

ing circumstances. I need not reiterate the reasons for these precautions, they are to be found in the reports of my colleagues in the Department during the past years. At Waihi and Paeroa Schools septic tanks with subsurface-filtration and subsoil-irrigation systems have been installed by Mr. Mitchell, architect to the Education Board. Some suggestions from this Department were accepted in these installations. The results are agreeably satisfactory. It is my intention to report at length next year on the modes of disposal of sewage in the Auckland Health District.

LAW POINTS.

The reader of section 53 of "The Public Health Act, 1900," could not but be impressed with the powers of the District Health Officer when these words catch his eye: "shall, when the District Health Officer so recommends." Unfortunately, the section loses all its value from the administrative point of view, because there is no actual power given to any one to compel the local authority concerned to carry out what the District Health Officer may have recommended, however reasonable or sound that recommendation may have been. The section as it stands is therefore worthless, and, when it suits a local authority's mood, it is possible for it to use the section *aut tempores aut mores*. We have these concrete instances. For rubbish-disposal in Auckland City a destructor has long been recommended—four years have passed and it is not yet in use. When the Mechanics' Bay nuisance was at its worst the City Council declined to "shall" when recommended to take the material out to sea, while at the same time and almost in the same breath, some Councillors desired to shift the responsibility by plaintively pleading they were compelled to go to Mechanics' Bay because the District Health Officer had recommended that site. In this connection I have referred above to the watering of streets with sea-water.

It seems to me that to make this section satisfactory to all concerned something in the nature of the Local Government Board inquiry of the Old Country is needed. Out here a Magisterial inquiry might be held after a certain time had elapsed from the date of the District Health Officer's recommendation; at such inquiry evidence might be produced on both sides to show why the work recommended shall be carried out, or, to the contrary, as the case may be.

"Removing nightsoil" has been declared to be an offensive trade. It is difficult to ascertain how much of the ordinary nightsoil-removal service is comprised in the term "removing nightsoil."

The Newmarket Borough Council did not obtain a poll of ratepayers for the extension of their drainage scheme. They received the recommendation of the District Health Officer and the approval of the Hon. the Minister under section 66 *et seq.* of the Public Health Act, and then proceeded to obtain the necessary money under the Loans to Local Bodies Act; the loan was declined. Acting on the advice of their solicitors they decided to borrow the money from a source outside Government circles. Though the section of the Act allows of this construction, I do not think it is generally known that the money may be so obtained.

HO PITALS FOR INFECTIOUS DISEASES.

Reporting to the Auckland Hospital and Charitable Aid Board under date 4th July, 1904, I stated that I had found that diphtheria and scarlet-fever cases were being nursed in the one building and by the same nurses. The Board readily complied with my request for separate accommodation, as a result of which a temporary diphtheria ward, containing six beds, was erected. In terms of a resolution of the City Council, 21st July, 1904, granting permission for the use of the Domain site for a period not exceeding two years, the Board promised the City Council that within that time the Hospital buildings would be removed off the Domain.

The position as regards future proceedings is best put in the form of the summary which I submitted to the Hospital and Charitable Aid Board on the 24th October, 1904: "That the accommodation for scarlet fever and diphtheria on the Domain is temporary, and must be removed within two years. That at least as much provision as now exists—viz., twelve beds—be within that time made for scarlet fever at Point Chevalier Hospital, because there is no available space on the real Hospital grounds. That, as soon as Point Chevalier is quite ready, no plague suspects will be treated in the existing "plague observation cottage" on the Hospital grounds. That, when the "plague observation cottage" shall have been released, this cottage will be altered so as to take cases of diphtheria. That, provision having thus been made for scarlet fever and diphtheria, the buildings on the Domain will cease to be occupied, and thus the City Council may see their hopes realised by the immediate disappearance of these buildings. That the existing provision for plague at Point Chevalier must be extended so as to be ready to withstand a possible small-pox outbreak—technically, such a provision will be termed that for dangerous infectious disease. That adequate and proper provision must be made for two classes of consumptives—(a) those who are awaiting their turn for admission to Cambridge Sanatorium; (b) those for whom the Sanatorium treatment unhappily will not avail."

The next step is that the Hospital Board will put before Parliament this year a short Bill enabling them to borrow a sum of £25,000, on the security of the Hospital endowments, for the purposes, *inter alia*, of building, and the better equipment of their hospitals.

I offered to deliver a public lecture on the "Need for the more Equitable Treatment of Consumptives in the Auckland Health District." The Chairman of the Board, Mr. McLeod, however, informed me that he believed sufficient money would be obtainable under the new Act, rendering a direct appeal to the public unnecessary.

In progressing Waihi, accommodation for infectious diseases and consumptives is absolutely necessary. The local Board of Trustees are negotiating for a site.

The country hospitals in the district need ample provision for the consumptive, but I do not hope for any satisfactory effort being made until Auckland and suburbs are fully provided for. These hospitals look with suspicion upon any recommendation to build annexes, they fear that Auckland may propose to get rid of her cases by sending them to such country hospitals, where accommodation may be provided. This objection will disappear when the proposed buildings at Point Chevalier are completed and occupied.