

opinion of the meeting the temporary Plague Hospital in the Domain ought to be removed, and that the Health Department be requested to undertake forthwith the erection of a hospital for infectious disease for the district hospital area, the site to be selected by the Chief Health Officer and a sub-committee of those present; that the proposed plans be submitted for the consideration of such sub-committee; and that the same sub-committee prepare a scheme as a basis of agreement for allocating the cost between the contributing bodies; and that this resolution be submitted to the respective local bodies. (4.) Appointing as the sub-committee the Mayors of Auckland, Grey Lynn, and Parnell, the Chairman of One-tree Hill Road Board, and a member of the Waitemata County Council. It was suggested that resolution 3 might mean delay, but the mover, Mr. H. C. Campbell, the Mayor of Parnell, explained that it was not intended that such a delay should occur, but that the sub-committee might act at once. The motion was then unanimously carried, and the Chairman, Mr. Kidd, Mayor of Auckland, remarked that the delegates might inform the bodies they represented that, although the resolution was submitted to them, immediate action would be taken. To this there was no demur; and later, when, all in accordance with resolution 3, copies of the proceedings were submitted to the various bodies, but two or three signed them as approved without any reservation.

In the face of such resolutions, and such apparent unanimity of opinion, it might be thought that the Department were justified in proceeding confidently with the selection of a site and the assessment of the rates, and it is somewhat surprising to find the local bodies nine months later repudiating the whole business, and giving as an excuse for the non-payment of their rates that they were being treated in a tyrannous manner by irresponsible Government officials. No time was lost in getting to work—a sub-committee meeting was held immediately after the general meeting, and the site at Point Chevalier selected. A few days previously Dr. Mason had inspected the various available positions, and had no difficulty in picking this as the best then available, and the sub-committee were unanimous in their approval. The last of the copies of the resolutions was posted to the local bodies by the 30th April; and the plans and specifications of the proposed hospital were in the hands of the sub-committee by the 18th June, by which time the approval of this scheme by all the local bodies had been obtained, most signing without question. Those who did ask questions were apparently satisfied with the replies, for they also assented. To those who seemed inclined to demur I pointed out that under section 38, subsection (10), it was possible to appeal to the Stipendiary Magistrate to settle the question, but advised them to avoid this course by coming to an amicable agreement. By the 5th June all but five small bodies had signified their assent, and to these remaining ones I sent a further letter asking them to decide by the 10th June whether they wished to appeal to the Magistrate or not. This had the effect I desired, and all finally assented—two or three, however, indorsing the document as signed “under protest.” It is impossible in the light of subsequent events to avoid wishing that the other bodies had made so firm a stand in the matter, when we should have known better how we were placed. To sign without question and later refuse to fulfil the agreement was to mislead, while the unconcealed opposition to the scheme shown by these few small bodies was the honest course, and therefore preferable.

That Point Chevalier had been selected as the site was not made public until it appeared in the *Gazette*, dated the 23rd July. About a week later it appeared in the Auckland papers, and no unfavourable comments were made.

Several meetings of the sub-committee over the plans were held, and on the 17th September Dr. Mason met the committee, and the final arrangements were made—i.e., the total amount to be expended was fixed at £8,500; the plans were modified so as to keep within this sum and meet present requirements. The rating was to be on the same basis as the Hospital and Charitable Aid Board Rate, and the City Council was asked to be the executive body. This question was discussed at a meeting of the City Council on the 18th September, when they consented to act as executive and call for tenders. They further agreed to pay their share of the rate.

On the 22nd September circulars were posted to all local bodies giving the amount for which they were assessed, and asking that the moneys be paid to the Auckland City Council as executive body. In response to this, a few local bodies actually paid a part of their share, others wrote asking for time; but the majority seemed inclined to merely shelve the matter. Accordingly, on the 21st October, at my request, the Crown Solicitor sent out a circular to the bodies urging that payment should be made, and, in order to grant time to those in financial difficulties, it was suggested that the payments be in two instalments—one on the 15th November, 1902, and the next on the 18th February, 1903. There was some response to this letter, but over half the bodies continued to ignore their agreement, some on the ground of poverty, most without giving any reason. They merely did not want to pay; and the end of the year found us without the necessary amount to start the work, while the Government could not advance the money, it only being possible to subsidise the subscriptions pound for pound. The total did not warrant the City Council in calling for tenders as agreed.

Meanwhile the Hospital Board were at last brought face to face with the fact that they had been totally unprepared for an epidemic of infectious disease. The observation ward, agreed on at the meeting of the 23rd April, had never been erected, and nothing had been done in the way of tents, &c., to increase the accommodation pending the completion of the Point Chevalier scheme. As early as May, 1902, the nursing staff were beginning to suffer from the lack of accommodation, and in June, July, and August cases of infectious disease—scarlet fever and diphtheria—appeared amongst them, and again in November and December, till nineteen cases had been so notified during the year. Others suffering from influenza, &c., brought the total to thirty-three nurses off