does not cease when the pensioner is in an Old People's Home, and charitable-aid authorities, half of whose income is Government subsidy, obviously profit. There appears to be no sound reason why the pension should cease at a time of misfortune, and we contend that it should be paid to this Department for the pensioner's maintenance. I would also respectfully submit that persons already in receipt of charitable aid should not cease to be a charge on the local bodies when sent to a mental hospital. They should be paid for at a fixed minimum. Powers of visitation, as suggested in the case of the feeble-minded, would naturally be conceded to the charitable-aid authorities.

The details of last year's expenditure are given in Table XXI.

The following table gives the gross and net cost per patient for the year 1906, as compared with the previous year:—

<i>i</i>	19	06.	196	05.	1906.	1906.	
Asylum.	Total Cost per Patient.	Total Cost per Patient, less Receipts for Maintenance, Sales of Pro- duce, &c.	Total Cost per Patient.	Total Cost per Patient, less Receipts for Maintenance, Sales of Pro- duce, &c.	Increase.	Decrease.	
Auckland Christchurch Seacliff Hokitika Nelson Porirua Wellington	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	£ s. d. 28 19 8½ 33 11 11 40 1 1½ 26 1 9½ 35 13 11 31 6 8½ 38 8 1½	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	£ s. d. 0 14 10½ 0 14 8½	£ s. d. 1 19 11½ 3 6 7½ 1 14 6¾ 0 4 6½ 2 6 3½	
Averages	33 19 11/4	$25 5 8\frac{3}{4}$	33 16 8 1	26 12 71	•••	1 6 101	

Including Head Office salaries and expenses (£2,651 12s. 4d.) and medical fees (£1,123 13s. 8d.), the net annual cost per patient is £26 10s. $6\frac{1}{4}$ d., as against £27 18s. $2\frac{1}{2}$ d. for 1905, a reduction of £1 7s. $8\frac{1}{4}$ d.

The following shows the annual cost (net) per patient at each quinquennial from 1876 to

906:-

Year.		Cost per Patient.		Year.		Cost per Patient.		Year.		Cost per Patient.				
1876 1881 1886		£ 46 25 27	s. 1 18 0	d. 5½ 4½ 9½	1891 1896		£ 20 22	s. 16 9	d. 2½ 10½	1901 1906	•••	£ 21 26	17 10	đ. 9½ 6¼

It will be noticed that there has been a considerable increase in cost since 1901. This is accounted for by an increased scale of salaries and extra leave (necessitating additions to the staff) which came into force in 1904, and by the large increase in the cost of many of the principal articles of food during the last few years.

When stating the cost per patient it must be remembered that interest on capital is omitted,

When stating the cost per patient it must be remembered that interest on capital is omitted, and no allowance is made for repairs, &c., charged to the Public Works Consolidated Fund. These are proper and legitimate charges against the cost of maintenance. The amount of such items can be judged by reference to Table XIX, and Table XVIII gives the Public Works expenditure for last year.

Making these allowances, the approximate full cost per patient per annum may be thus stated:—

					đ.			
Gross cost in mental hospitals (av	verage)					33	19	$1\frac{1}{4}$
Head office expenses				17				
Fees for medical certificates	• • •	• • •	• • •	7	$4\frac{1}{2}$	4		ω1
			1.			1	4	$9\frac{1}{2}$
Interest (averaged at 4 per cent ture from July, 1877, to 31 Interest (averaged at 4½ per	st March, 19 cent.) on th	07 e approx	imate			7	2	4
value of buildings, &c., ta	ken over 1re					0	16	14
Total						£4	3 2	4

Though the dream of State mental hospitals supporting themselves with maintenance payments and profitable industries must for ever remain a dream, it is the policy of the Department to encourage all legitimate means of reducing the call upon the Consolidated Fund.