

establishment of the Health Department darkly hinted at, till the unfortunate Health officials almost came to be suspected of letting loose germs of disease "to justify their continuance," to quote the words of a speaker at one of these meetings. The fact that this same Board had but a few months before urged the Department to redouble their efforts to make the local authorities assume the responsibility for care of infectious cases was now overlooked; also the question whether the administration by the Board had been so very successful, considering the record of sickness among the nursing-staff and in the surgical wards. Much was made of the fact that to treat cases at Point Chevalier would cost more than at the Hospital, and certainly this would be the case if it had to be run as a separate institution by the Health Department, which will happen if the Board carry out their intention not to undertake the management. But it may be questioned whether, were such an arrangement to be made and the Infectious Diseases Hospital run on these lines, there would even then be such an enormous expenditure as the Board found necessary to debit against infectious disease. The report of the Finance Committee read at a meeting on the 11th February places the increased expenditure for the nine months, 1st April to 31st December, at £3,766, of which £3,000 was due to infectious diseases, and the remainder to increase in ordinary expenditure. It would certainly be possible to run a very large and elaborate establishment at £4,000 a year. But doubtless much of this amount was consumed in replacing the members of the staff who were sick, and in dealing with pneumonia cases among the troopers, and in other expenses not generally found in the accounts of a well-managed infectious-disease hospital.

Considering this great expenditure it is perhaps scarcely fair to accuse the Board of want of consideration for the pockets of the ratepayers when they finally decided early in February to close their doors against infectious cases, more especially as they had taken such a kindly interest in the economics of the Point Chevalier scheme. The reason given for this step was that on the strength of the assistance promised on the 9th January the Board had spent £450, and was not now in a position to carry on the work, their credit at the bank having been stopped. At a meeting on the 3rd February a resolution was passed that "unless Government supplied the funds within eight days they would be reluctantly compelled to close the Infectious Disease Hospital from want of funds." And, since the funds were not forthcoming at this peremptory mandate, the hospital was closed. It is difficult to accept the plea of lack of funds as sincere, for, although the bank credit was overdrawn, there was no effort made to raise money in other directions, and it would be absurd to believe that the Board could not get credit, especially as a gentleman voluntarily offered the needful money at bank rate of interest. Nor could the Board honestly pretend that the demand for an advance of funds was made on an ordinary business footing. Some further assurance was needed that the informal deputation's proposal had been confirmed, since it was known that the special meeting called for that purpose had failed for lack of a quorum, while no notice was sent that any subsequent meeting had supplied the deficiency. No vouchers were sent to support the claim. Indeed, these were not forthcoming till a month after the Department had finally taken over the building and furniture, and even then were found to be so inaccurate as to necessitate careful revision. However, on the 16th February Dr. Mason attended a meeting of the Board, when the plague-building, with its furniture, was formally handed over to the Department on behalf of the local bodies, cost price being paid for furnishing and tents obtained since the deputation to Sir Joseph Ward in January. The Board, it must be said, were disposed to assist the Department in the matter, and agreed to attend to food-supply and cooking at a general daily charge of 2s. per head, and, further, gave permission for the use of the telephone and gave us right of access through their grounds.

This, then, is the present position: The Hospital Board have, with many protestations as to their anxiety for the interests of the ratepayer, forced the Health Department to treat, on behalf of the local bodies, infectious diseases at a cost naturally double what it would have been had the Hospital staff been available. The unfortunate local bodies have now to meet the salary of a medical attendant, outside nurses engaged at the usual rates, while small repairs, which formerly the Hospital engineer could attend to, now require to be paid for. In the original agreement the Board were to supply nurses from the general staff, the local bodies paying their wages. This assistance was withdrawn, however, after a few weeks. Every effort is being made to keep the expense as low as possible; thus no case is admitted until the Health Department is satisfied that there is no possibility of treatment at home without danger to the public or the patient himself. It also must be recorded that Dr. Woodward, medical officer in charge, has volunteered to attend the Hospital in an honorary capacity whenever the work is so light as to permit of this without serious injury to her private practice—a generous action which has so far received no word of recognition from the local authorities who benefit.

The Department is attempting to make the expenses fall chiefly on the districts from which the cases are being sent. To this end, a charge of three guineas per week is made for each patient against the local body concerned, but half of which is subscribed by Government subsidy. This, with an average of five patients, will not cover the cost of running the establishment. It is evident that twice this number could be treated by the same staff, the only increase in cost being the small items for foods and drugs.

Cases have been under treatment since the Department took the matter in hand till the 31st March, of which twelve were scarlet fever and four diphtheria. As regards measles, rather a peculiar state of affairs exists. Not now being on the schedule of infectious diseases in the Health Act, measles cannot be treated by the Department and charged to the local bodies, while the Hospital Board refuse to accommodate them. In this way some trouble was occasioned by the case of an infant suffering from pneumonia following measles. It was brought to the General Hospital, and refused admission. On visiting the case I found it to be in a serious condition, and I personally approached the Board on the subject, explaining the difficulties, and offering accommodation in one