funerals 8 12 0
						Repairs 16 9 6
						Printing, advertising, postage, and
•						stationery 10 17 6
						Interest 7 4 10
						Insurance 25 0 0
						Other expenses 70 5 6
						1
Total			£2,361	3	9	Total £2,072 16 7
		=			-	

This hospital has been visited by Mrs. Neill and myself four times in course of the year, and on each occasion everything was going on satisfactorily. Dr. Talbot has proved himself a worthy successor to Dr. Boor, and that is high praise. The accommodation at this institution was provided originally on a very large scale—indeed, with the exception of Timaru, no district in the colony had such large ideas of the future they anticipated. The large and airy wards are well kept, but their size must involve a great amount of labour for the staff. The situation and surroundings are very beautiful.

NEW PLYMOUTH HOSPITAL.

Number of p Admitted du	atients ring the	on 31st I year	March, 18	97 		•••	$\begin{array}{c} 17 \\ 194 \end{array}$	
T. 1 1	Tota	al under	treatment		•••			211
Discharged	• • •	• • •	•••	• • •	•••	•••	172	
Died	•••	•••	• • •	•••	•••	• • •	21	
Remaining o	n 31st :	March, 1	898		•••			18

Sex.—154 males, 57 females.

Localities from which Patients came.—Taranaki County, 81; Hawera, 12; Stratford County, 52; New Plymouth, 53; Clifton County, 9; Wanganui, 1; Auckland, 1; Patea, 1; Wairarapa, 1.

Nationality.—English, 58; Scotch, 10; Irish, 25; Colonial, 109; German, 7; American, 2.

Religion.—No record kept.

Total collective days' stay in hospital, 7,812; individual average days' stay, 37.02. Daily average cost per head, 4s. $8\frac{1}{4}$ d.; less patients' payments, 3s. $5\frac{3}{4}$ d. Outdoor Patients.—No record kept.

		$\mathbf{R}_{\mathbf{I}}$	- EVENU	EΑ	.ND	EXPENDITURE.				
	Revenue.		£	s.	d.	Expenditure.		£	s.	d.
From Government	•••		666	4	7	Rations		268	18	11
Local bodies			630	7	0	Wines, spirits, ale, &c		58	.3	8
Subscriptions and d	onations		14	19	0	Surgery and dispensary		192	10	10
Rents			- 3	7	0	Fuel and light		160	3	0
Patients' payments		• • • •	475	8	9	Bedding and clothing		59	8	1
Other sources	•••	• • • •	40	0	0	Furniture and earthenware		61	17	3
						Washing and laundry		121	16	10
						Salaries and wages		663	8	10
						Water-supply	•••	10	0	0
						Repairs and additions		70	6	5
						Printing, advertising, postage, a	and			
						stationery	• • •	34	8	. 7
						Interest	•••	26	16	2
•						Insurance		19	4	0
						Other expenses	•••	83	3	9
Total	•••	<u>E</u>	1,830	6	4	Total	<u>£1</u> ,	830	6	4

Visited 15th December, 1897, and 16th April, 1898. This hospital is large and spacious in its accommodation, and involves a good deal of unnecessary labour to keep it clean. Dr. O'Carroll and Dr. Leatham work harmoniously as colleagues in charge of the medical and surgical work. Miss Fernandez, the matron, is absent on leave for six months, owing to ill-health. Her place is very satisfactorily filled by Miss Brown, who had a good training at Gisborne under one of the best matrons in New Zealand. I felt it my duty to bring the case of a convict patient under the notice of the Minister of Justice, and I have communicated with the Board regarding the matter.

A modification of the eight-hour system has been introduced into this hospital, largely at the instance of the Chairman, who has very advanced views on this question. For my part, I am of opinion that, whatever may be necessary in the larger hospitals of the colony, it is a mistake in the small centres to limit the nurses' day to eight hours; for it means that, though they are at times worked hard, yet for the larger part of the time they have little to do, and are simply in each

others' way.

OAMARU HOSPITAL.

Number of pa Admitted dur						$\begin{array}{c} 11 \\ 125 \end{array}$		
•	Tota	l under ti	eatment		•••			136
Discharged	•••	•••	•••	•••	•••	•••	105	
Died	•••	•••	• . •	•••	•••	•••	12	
Remaining or	31st 1	Iarch, 18	98	• • •				19

Sex.—96 males, 40 females.

Localities from which Patients came.—Oamaru and Waitaki County.

Country.—England, 33; Scotland, 19; Ireland, 25; New Zealand, 35; Australia, 9; Continent of Europe and America, 15.

Religion.—Church of England, 50; Roman Catholic, 36; Presbyterian, 38; Wesleyan and

others, 12.

Total collective days' stay in hospital, 3,617; individual average days' stay, 26.59. Daily average cost per head, 7s. 3d.; less patients' payments, 7s.

Outdoor Patients.—Individual cases, 148; attendances, 679.

REVENUE AND EXPENDITURE.

Revenue.		£	s.	d.	Expenditure.		£	s.	d.
From Government		87	16	10	Rations		249	5	4
Subscriptions and donations		80	8	- 8	Wines, spirits, ale, &c		35	8	0
Rents		915	14	6	Surgery and dispensary		92	1	8
Patients' payments		52	5	0	Fuel and light		68	7	7
Other sources		293	18	3	Bedding and clothing	`	51	19	3
Balance from last year		116	19	11	Furniture and earthenware		55	7	3
* *					Salaries and wages		538	7	6
					Funerals		26	11	0
					Repairs		149	18	4
•					Additions		276	12	11
					Printing, advertising, postage	, and			
					stationery		8	5	9
					Insurance		5	15	0
					Other expenses		33	2	7
	_					_			
$\operatorname{Total} \dots$	£1	1,547	3	2	${f Total} \dots$	£1	1,591	2	2
	-					-			

This is an admirably conducted hospital. The medical officer is capable and attentive. Mr. and Mrs. Desmond have everything in perfect order. I heard nothing but praise from the patients for the way they are treated.

PALMERSTON NORTH HOSPITAL.

Number of pa Admitted dur			•••	•••	•	21 191		
	Tota	l under tr	eatment	`	•••	•••		212
Discharged		•••					166	
Died	• • •	•••	•••	•••	•••	• • • •	22	
Remaining on	31st M	farch, 189	98					24

Sex.—147 males, 65 females.

Localities from which Patients came.—Palmerston North, 177; Masterton, 6; Wanganui, 7; Wellington, 5; Waipawa, 8; Dunedin, 1; Napier, 4; New Plymouth, 2; Patea, 1; Christ-

Nationality.—English, 57; Scotch, 16; Irish, 26; New Zealand, 80; Australian, 9; German, 7; Canadian, 1; Danish, 4; Swedish, 2; Norwegian, 5; Tasmanian, 2; Finn, 1; West Indian, 1; Arab, 1.

Religion.—Church of England, 89; Roman Catholic, 34; Presbyterian, 27; Wesleyan, 24; Lutheran, 9; Salvation Army, 6; Baptist, 4; Brethren, 11; Seventh Day Adventists, 1; Independent, 1; Unitarian, 1; no religion, 5.

Total collective days' stay in hospital, 8,236; individual average days' stay, 38.61. Daily average cost per head, 5s. 1d.; less patients' payments, 4s. 2½d.

Outdoor Patients.—None.

•	$\mathbf{R}\mathbf{r}$	EVENU	E A	ND	Expenditure.			
Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government		847	7	1	Rations	431	18	3
Local bodies		777	5	6	Wines, spirits, ale, &c	30	10	6
Subscriptions and donations	•••	65	7	8	Surgery and dispensary	221	14	6
Bequest		154	1	1	Fuel and light	159	11	6
Patients' payments		378	8	8	Bedding and clothing	39	19	1
Other sources		57	14	9	Furniture and earthenware	61	7	1
					Washing and laundry	38	0	0
					Salaries and wages	791	15	6
					Water-supply	28	6	1
					Funerals	9	10	0
			,		Repairs	39	16	8
					Additions to buildings	32	15	0
					Printing, advertising, postage, and			
					stationery	23	16	8
					Interest	11	-5	9
					Insurance	31	6	3
					Other expenses	151	6	1
					-			
Total	£2	,280	4	9	$egin{array}{cccccccccccccccccccccccccccccccccccc$	2,102	18	11
								-

Inspected 22nd December, 1897. Twenty-one patients on day of visit. There is always a comfortable homelike air about this hospital, combined with efficient nursing. The garden was in splendid condition, sweet and brilliant with summer flowers.

PATEA HOSPITAL.

Number of p Admitted du			7	•••		$\begin{array}{c} 1 \\ 39 \end{array}$	
	Tota	l under t	reatment	•••	•••		40
Discharged		•••	•••	• • •	•••		31
Died	•••	•••	• • •	•••	•••	•••	3
Remaining or		Iarch, 18	98	•••			- 6

Sex.—30 males, 10 females.

Locality from which Patients came.—Wanganui to Hurleyville.

Nationality.—English, 11; Irish, 8; New Zealand, 16; Scotch, 2; American, 1; Australian, 1; Chinese, 1.

Religion.—No record.

Total collective days' stay in hospital, 1,302; individual average days' stay, 32.55. Daily average cost per head, 6s. 113d.; less patients' payments, 5s. 10d.

avorage cost per nead,	00, 1144.	, 1000	L'ELLE	O LL U	, 100	9.220.200, 0.00, 2.000.			
		$\mathbf{R}_{\mathbf{I}}$	EVENU	JE A	AND	Expenditure.			
Re^{a}	venue.		£	s.	d.	Expenditure.	£	s.	d.
From Government			175	6	4	Rations	90	19	1
Local bodies			150	0	0	Wines, spirits, &c	6	8	6
Subscriptions and dona	tions		23	3	6	Surgery and dispensary	1	9	9
Rents			- 3	0	0	Fuel and light	23	0	6
Patients' payments		•••	74	17	0	Bedding and clothing	16	14	0
Other sources			2	3	1	Furniture and earthenware	14	14	1
Balance from last year			44	5	10	Washing and laundry	1	10	6
·						Salaries and wages	197	5	0
						Funerals	4	8	0
						Repairs	28	16	8
						Additions	45	15	6
						Printing, advertising, postage, and			
						stationery	12	19	7
					[Insurance	1	12	6
	•				1	Other expenses	9	.7	2
]				
Total			£472	15	9	Total	£455	0	10

Visited 18th April, 1898. This hospital is now at last in a thoroughly satisfactory condition, both as regards medical care and nursing. Dr. Harvey is thoroughly attentive to his work, and Miss Allan is a highly efficient certificated nurse. I am glad to find that all through the district great interest is being aroused in all that concerns the welfare of the institution.

4—H. 22.

PICTON HOSPITAL.

Number of pa	atients o	n 31st M	arch, 1897	•••	•••		
Admitted du	ring the	year				18	
	_						
	Tota	l under t	reatment	•••	• • •	• • •	30
Discharged	•••	•••	•••	•••	•••	•••	17
$\operatorname{Died} \ldots$. •••	•••	•••	•••	•••	• • •	. З
Remaining of	n 31st A	Iarch, 18	98				10

Sex.—24 males, 6 females.

Localities from which Patients came.—Pelorus Road District, Havelock, Cullensville, Kaituna, Tuamarina, Sounds, Picton.

Country.—No record. Religion.—No record.

Total collective days' stay in hospital, 3,863; individual average days' stay, 128.76. average cost per head, 3s. 2½d.; less patients' payments, 3s. 0¾d. Daily

Outdoor Patients.—Individual cases, 7.

REVENUE AND EXPENDITURE.

	Revenue.		£	s.	d.	Expenditure.	£	s.	d.		
From Government	•••		274	3	1	Rations	147	18	1		
Local bodies	•••		274	3	0	Wines, spirits, ale, &c	15	14	0		
Donations	•••		1	0	0	Surgery and dispensary	20	14	3		
Patients' payments			24	0	0	Fuel and light	35	9	11		
Other sources	•••		43	12	7	Bedding and clothing	17	8	8		
						Salaries and wages	268		0		
						Water-supply	3	10	. 0		
						Repairs	12	14	6		
						Printing, advertising, postage, and					
						stationery	11	11	11		
						Interest	0	2	6		
						Insurance	5	0	0		
						Other expenses	77	18	10		
Total	• • •.	•••	£616	18	8	Total	£616	18	8		
									_		

Date of inspection, 28th January, 1898. After years of friction between two parties in the district, one favourable to the retention of Dr. Scott, the other anxious to get rid of him, a solution of the difficulty seems at last to have been hit upon, which, I hope, will have the effect of healing this chronic sore. Dr. Scott has entered into partnership, with equal interest in the practice as well as the surgeonship to the hospital, though, so far as the Secretary, Mr. Blizzard, could inform me, there was some vagueness as regards the exact terms of the agreement. At any rate, Dr. Scott was re-elected on the understanding that Dr. Anderson's services should be available for the hospital. I found a great deal of ill-feeling among the patients, most of whom are simply brokendown old men. This was, I concluded after careful inquiry, entirely due to the slackness of the Board, who time after time readmitted a disreputable, drunken old ruffian to the hospital, where he made the most odious charges against the management without any foundation, and treated the caretaker and doctor in my hearing with the most shameful insolence. I wrote a letter to the Trustees, and I am glad to find that they at once turned him out, and now there is peace. It is impossible to maintain discipline in a hospital where the Trustees are deterred by fear of popular clamour from doing their duty.

QUEENSTOWN HOSPITAL.

Number of particle Admitted during	atients or ring the	on 31st M year		•••		13 99	
	Tota	l under ti	eatment		•′••		112
Discharged	***	•••	•••	•••	•••		91
Died	•••	•••	•••	•••	•••	•••	10
Remaining or	n 31st N	Iarch, 189	98	•••		• • •	11

Sex.—87 males, 25 females.

Localities from which Patients came.—Lake, Vincent, Southland, and Clutha Counties, Dunedin, England, Ireland.

Country.—New Zealand, 42; England, 12; Ireland, 20; Scotland, 18; Australia, 8; Holland, 1; Prussia, 1; Tasmania, 2; Denmark, 1; Canada, 2; China, 2; Germany, 1; France, 1; Sweden, 1.

Religion.—Church of England, 31; Roman Catholic, 26; Presbyterian, 47; Wesleyan, 3; Lutheran, 2; Buddhist, 2; Baptist, 1.

Total collective days' stay in hospital, 3,800; individual average days' stay, 33.93. Daily average cost per head, 5s. 2d.; less patients' payments, 3s. 8½d.

Outdoor Patients.—Individual cases, 81; attendances, 154.

REVENUE	AND	EXPENDITURE.
THEARING	ANL	LIAPENDITURE.

R	evenue.		£	s.	d.	Expenditure.		£	s.	d.
From Government			462	4	5	Rations		250		7
Local bodies	• • •		275	2	0	Wines, spirits, ale, &c		7	11	0
Subscriptions and don	ations	•••	114	5	3	Surgery and dispensary		57	16	0
Patients' payments			280	15	0	Fuel and light		65	17	7
Balance from last year	:		123	16	5	Bedding and clothing, &c.		112	1	10
						Salaries and wages	• • • •	421	0	0
						Printing, advertising, postage,	and			
						stationery		7	1	6
						Insurance		13	16	3
						Commission		21	16	2
						Other expenses	• • •	26	5	3
${f Total}$	•••	£1	,256	3	1	Total		£983	13	2

The state of things commented on last year has been improved, and this is once more a comfortable and well-cared-for institution. Dr. Douglas is always careful and attentive, and is one of the kindest of men. The situation, though somewhat inconvenient, is extremely salubrious, and makes it a favourite resort for pulmonary cases, for whom the climate is unrivalled.

REEFTON HOSPITAL.

Number of particle Admitted dur				•••	•••	16 146			
	Tota	l under tr	eatment		•••	•••		162	
Discharged	• • •	•••	•••	•••	•••		128		
Died	• • •	•••	•••	•••	• • •	•••	15		
Remaining or	31st M					19			

Sex.—150 males, 12 females.

Sex.—150 males, 12 females.
Locality from which Patients came.—Inangahua and Buller Counties, Auckland.
Country.—England, 33; Scotland, 22; Ireland, 46; New Zealand, 34; New South Wales, 1;
Tasmania, 2; Wales, 2; Shetland Isles, 1; Orkney Isles, 1; Ionian Isles, 1; China, 5; Germany, 5; Victoria, 7; Sweden, 1; Finland, 1.
Religion.—Church of England, 59; Roman Catholic, 50; Presbyterian, 39; Wesleyan, 4;
Confucian, 4; Lutheran, 3; nil, 3.
Total collective days' stay in hospital, 7,663; individual average days' stay, 47·30. Daily average cost per head, 4s. 4½d.; less patients' payments, 4s. 2d.
Outdoor Patients.—Individual cases, 126; attendances, 800.

REVENUE AND EXPENDITURE.

Revenue.		£	s.	d. 1	Expenditure.		£	s.	d.
From Government	• • •	635	13	8	Rations		425	6	5
Local bodies		100	0	0	Wines, spirits, ale, &c		56	1	7
Subscriptions and donations		467	15	10	Surgery and dispensary		135	13	8
Patients' payments		79	10	0	Fuel and light		81	12	5
Other sources		7	0	0	Bedding and clothing		92	13	2
Balance from last year		397	13	3	Furniture and earthenware		80	13	10
•					Washing and laundry		6	12	9
				J	Salaries and wages		641	11	4
				1	Funerals		5	18	0
				ļ	Repairs		69	1	4
				ĺ	Additions to buildings		57	4	3
					Printing, advertising, postage,	\mathbf{a} nd			
				i	stationery		48	12	6
					Interest		0	8	6
					Insurance		3	15	0
				1	Commission	•••	10	13	0
					Other expenses	•••	23	1	8
Total	£1	,687	12	9	Total	£1	,738	19	5

Inspected 24th April, 1898. The additional accommodation afforded by the Ziman Ward has greatly increased the comfort of this hospital. A woman far advanced in cancer was being carefully tended by Mrs. Preshaw. Everything seemed in excellent order, and all the patients spoken to were contented and happy.

RIVERTON HOSPITAL.

Number of pa Admitted duri	tients or ing the y	1 31st Marc 7ear	eh, 1897 		•••	$\begin{array}{ccc} \dots & 1 \\ \dots & 12 \end{array}$	8 2
	Total	under treat	ment				140
Discharged	•••	•••		•••	•••	\dots 12	4
Died	•••	•••	• • •	•••		•••	7
Remaining on	31st M	arch, 1898	•••				9

Sex.—101 males, 39 females.

Locality from which Patients came.—Riverton district.

Country.—England, 15; Scotland, 10; Ireland, 25; New Zealand, 54; Tasmania, 1; Victoria, 2; China, 5, India, 1; Canada, 1; Austria, 2; aboriginal, 5; Sweden, 1.

Religion.—Church of England, 48; Presbyterian, 29; Roman Catholic, 31; Wesleyan, 8;

Evangelist, 1; Confucian, 5.

Total collective days' stay in hospital, 4,538; individual average days' stay, 32.41. Daily average cost per head, 5s. 34d.; less patients' payments, 5s.

Outdoor Patients.—Individual cases, 68; attendances, 75.

REVENUE AND EXPENDITURE.

	J. U.E.	3 7 2321 (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1111	IJAI BRIDII CIM.			
Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government		613	15	7	Rations	342	18	0
Local bodies	• • •	526	15	0	Wines, spirits, ale, &c	15	16	11
Subscriptions and donations		101	13	0	Surgery and dispensary	65	9	9
Rents		1	0	0	Fuel and light	66	16	0
Patients' payments		62	10	0	Bedding and clothing	20	12	8
Other sources		2	10	0	Furniture and earthenware	29	17	0
Balance from last year		135	8	9	Washing and laundry	11	10	0
					Salaries and wages	519	4	0
					Funerals	5	5	0
					Water-supply	6	0	0
					Repairs	13	6	0
					Additions	285	13	6
					Printing, advertising, postage, and			
					stationery	20	1	9
					Insurance	7	17	0
					Other expenses	73	7	5
	-							
Total	£1	,443	12	4	Total £	1,483	15	0
					<u>-</u>			=

Visited 5th March, 1898. This hospital was in good order; but the dual management seems to me unlikely to continue to work well. The female side, which requires comparatively little skill to manage because of the small number of patients, is in charge of a skilful certificated nurse, while the male side is under the co-ordinate authority of a male warder, who has had no experience beyond Riverton. Miss Williams should be placed in full control of both sides, and Mr. Fearn, if the Board are resolved to retain his services, should be her assistant. I found the old dining-room was being converted into a ward, for which it is quite unsuitable, for it has no direct light or ventilation. In fact, to attempt to use it for a hospital ward is absurd, and I am surprised that Dr. Nelson has not pointed this out to the Trustees.

ROSS HOSPITAL.

Number of pa			March, 1897	•••	•••		8		
Admitted dur	ing the y	ear	. • • •	•••	•••	• • • •	14		
	Total	under	treatment					22	
	1000	anaor.	or oddinone	• • • •	•••	• • • •		22	
Discharged	•••	• • • •			•••	•••	12		
Died	•••	•••	•••	• • •	•••	• • • •	2		
Remaining or	31st Ma	arch. 1	898		-			8	

Localities from which Patients came.—Ross, 16; South Westland, 6.

Country.—England, 7; Scotland, 6; Ireland, 5; Germany, 2; Italy, 1; France, 1.

Religion.—Church of England, 12; Roman Catholic, 4; Presbyterian, 6.

Total collective days' stay in hospital, 3,081; individual average days' stay, 140. average cost per head, 3s. 9d.

REVENUE AND EXPENDITURE.										
		Revenue.		£	s.	đ.	Expenditure. £ s	. d.		
From G	overnment			247	1	0		3 1		
Local b	odies	,,,		222	18	11	Surgery and dispensary 11	4 10		
Subscrip	ptions and d	onations		100	10	0	± 0.01 0.11	7 3		
	s' payments			8	10	0	Bedding and clothing 16	7 3		
	- •						Furniture and earthenware 4	2. 0		
							Salaries and wages 315	0 0		
							2 42102415	0 6		
							200 0 002220	8 6		
							Printing, advertising, postage, and			
							stationery 3 1			
							Insurance 5			
							Other expenses 5 1	6 0		
	Total			£578	19	11	Total £578 1	9 11		
	Total			£578	19	11	·			

Date of inspection, 20th January, 1898. Considerable improvements have been effected since my last visit. One of the wards has been cleaned, painted, and papered. The whole outside of the building as well as the roof ought to be painted at once, for it is not creditable to allow a public building to perish through neglect. The patients consisted of eight chronic cases. All spoke in the highest terms of the care and kindness they experienced at the hand of Dr. Rossetti and Mr. and Mrs. Meeson.

SOUTH WAIRARAPA HOSPITAL.

Number of pa Admitted dur			7		•••	1 48		
,	Tota	l under t	reatment	•••	•••	•••	49)
Discharged	• • •	•••	•••	••	•••		40	
Died	•••	• • •	•••	•••	* * *	• • •	6	
Remaining or	1 31st N	Iarch, 18	98		• •••		3	;

Sex.—37 males, 12 females.

Localities from which Patients came.—Carterton, 13; Greytown, 8; Featherston, 1; Martinborough, 10; Morrison's Bush, 2; Lower Valley, 2; Woodside, 1; Gladstone, 7; Ngahauranga, 1; Kaiwaiwai, 1; Dannevirke, 1; Matarawa, 2.

Country.—England, 14; Scotland, 2; Ireland, 4; New Zealand, 25; Germany, 2; Russia, 1;

Mexico, 1.

Religion.—Church of England, 36; Roman Catholic, 3; Presbyterian, 6; Wesleyan, 3;

Total collective days' stay in hospital, 1,054; individual average days' stay, 21.51. Daily average cost per head, 8s. $3\frac{1}{2}$ d.; less patients' payments, 7s. $10\frac{1}{2}$ d.

REVENUE AND EXPENDITURE.

Rev	enue.		£	s.	d.	Expenditure.		£	s.	d.
From Government			239	0	3	Rations		121	12	1
Subscriptions and donat	ions		180	3	9	Wines, spirits, ale, &c		1	7	3
Rents			1	4	0	Surgery and dispensary		25	8	2
Patients' payments		•••	22	1	0	Fuel and light	• • •	13	2	10
Other sources	•••		5	18	6	Bedding and clothing		2	11	3
Balance from last year	•••		83	1	5	Furniture and earthenware		7	18	0
• •						Salaries and wages		213	12	0
						Funerals		3	0	0
						Repairs and additions		26	2	5
						Printing, advertising, postage,	and			
						stationery		8	7	6
						Interest		1	8	0
						Insurance		6	11	9
						Other expenses		6	4	9
			<u> </u>							
Total	•••		£531	8	11	${\bf Total} \qquad \dots$		£437	6	0.
										_

Inspected 19th December, 1897. This is a comfortable cottage-hospital, which is well looked after in every respect. There were three patients on the date of my visit, one of them a very remarkable case of recovery from a dangerous gunshot wound right into the body of the sacrum. A four-roomed cottage makes a suitable fever ward.

THAMES HOSPITAL.

Number of Admitted d	patients uring th	on 31st I e year	March, 18 	97	•••	•••	23 288	
	Total	under tre	atment	•••				311
Discharged			•••				259	
Died	• •	•••	•••	•••	•••	•••	28	
Remaining	on 31st	March, 18					24	

Sex.—240 males, 71 females.

Sex.—240 males, 71 females.

Localities from which Patients came.—Thames and Ohinemuri Counties and Thames Borough.

Country.—England, 56; Scotland, 13; Ireland, 41; New Zealand, 161; Australia, 16;

Germany, 3; America, 2; Italy, 2; Sweden, 3; Tasmania, 3; South Africa, 3; Canada, 2;

Finland, 2; Jamaica, 1; Nova Scotia, 1; Portugal, 1; Fiji, 1.

Religion.—Church of England, 105; Roman Catholic, 70; Presbyterian, 46; Wesleyan, 24;

Plymouth Brethren, 2; Lutheran, 1; Primitive Methodist, 4; Congregationalist, 2; Salvation

Army, 1; Baptist, 7; unknown, 49.

Total collective days' stay in hospital, 7,464; individual average days' stay, 24. Daily average cost per head, 4s. 1½d.; less patients' payments, 3s. 1¾d.

Outdoor Patients.—Individual cases, 350; attendances, 760.

REVENUE AND EXPENDITURE.

*				, a.a. 2.		EXIBIDITORS.				
Rev	enue.		£	s.	d.	Expenditure.		£	s.	d.
From Government		• • •	605	6	2	Rations, fuel, and light		378	19	8
Local bodies			575	0	0	Wines, spirits, ale, &c	• • •	6	0	6
Subscriptions and donat	tions		72	5	8	Surgery and dispensary		119	11	0
Rents			18	0	0	Bedding and clothing, furniture,	\mathbf{and}			
Patients' payments			368	19	1	earthenware		53	14	9
Balance from last year		• • •	60	4	8	Salaries and wages		764	18	9
•						Water-supply and rates		32	5	10
•						Funerals		15	8	0
						Repairs		20	4	0
						Printing, advertising, postage,	and			
						stationery		25	4	3
						Insurance		15	8	9
						Other expenses		107	15	0
						•	-			
Total	•••	£1	,699	15	7	${f Total} \qquad \dots$	£1	,539	10	6
		==		-					Medicine	-

Visited 1st February, 1898. This hospital is in an unsatisfactory and difficult position. The building as a whole is badly arranged, and badly built of bad materials. Its situation is on the flat on a corner section, with houses close up and streets on two sides. The Trustees have for years been pressing the Government to spend £1,000 in repairing and extending this building. I have been compelled to advise against any attempt to spend any more money in patching up so manifestly bad and unsuitable a structure. The local authorities plead inability to make any effort to raise money, which the Government would willingly subsidise, for a new hospital if possible on a new site. The result is a deadlock from which I can see no immediate prospect of relief. So far as the medical and surgical arrangements and the nursing staff is concerned they deserve the highest commendation. deserve the highest commendation.

TIMARU HOSPITAL.

Number of p Admitted du	atients or	n 31st Ma year	•••	•••	•••	$\begin{array}{c} 25 \\ 325 \end{array}$		
TO: 1 1	Total un	nder treat	ment		•••			350
Discharged Died					•••	•••	$\frac{290}{34}$	
Remaining or	n 31st M	arch, 1898	3		•••			26

Sex.—211 males, 139 females.

Sex.—211 males, 139 females.
Localities from which Patients came.—Hospital district, 321; outside hospital district, 29.
Nationality.—English, 62; Scotch, 38; Irish, 47; Colonial, 189; Swedish, 3; Welsh, 4;
American, 1; German, 4; Pole, 1; Belgian, 1.
Religion.—Church of England, 136; Roman Catholic, 73; Presbyterian, 68; Wesleyan, 38;
Salvation Army, 5; Baptist, 2; Congregationalist, 2; Methodist, 24; Lutheran, 1; Jewish, 1.
Total collective days' stay in hospital, 9,678; individual average days' stay, 27.65. Daily average cost per head, 4s. 7d.; less patients' payments, 4s. 2½d.
Outdoor Patients.—Individual cases, 177; attendances, 403.

	REVENUE AND	Expenditure.				
Revenue.	£ s. d.	Expenditure.		£	s.	d.
From Government	1,120 13 2	Rations		550	18	1,1
Local bodies	$\dots 1,120 13 1$	Wines, spirits, ale, &c		43	1	0
Subscriptions and donations	34 5 11			258	1	2
Rents	10 0 0			209	9	1
Patients' payments	\dots 172 14 0	Bedding and clothing		52	5	0
		Furniture and earthenware		106	11	0
		Washing and laundry		26	14	8
		Salaries and wages		764	11	3
·		Water-supply	• • •	8	0	0
		Repairs		68	11	4
		Additions		248	14	7
•		Printing, advertising, postage,	\mathbf{and}			
		stationery		46	10	0
		Insurance		14	12	6
		Members' travelling-expenses		12	19	1
		Other expenses	•••	47	6	7
Total	£2,458 6 2	Total	£2	,458	6	2

I made a night and a morning visit to this hospital. The nurses on my night visit were carefully attending to their duties, but I found that one of the wards was dangerously overcrowded with typhoid cases, especially as the new closets are not yet available. The atmosphere was distinctly close, and greater attention ought to be paid to regulating the ventilation. The fan-lights which were fixed up some time ago ought to be opened and closed by means of a screw and lever apparatus. I regret, though I am not surprised to find, that the cordial co-operation of the medical staff, three doctors practising in the town and visiting daily, seems to have broken down. I always thought this breakdown was inevitable. What to do is a difficult problem, but it is certain that when harmony goes the present system is doomed. In all other respects the management of this hospital is all that can be desired.

WAIKATO HOSPITAL.

Number of p Admitted du	atients ring the	on 31st 1 e year	March, 18	97			$\begin{array}{c} 27 \\ 349 \end{array}$	
	Tot	al under i	treatment	•••	•••	•••		376
Discharged		•••					335	
Died				•••	• • •		15	
Remaining o	n 31st	•••		•••		26		

Sex.—261 males, 115 females.

Localities from which Patients came.—Waikato, 68; Waipa, 79; Piako, 58; Raglan, 11; King-country, 21; Rotorua, 11; Auckland, 12; Hamilton, 65; Cambridge, 29; Ohinemuri, 15;

King-country, 21; Rotorua, 11; Auckland, 12; Hamilton, 65; Cambridge, 29; Ohinemuri, 15; Kawhia, 5; Dunedin, 1; Canterbury, 1.

Country.—England, 76; Scotland, 20; Ireland, 51; New Zealand, 208; Australia, 11; Denmark, 3; Tasmania, 2; Prussia, 3; Holland, 1; America, 1.

Religion.—Church of England, 194; Roman Catholic, 74; Presbyterian, 62; Wesleyan, 30; Lutheran, 3; Baptist, 5; Mormon, 1; nil, 6.

Total collective days' stay in hospital, 7,144; individual average days' stay, 19. Daily average cost per head 7s; less patients' payments, 5s, 31d

cost per head, 7s.; less patients' payments, 5s. $3\frac{1}{2}$ d.

		REVENU	E A	ND	EXPENDITURE.			
Revent	ue.	£	s.	d.	Expenditure.	£	s.	d.
From Government		1,050	10	0	Rations	523	18	2
Local bodies		750	0	0	Wines, spirits, ale, &c	. 18	10	0
Subscriptions and donation	ıs	8	11	0	Surgery and dispensary	248	13	8
Rents		52	19	6	Fuel and light	134	4	9
Patients' payments	• • • •	614	13	6	Bedding and clothing	42	12	1
Other sources		21	16	0	Furniture and earthenware	. 19	6	8
					Washing and laundry	71	17	0
					Salaries and wages	796	10	7
					Water-supply	31	2	3
					Funerals	. 13	5	0
					Repairs	148	17	10
					Additions to buildings		7	9
					Printing, advertising, postage, and			
					stationery	52	15	0
	• .				Interest	0	4	8
					Insurance	21	7	6
					Other expenses	300	17	1
Total		£2,498	10	0	Total	£2,498	10	0

Inspected 21st February, 1898. This hospital continues to deserve great credit for the energetic and progressive character of its management. I would, however, suggest that, now that the kitchen has been extended and a new range added, the ratepayers' pockets should get a rest—at any rate, so far as further building is concerned. The eight-hour system of nurses' work is in operation, I think, unnecessarily. It would be sufficient to get what assistance is required at specially busy times. I am convinced that in hospitals of this size too large a staff has many serious drawbacks. I would also suggest that it ought not to be necessary to send to Morrinsville every time that professional assistance is required.

		WAIMA'	TE HOS	PITAL.	•		•	
Number of pa	tients on	31st Mar	ch, 1897		•••		12	
Admitted duri	ing the ye	ear	•••	•••	•••	• • • •	130	
	Total u	ınder tres	tment	•••				142
Discharged	•••		···	•••	•••	•••	118	
Died	•••	•••	•••	•••	•••	• • •	10	
Remaining on	31st Ma	rch, 1898	•••					14

Sex.—96 males, 46 females.

Locality from which Patients came.—Waimate County.

Country. — England, 34; Scotland, 17; Ireland, 28; New Zealand, 53; Germany, 2;

Australian Colonies, 4; America, 1; Austria, 1; South Africa, 1; Belgium, 1.

Total collective days' stay in hospital, 3,139; individual average days' stay, 22·10. Daily average cost per head, 6s. 3\frac{1}{4}d.; less patients' payments, 5s. 8\frac{1}{4}d.

Outdoor Patients.—Individual cases, 36; attendances, 153.

REVENUE AND EXPENDITURE.

Rev	enue.		£	s.	d.	Exp	enditure.		£	s.	d.
From Government			293	13	5	Rations			136	17	2
Local bodies			250	0	0	Wines, spirits, ale, &c.			12	9	6
Subscriptions and donat	tions		37	2	0	Surgery and dispensar	у		117	11	9
Patients' payments			89	0	0	Fuel and light	•••		54	12	0
Other sources			7	12	0	Bedding and clothing			22	15	11
Balance from last year			327	3	5	Furniture and earthen	ware		7	15	10
·						Salaries and wages			474	14	6
						Funerals			4	2	6
						Repairs			17	19	6
						Printing, advertising,	postage,	and			
						stationery			20	7	9
						Insurance			13	9	0
						Other expenses	* ***		99	15	11
Total		£1	,004	10	10	Total			<u></u> £982	11	4
		-									acus.

I regret to find that the Royal Commission does not seem to have quite removed the causes of friction between the Waimate and Timaru Hospital Trustees. Last year I pointed out that in some respects the Waimate people wanted too much. I am now, however, bound to admit that they do need new beds and a more abundant supply of bedding. The doctor is energetic and determined not to be content without the most complete surgical appliances. I found the nursing good, and the hospital as a whole in a very satisfactory state.

WAIPAWA HOSPITAL.

Number of pa Admitted dur			arch, 189	07			$\begin{array}{c} 26 \\ 272 \end{array}$	
	Tota	l under tr	eatment		•••			298
Discharged		•••	•••		•••		257	
$\operatorname{Died} \ldots$	•••	. •••	•••	•••	•••	•••	15	
Remaining on	31st W	Iarch, 189	98					26

Sex.—231 males, 67 females.

Localities from which Patients came.—Napier, 6; Waipukurau, 15; Waipawa, 33; Te Aute, 19; Bush, 97; Makaretu, 24; Wairarapa, 2; Coast, 24; Patangata, 10; Dannevirke, 47; Feilding, 1; Palmerston, 2; Wellington, 2; Auckland, 4; Woodville, 2; Wanganui, 2; Hastings, 2;

Country.—England, 77; Ireland, 34; Scotland, 17; New Zealand, 109; Tasmania, 5; Australia, 10; Norway, 14; Sweden, 14; Canada, 2; California, 2; Germany, 6; Bohemia, 1; America, 2; France, 2; Finland, 1; Africa, 1; India, 1.

Religion.—Roman Catholic, 58; Church of England, 142; Presbyterian, 33; Lutheran, 33; Salvationist, 13; Freethinker, 2; Wesleyan, 8; Adventist, 2; Christadelphian, 2; Methodist, 2; Presbyterian, 33; Lutheran, 33; Reprint 1: no religion, 2

Baptist, 1; no religion, 2.

Total collective days' stay in hospital, 10,183; individual average days' stay, $34\cdot17$. Daily average cost per head, 3s. 8d.; less patients' payments, 3s. $3\frac{3}{4}$ d.

					,				
Revenu	e.	£	s.	d.	$m{.}$ Expenditure		£	s.	d.
From Government		966	11	2	Rations		578	16	0
Local bodies		728	0	0	Wines, spirits, ale, and porter		31	10	0
Subscriptions and donations	s	283	15	2	Surgery and dispensary	•	182	16	5
Patients' payments		175	9	4	Fuel and light		112	17	9
Other sources		0	18	0	Bedding and clothing		46	12	10
Balance from last year		101	19	8	Washing and laundry		31	5	0
•					Salaries and wages		686	5	6
					Water-supply		18	14	6
					Funerals		13	13	6
					Furniture, &c., and repairs		63	9	7
					Additions to buildings		196	19	6
					Printing, advertising, postage,	and			
					stationery		21	11	3
					Interest		0	13	6
·					Insurance		33	6	0
				-	Other expenses		49	6	8
					-				
$\operatorname{Total} \dots$	£2	2,256	13	4	${f Total} \qquad \dots$		£2,067	18	0
	_								

On the date of my visit, 9th September, 1897, this hospital contained twenty male and seven female patients. All spoke in the highest terms both of the doctor and the nurses; and, indeed, it is evident, even to the casual observer, that this is a well-managed institution. The new matron is a great acquisition.

WAIROA HOSPITAL.

Number of p			March, 189	7	•••		3	
Admitted du	ring th	e year			•••	•••	34	
	m ,						-	
TO: 1 1	Tot	al under t	treatment		•••	•••	0.4	37
Discharged	• • •	•••	• • •	•••	• • •	•••	34	
Died	•••	• • •	•••	•••		•••	2	
Remaining o	n 21at	March 19	308					1
riemaining o	II OTO	maion, re	380		• • •	• • •		1

Sex.—31 males, 6 females.

Localities from which Patients came.—Wairoa and adjacent counties, and Waikaremoana co-operative roadworks.

Nationality.—European, 26; Native, 11.

Total collective days' stay in hospital, 1,022; individual average days' stay, 27.62 Daily average cost per head, 9s. 7\frac{3}{4}d.; less patients' payments, 8s. 1\frac{1}{2}d.

REVENUE AND EXPENDITURE.

Re	evenue.	£	8.	d.	Expenditure.	£	s.	đ.
From Government		195	12	1	Rations	108	18	8
Local bodies		167	7	1	Surgery and dispensary	58	3	7
Subscriptions and done	ations	23	10	10		38	15	9
Patients' payments		39	3	5	Bedding and clothing	2	12	3
Other sources		10	0		Furniture and earthenware	14	4	4
Balance from last year	· · · •	73	6	10		221	5	4
					Repairs and additions to buildings	11	8	9
•					Printing, advertising, postage, and			
					stationery	1	1	4
					Other expenses	36	9	10
		0500				0.400		
		£509	U	3		£492	19	10

WANGANUI HOSPITAL.

Number of p Admitted du	atients ring th	on 31st l e year	March, 189 	7	•••		$\begin{array}{c} 18 \\ 276 \end{array}$
	Tot	al under	treatment	•			294
${f Discharged}$							249
Died			• • •		• • •		17
Remaining of 5—H. 22.	n 31st	March, 18	898	•••	•••	•••	28

Sex.—207 males, 87 males.

Localities from which Patients came.—Wanganui Borough, 139; Wanganui Couny, 35; Waitotara County, 34; Rangitikei County, 58; Marton Borough, 18; Halcombe, 2; Stratford, 1; Waverley, 7.

Nationality.—English, 60; Scotch, 24; Irish, 60; Welsh, 7; Colonial, 139; American, 1;

German, 1; Norwegian, 1; Italian, 1.

Religion.—Church of England, 131; Roman Catholic, 85; Presbyterian, 51; Wesleyan, 20; Church of Christ, 1; Baptist, 1; Plymouth Brethren, 1; Salvation Army, 1; Lutheran, 2; unknown, 1.

Total collective days' stay in hospital, 9,352; individual average days' stay, 31.80. Daily average cost per head, 5s. $4\frac{1}{4}$ d.; less patients' payments, 4s. $6\frac{1}{4}$ d. Outdoor Patients.—Individual cases, 105; attendances, 611.

REVENUE AND EXPENDITURE.

		7.91	2 1 1211 0	11 11	.111	LIMI BRIDIT CIVE.				
	Revenue.		£	s.	d.	Expenditure.		£	s.	d.
From Government	•••		966	11	$_4$	Rations		422	5	8
Local bodies		• • •	657	6	4	Wines, spirits, ale, &c		39	0	3
Subscriptions and d	lonations		20	12	0	Surgery and dispensary		308	4	9
Bequest			500	0	0	Fuel and light		295	7	11
Rents	•••		728	17	6	Washing and laundry		. 87	19	0
Patients' payments	•••		396	7	6	Salaries and wages		781	0	11
Other sources	·		65	0	0	Water-supply		50	0	0
Balance from last y	ear		985	7	4	Funerals		7	3	8
						New hospital			15	0
						Printing, advertising, postage,	and			
						stationery		37	14	2
						Interest re new hospital loan		334	16	10
						Other expenses	• • •	145	17	1
Total		£	4,320	2	0	Total	· • •	€3,924	5	3
		_								

Inspected 7th December, 1897. This hospital is, in every point of view, most satisfactory. The Trustees are liberal and progressive in their ideas, the medical staff capable and attentive, and the nursing good. A modification of the eight-hour system has been introduced, without any apparent necessity. Except at very long intervals, the amount and character of the work required of the nurses is not excessive. Unless the public mind resolves that all labour, whether continuous or not, shall be limited to an eight-hours day, I think the nurses in hospitals of this size should work as formerly. Under the eight-hours system, if all or the majority of the nurses are certificated, the expense is too great, while, if probationers be appointed for the sake of cheapness, their training is inadequate. I am a thorough believer in limiting the hours of heavy labour to the utmost, but I fear that, to make the experiment with our hospitals of this class, will ultimately prove a hindrance to a most beneficent movement. The cost will be found too burdensome, and I am apprehensive that the whole system of female nursing will collapse under its own weight.

WELLINGTON HOSPITAL.

Number of pat Admitted duri	ients on 31s ng the year	t March,	1897	•••		170 1,562
Discharged	Total unde			•••		${1,732}$
Died	,	•••	***	•••	•••	110
Remaining on	31st March.	1898				153

Sex.—1,032 males, 700 females.

Localities from which Patients came. Wellington, 1,263; suburbs, 144; Pahautanui, 2; Localities from which Patients came.—Wellington, 1,263; suburbs, 144; Pahautanui, 2; Tokomaru, 1; Dannevirke, 3; Reefton, 1; Kereru, 4; Hunterville, 4; Shannon, 3; Masterton, 16; Wanganui, 9; Eketahuna, 4; Westport, 4; Picton, 1; Foxton, 6; Mauriceville, 4; Onehunga, 2; Marlborough, 1; Levin, 6; Waituna, 1; Hawke's Bay, 2; ships, 46; Otaki, 10; Auckland, 1; Plimmerton, 1; Horokiwi, 2; Featherston, 7; Wairarapa, 1; Martinborough, 8; New Plymouth, 4; Nelson, 5; Pahiatua, 10; Patea, 3; Kumara, 1; Waikanae, 3; Normanby, 2; Waipawa, 1; Summit, 2; Paikakariki, 2; Tawa Flat, 1; Tutaekara, 1; Feilding, 16; Upper and Lower Hutt, 47; Palmerston, 8; Greytown, 4; Whakataki, 1; Mungaroa, 2; Napier, 3; Oamaru, 1; London, 1; Waiwetu, 1; Sydney, 3; Christchurch, 6; Paraparaumu, 4; Turakina, 1; Makarui, 1; Greymouth, 2; Rongotea, 1; Carterton, 6; Ashburton, 1; Kaitoke, 3; Ormondville, 1; Newman, 1; Woodville, 3; Ballance, 1; Hastings, 3; Rangitikei, 5; Blenheim, 2; Longburn, 1; Kaikoura, 2; Pukarua, 1; Dunedin, 2; Toko, 1; Paremata, 1; Sandon, 1; Opiti, 1; Queensland, 1; Mangatainoka, 1. Queensland, 1; Mangatainoka, 1.

Nationality.—English, 446; Irish, 246; Scotch, 138; Colonial, 775; Welsh, 10; Australian, 22; Assyrian, 1; Danish, 7; Italian, 4; Swedish, 13; French, 5; German, 19; Indian, 4; American, 9; Norwegian, 9; African, 1; Greek, 1; Russian, 2; Chinese, 9; Canadian, 3;

Belgian, 2; Spanish, 1; Finns, 1; Channel Islanders, 4.

H.-22.

Religion.—Church of England, 860; Roman Catholic, 404; Wesleyan, 165; Presbyterian, 150; Baptist, 39; Confucian, 2; Lutheran, 19; Salvation Army, 25; Hebrew, 2; Brethren, 15; Seventh Day Adventist, 2; Greek Church, 2; Catholic Apostolic, 2; Congregational, 8; Church of Christ, 10; Methodist, 11; none, 16.

Total collective days' stay in hospital, 59,939; individual average days' stay, 34:60. Daily average cost per head, 3s. 7\frac{3}{4}d.; less patients' payments, 2s. 11\frac{3}{4}d.

Outdoor Patients.—Individual cases, 2,534; attendances, 13,244.

		REVENU	JE 2	AND	EXPENDITURE.			
Revenue.		£	s.	d.	Expenditure.	£	s.	d.
From Government	• • •	4,335	0.	0	Rations	3,257	14	9
Local bodies		4,335	0	0	Wines, spirits, ale, &c	157	1	9
Subscriptions and donations	• • •	125	2	0	Surgery and dispensary	1,386	6	11
Bequest		500	0	0	Fuel and light	825		1
Rents		2,011	12	11	Bedding and clothing	426	0	2
Patients' payments		2,041	17	-5	Furniture and earthenware	84	5	6
Other sources		76	7	10	Washing and laundry	306	16	10
Balance from last year		1,827	13	4	Salaries and wages	3,345	6	0
					Water-supply	198	14	0
					Funerals	58	14	6
					Repairs	489	14	9
					Additions to buildings	770	9	3
					Printing, advertising, postage,			
					and stationery	57	11	11
					Interest and principal		12	0
	*				Insurance		10	6
en en en en en en en en en en en en en e					Other expenses	315	7	9
Total	£	15,252	13		Total £	312,124	5	8

This is the most popular institution in Wellington, and its defects are chiefly due to this fact. If only the Trustees could be induced to emulate, even to a small extent, the excellent example set by Auckland, there would be less anxiety felt by thoughtful observers as to the evil effects of our indiscriminate lavishness in administering what is, after all, a public charity. I have nothing but admiration for the zeal, ability, and sympathetic feeling with which the Wellington Hospital is administered. I only deplore its efficiency in blunting the self-respect and independence of so many of our people. A popular hospital administration means, among other things not apparent on the surface, high doctor's fees for all who are too proud to accept medical services gratis.

		WESTPO	ORT HO	SPITAL			
Number of pa				24			
Admitted dur	ing the y	ear	• • •	•••	• • • •	116	
	Total un	der treatr	nent	•••			140
Discharged	•••	•••			•••		100
Died	•••		•••	•••	•••	•••	11
Remaining on	31st Ma	rch, 1898					29

Sex.—121 males, 19 females.

Locality from which Patients came.—Buller County and Borough of Westport.

Country.—England, 27; Ireland, 40; Scotland, 29; New Zealand, 29; Australia, 3; America, 4; Germany, 8.

Religion.—Church of England, 47; Roman Catholic, 52; Presbyterian, 31; Wesleyan, 5; Lutheran, 5.

Total collective days' stay in hospital, 13,910; individual average days' stay, 99 36. Daily

average cost per he	ad, $2s. 5\frac{1}{2}d.$; le	ess patie	nts'	pay	ments, 2s. $3\frac{3}{4}$ d.	-			•	
REVENUE AND EXPENDITURE.											
	Revenue.		£	s.	d.	Expenditure.		£	s.	d.	
From Government				10	9	Rations		316	7	5	
Local bodies			669	17	4			27	8	0	
Subscriptions and d	onations		115	0	3	Surgery and dispensary		171	1	6	
Patients' payments	•••		108	1	4			138	13	1	
Other sources			21	16	6			61	17	0	
						Furniture and earthenware		57	14	8	
						Salaries and wages		531	12	4	
						Funerals		17	5	0	
						Repairs and additions		348	16	3	
						Printing, advertising, postage,	and				
						stationery, &c		20	19	3	
						Insurance		7	15	0	
						Other expenses	•••	20	16	8	
Total	•••	•••	£1,720	6	2	Total	£1	,720	6	2	

Visited 19th January, 1898. The governing body of this hospital have had cause to regret they did not accept and act on the advice I gave at my last visit about reorganizing their staff. They have at last made up their minds to make an end of the old system, and I think Miss McCarthy will make an excellent matron if properly supported. The male assistant ought to be got rid of, and the "chamber of horrors," as the small lean-to ward is called, ought either to be pulled down or properly cleaned and ventilated.

ROTORUA SANATORIUM.

Expenditure	FOR TH	ie Year i	ENDED	31st March,	1898			
7) 11 1 1 00						£	8.	d.
Resident medical officer	•••	•••	• • •	• • •	•••	400	0	0
Matron	•••	•••	• • • •	•••	• • •	105	0	0
Bath attendants and serv	ants		• • •	•••	• • •	418	17	0
Rations	• • •	• • •	• • •	•••	• • •	249	11	3
Fuel and light	•••	• • • •		•••	• • •	66	14	11
Bedding, &c	• • •	• • • •	• • • •	•••	• • •	20	4	6
Surgery and dispensary	••	• • • •	• • •	• • • •	• • •	27	1	4
Wines, &c	• • •	•••	• • • •	***	• • •	0	19	0
Furniture and crockery	• • •	•••		•••	• • •	8	3	0
Miscellaneous	•••	•••	• • •	•••	• • •	32	17	0
					-	900		
Received for mainten			.]	1,329	8	0		
Received for mainten	•••	•••	• • • •	427	15	6		
					_	6001	10	
					2	£901	12	_6
Number of patients o			13					
Admitted during the		•••	• • •	79				
numitied during the	•••	•••	• • •	10				
Total u	nder tra	atment					92	
Dischaused			•••	•••	•••	80	<i>5</i> 4	
Dieg C	• • •	•••	•••	•••	• • •	00		
Died	•••	•••	•••	***	• • •	•••		
Remaining on 31st M		•••	•••		12			

Localities from which Patients came.—New Zealand, 77; Victoria, 1; West Australia, 1.

Country.—New Zealand, 23; England, 19; Scotland, 9; Ireland, 19; Australia, 2; Germany, 2; Isle of Man, 1; India, 1; Holland, 1; Italy, 1; Denmark, 1.

Total collective days' stay in sanatorium, 4,065; individual average days' stay, 44·18. Daily average cost per head, 6s. 6½d.; less patients' payments, 4s. 5d.

The Government have determined to appoint an expert in hydrotherapeutics to take charge of the organization of our thermal springs district. Pending this appointment the Government have contented themselves with carrying out the drainage system so essential for the future development of Rotorua. The other developments in contemplation it was felt ought to be carried out, under the guidance of an officer who had special knowledge of similar undertakings in other parts of the

The hospital building at Rotorua must necessarily form an integral part of any scheme that may be adopted for turning to account the marvellous resources of this district; so that before long we may expect to see the chaotic state of things which has hitherto prevailed, owing to divided responsibility, entirely superseded and replaced by an intelligible organization, for which one man shall be responsible. So far as the organization of the hospital itself is concerned, there is little to find fault with. The patients are comfortable and well attended to, and for the mattern, Miss Thompson, I have nothing but the highest praise. The bath-keepers also have fulfilled their duties, often very onerous, very creditably.

D. MACGREGOR, M.A., M.B., M.C., Inspector of Asylums and Hospitals.

Table showing Admissions, Discharges, &c., of Patients at Hospitals for Year ended 31st March, 1898.

Marceh 31, 1897, during Year. Treatment. All acceptable Marceh 31, 1897, during Year. Treatment. All acceptable	1,	F. Davs. Stay 10 574 36 1,880 25 44,132 432 44,132 481 27,786 7 2,767 6 1,331 444 36,688 8 1,750 24 1,970 24 1,970 24 1,970 24 36,588 8 1,970 24 36,488 18 0,23 11,374 52 12,055 12,055 13,385 38 3,385 38 3,385 38 3,385 38 3,385	7, Days' Stay. 16-00 19-38 22-00 22-00 22-00 25-11 25-11 25-15 26-66 29-06 29-06 28-26 28-26 28-26 28-26 28-26 28-26 28-26 28-36 38-36 38-	## A Parient	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Attendances. 5, 276 7, 157 7, 157 7, 160 443 55 6, 943 543 55 6, 943 543 543 55 6, 943 7, 2, 037 7, 2, 037 7, 60
wm 10 87 96 94 2 96 96 96 96 96 96 97 96 96 97 96 96 97 96 96 97 96 96 97 96 97 96 97 96 97 96 97 97 96 97 97 96 97 </th <th>1,</th> <th></th> <th>16-00 19-38 19-38 20-60 20-97</th> <th>8.111.7.7.4.4.4.7.8.00.0.0.2.2.8.7.7.7.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0</th> <th></th> <th>5,276 4,160 4,160 4,160 6,943 5,931 2,037 2,037 </th>	1,		16-00 19-38 19-38 20-60 20-97	8.111.7.7.4.4.4.7.8.00.0.0.2.2.8.7.7.7.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0		5,276 4,160 4,160 4,160 6,943 5,931 2,037 2,037
wm 1 35 36 36 34 2 20 con 112 188 170 175 18 170 m 28 164 192 175 8 12 170 m 28 164 192 175 18 19 170 numb 38 1,604 1,238 1,187 10 2 2 numb 38 1,064 1,137 16 2 2 2 numb 38 1,064 1,137 48 4 2 4 3 107 numb 38 1,064 1,137 48 4 2 4 2 4 3 4 4 3 4	Ť.		10-00 10	1 - で 4 4 で で 8 0 8 8 8 4 8 2 8 8 8 8 8 8 8 8 8 8 8 8 8 8		157 5,276 7,276 4,160 4,160 6,943 6,943 2,103 7,037 7,
ond 110 84 197 97	L	As and consider the second second second second second second second second second second second second second	25.50 26.60	షామా - చింద్రమాష్ట్రమంలల ప్రాణాష్ట్ర మాలు - మాలు br>- మాలు -	5,276 5,276 4,160 4,160 6,943 5,54 2,037 2,037 	
a 188 1,829 1,439 1,181 118 190 1,600 nm 5 1,229 1,439 1,181 118 19 1,000 nm 5 1,229 1,825 1,149 105 7 96 117 844 nn 10 7 96 1,825 1,149 105 7 117 844 100 7 46 46 117 844 100 7 46 46 99 683 106 99 693 100 99 693 106 99 693 106 <	<u>t</u>		28 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	**************************************		5,276 4,160 4,160 448 6,943 54 54 2,037 2,037
March Marc			25.00 26.00	a 4 & & & & & & & & & & & & & & & & & &		468 4,160 4,160 5,943 6,943 6,943 7.2 2,037 7.2 2,037 7.2 6,043 7.0 6,043 7.0 7.0 7.0 7.0 7.0 7.0 7.0 7.0 7.0 7.0
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10 totals 1 0.40 11 590 0 500 00.4 1 0.40 7 0.70 9 8.59	1 040	859 900 117	90:06	69.76	10 786	41 168

TABLE showing Receipts on Account of Hospitals during the Year ended 31st March, 1898.

Balance from Total Receipts.	## S. d. ## \$ S. d.
Other Sources.	d. £ s. d. £ 9 s. d. £ 0 s. d. £ 0 s. d. £ 0 s. d. f. 0 s. d. f. 0 f. f. 0 f. f. 118 f. f. 12 f. f. 13 f. f. 14 f. f. 15 f. f. 16 f. f. 17 f. f. 17 f. f. 17 f. f. 18 f. f. 19 f. f. 10 f. f. 11 f
Payments by Patients.	d. ## 8.5. 44 122 144 123 144 123 138 9 9 2,686 18 9 2,986 18 9 1,069 6 1,168 14 1,168 14 1,168 15 1,168
Rents, &c.	0 107 177 88 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Bequests.	\$50 4 1 350 4 1 350 4 1 35 0 35 0 35 0 35 0 35 0 35 0 36 0 36 0 37 0 38 0 39 0 30
Voluntary Contributions	## S. d.
From Hospital Boards and Local Authorities.	## 8. G. d. 152 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
From Government.	2. 8. d. 148 15 3 3 608 7 1 1 2 3 608 7 1 1 2 3 608 7 1 1 2 2 2 1 2 2 2 2 3 1 2 2 2 3 1 2 2 2 3 1 3 2 2 3 1 3 2 2 3 1 3 2 2 3 1 3 2 2 3 1 3 3 3 3
Hospitals	::;:::::::::::::::::::::::::::::::::::
:	
	Akaroa Arrowtown Ashburton Auckland Blenheim Charleston Christohurch Coromandel Coromwell Dunedin Dunstan Greymouth Hawera Hoktitika Invercargill Kumara Invercargill Kumara Invercargill Ryunara Invercargill Runara Invercargill Runara Invercargill Runara Invercargill Refton R

TABLE showing the Expenditure on Hospitals during the Year ended 31st March, 1898.

Total.	\$\$\frac{\partial_{1}}{7}\$ \$\$\frac{\partial_{2}}{7}\$ \$\$\partial_{	;
Other Expenses.	74. 8. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9.	7,747
For Commis- sion.	λ 8 8 15 11 12 13 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	20 21
For Insurance.	\$\frac{1}{2}\$ \text{S}\$ \t	+
For Interest.	\$\frac{\partial}{3}\$	70
Printing, Advertising, Postage, and Stationery.	8. S.	y .
Additions to Buildings, &c., and NewBuildings.	\$ 5,078 0.11 \$ 5,078 0.11 \$ 76 12 11 \$ 276 12 11 \$ 276 12 11 \$ 45 15 0 \$ 196 19 6 \$ 1,414 15 0 \$ 1,414 15	01
Repairs. B	\$ 5. d. 11	7 0 0 0
Funerals.	\$\frac{\psi}{2}\$ \$\frac	0
Water- supply.	\$\frac{\partial \text{2.5}}{11}\$ \$\frac{12}{12}\$ \$\frac{12}{12	2
Salaries and Wages.	2, 819 18 18 18 18 18 18 18 18 18 18 18 18 18	n
Washing and Laundry.	8. 8. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9.	C
Furniture, Crockery, &c.	\$\frac{\psi}{2}\$ S. d. £\$ \[\frac{22}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	o
Bedding and Clothing.	2	(-)- / /04
Fuel and B	8 13 15 15 15 15 15 15 15 15 15 15 15 15 15	4
Surgery and Dispensary.	8.8 S S S S S S S S S S S S S S S S S S	ה
Wine, Ale,	8	
Rations and Provisions.	1, 88 1	-
Hospitals.	Akaroa Akrowtown Ashburton Abuckland Blenheim Christchurch Coromandel Coromandel Coromandel Coromandel Coromandel Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Coromandel In Rawera In Rawe	

TABLE showing the Receipts and Expenditure of the under-mentioned Charitable Institutions during the Year ended 31st March, 1898.

					Receipts	pts.						Expenditure	re.			
District.	Balance from Last Year.	From Government.	From Rates.	Voluntary Con- tributions.	Bequests.	Payments by or on behalf of Persons relieved.	Rents, &c.	Other Sources.	Total.	Indoor Relief.	Outdoor Relief.	Total.	Children's Portion of Expenses.	Number of Children boarded out.	Total Cost of Children coarded out.	Average Weekly Cost of Children boarded
		æ 8.	. વક	£ s. d.	£ s. d.	£ s. d.	£ s. d.	si.	ý	si.	o,	ŝ	zź		ż	
orth of Auckland	171 12 2	961	1,187 11	٠. ۶	:		: ;	3 6 0	,410 0	21 8 0	035 9	17	68 4 0	ب م	46 16 0	5.443
ames and Coromandel	9	919 3		67 19 6	7 7 7		04 12 0	4 0		G 67	ا ان	185 4 954 8	7 =	2 4 0	24	
aikato	:	292 5	550 0	:	: :	13	· :	-	877 5		351 3	751 10	16	က	15	
ty of Plenty	50 6 4	191 0		21 19 0	:		0 0 9	:	14]			13		:	:	
ok	: 17:	523 10	406 0	:	:	c 1 c	:	•	934 12	0	18	708 18		က ပု	16	
ranaki	N :	-	,	32 9 TT	: :		:	•	3,703 13 1 1,828 13 8	870 9 10 557 18 9	1,904 18 3	2,775 8 1 1.749 2 6	191 4 2	7.7	124 18 4 170 6 6	0 c
tea and Wanganui	502 12 4	578 14 1	578 14 1		:	16	: :	: :	754 18	-		,373 17		10	o 0.1	
lmerston North	:	380	380 0		:	26 0 5	:	:	786 0	œ	12	Н		-	0	
ellington	3,904 7 9	5,992 17	5,430 8	611 11 3 2	2,750 0 0	19	:	946 11 2	,203 16	133	18	11	က	84	18	
cton	407 17 3	51 19 6	 43	: :	:	•	:	:		>		<u>က</u>	16 5 0		30 r.	
slson	13 1	1,035 10 1	1,005 12	75 7 3	5 0 0	121 5 8	: :	312 9 3	61		13	19	့ မ	 5	4	
ıller	199 4 2	323 2	205 2		:		:	· :	727 9	16		802 7	16	က	0	
angahua	 (200	200	101 15 1	:	4 10 0	-:	0 19 0	338 5	19	, ,	022 1	14	•	:	
ey estland	32 6 1	1,162 7 9	1,078 9 991 9	<u>-</u> -	O O R	:	:	:		733 8 8	547 16	S	17	9 8	79 5 0	O
Canterbury and Ashburton	n 785 11 1	7.972 12 7	6.526 13 9	898 7 1	$554\ 10\ 0$	198 13 6	46 6 0	105 16 7	140	2	, œ	761 8	2 12	0 6	7 1	
uth Canterbury	1,392 0 9	က	602 7)	:	10	836 6	533 8	235 8	768 16	4	65	φ	
orth Otago	œ	1,238 6	296	386 13 1	:	4	:	ıO	681 12	15	329 14	6 688	16	:	· :	
ago United		7,619 8	6,	15	:	206 4 10	682 9 6	13	212 9	,247 12	767 3	014 15	13	10	2	5 6
uthland		2,076	2,164 4 1	14 7 0	105 11 3	12 0 0	0	10	130 8	10	2,278 3 1	873 13	က	6	142 6 3	0 9
Totals	10,255 14 2	44,574 16 4	38,188 7 7	3,767 3 7	4,118 12 58	53,170 10 2	797 7 6 2	2,564 6 6	107,436 18 3	35,251 8 2	50,821 10 0	86,072 18 2	14,068 3 3	419 4,	4,475 12 11	:
						-				- Day	-			-	-	

* Also £437 4s. 8d. paid to Auckland Hospital and Charitable Aid Board for hospital treatment.

TABLE showing Number of Children for whom Maintenance is paid by Charitable Aid Boards, &c., at 31st March, 1897, and 31st March, 1898.

			Boarde	ed out		i	Paic n Insti	d for itution	ıs.		Totals		
<u></u>		31st March, 1897.	31st March, 1898.	Increase.	Decrease.	31st March, 1897.	31st March, 1898.	Increase.	Decrease.	31st March, 1897.	31st March, 1898.	Increase.	Decrease.
North of Auckland Auckland Coromandel and Thames Waikato Bay of Plenty Cook Hawke's Bay Taranaki Patea and Wanganui Palmerston North Wellington Charitable Aid Board Wellington Benevolent Trustees North Wairarapa Benevolent Soci Wairau Picton Nelson Buller Inangahua Grey Westland Ashburton and North Canterbury South Canterbury North Otago Otago United Otago Benevolent Institution Southland	ety	2 47 • 3 3 3 9 13 13 1 62 6 6 1 5 18 76 60 15 10 10	3 36 9 3 3 15 13 1 1 65 5 9 3 4 19 42 47 	1 6 6 3 1 1	11	2 39 19 2 3 6 7 19 3 2 2 31 5 10 444 8 61 46 21 218 16	2 38 26 4 3 15 6 105 14 2 1 31 4 8 42 6 69 5 22 203 14		1	4 86 22 5 3 12 13 19 8 184 4 2 42 8 10 49 26 137 106 21 233 26	5 74 35 7 3 18 13 16 7 189 2 1 40 7 8 46 25 111 52 22 213 26	1 13 2 6 5 1 1	12 3 1 2 1 2 2 3 1 26 54 20
Totals	•••	361	300	19	80	659	620	35	74	1,020	920	28	128

In pursuance of the plan carried out for the last two years, in order to obtain statistics as to outdoor relief in New Zealand, the department again issued the following forms to sixteen local bodies, with a request that the figures be given. Out of this number six have returned the forms filled in, including Auckland, Christchurch, and Wellington. The Dunedin Benevolent Society, a separate institution disbursing over £6,000 per annum on outdoor relief, is again unable to supply the information required.

TABLE I.—CAUSES OF POVERTY (CHIEF CAUSES, NOT TRIBUTARY CAUSES).

Lack of Employment.	Sickness.	Accident.	Insanity of Bread-winner.	Imprisonment of Bread-winner.	Desertion of Bread-winner.	No Male Support.	Intemperance.	Shiftlessness.	Physical Defects.	Old Age.	Causes undetermined.	Transportation.	Total Number of Cases, Year ending 31st March, 1897.	Total Number of Cases, Year ending 31st March, 1898.
 113 159 75 1 3 129		5 12 11 10	_	29 11 4 	38	290 132 134 6 11 63	27 20 12 1 20	 7 7 2	37 33	397 73 226 101 62 69	9 1 52 	47	1,548 779 756 108 73 400	1,515 688 730 117 82 393

TABLE II.—DECISIONS IN CASES OF APPLICANTS FOR RELIEF.

.	Continuous Relief.	Intermittent Relief.	Temporary Relief.	Work rather than Relief.	Indoor Relief.	Outdoor Relief.	Transportation.	No Relief.	Total, Year ending 31st March, 1897.
Auckland Charitable Aid Board Wellington Benevolent Trust North Canterbury and Ashburton Charitable Aid Board*	448 117 55	70	501 	36	192 	1,179 496 		83	1,515 1,538
Greymouth Benevolent Society Hokitika Benevolent Society Waipawa and Hawke's Bay Charitable Aid Board	45	18	19		 137	256	 44		82 713

^{*} North Canterbury and Ashburton Charitable Aid Board is unable to fill in this return.

Table III.—Number of Rations issued, etc., Year ending 31st March, 1898.

,	er of Rations ed, 1897.	er of Rations ed, 1898.	given i	ount n Casl 97.	n,	Ame given i 189		sh,	otal Number relieved, 1897.	Number re-	Remarks.
	Number issued,	Number of issued,							Total lieve	Total Ni lieved,	
Auckland Charitable Aid Board	279,706	199,141	£ 1,224		d. 6	£ 2,004	s. 0	d. 8	1,548	1,468	
Wellington Benevolent Trust	182,378	164,962	3,128	4	9	2,742	0	8	2,578	1,661	
North Canterbury and Ashburton Charitable Aid Board	263,399	244,767	3,377	13	2	3,342	1	3	2,468	2,158	
Greymouth Benevolent Society				•••		•	••	İ	•••	•••	Relief given by orders on store-
Hokitika Benevolent Society	•••	····	169	11	0	173	11	6	73	82	orders on store- keepers to value
Waipawa and Hawke's Bay Charitable Aid Board	74,735	82,427	111	6 1	.0	149	5	4	400	393	of £450.

Description of Daily Ration.

Auckland.—Bread, 1 lb.; tea, ½ oz.; sugar, 3 oz.; rice, 2 oz.; oatmeal, 2 oz.; to the sick and to persons over sixty years, ½ lb. meat. Value, from 2¼d. to 3¼d.

Wellington.—Bread, 1 lb.; tea, ½ oz.; sugar, 1½ oz.; potatoes, 1 lb; meat, 8 oz. Value, 2½d.

Christchurch.—Meat; also choice of groceries given out at Board's offices, including bread, potatoes, oatmeal, tea, sugar, rice, candles, soap, matches, flour, treacle, &c., to the value of 3 16d.

Waipawa and Hawke's Bay.—Bread, 12 oz.; tea, $\frac{1}{2}$ oz.; sugar, $2\frac{1}{4}$ oz.; potatoes, 1 lb.; meat, 12 oz. Value, $3\frac{3}{4}$ d.

[†] Transportation.

[These Tables are compiled in the Registrab.General's Office.] DISEASES AND DEATHS IN HOSPITALS.

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