In my opinion the dietary errs on the side of excess of meat. A small addition of a mess-room for the attendants there employed and a scullery at the "upper building" is needed. I commented on this building in the last report; it is designated on the plans "temporary asylum," and was to have served its purpose when Seacliff was built. One does not willingly suggest alterations and additions to this place, but I do so because the building is likely to be continued in occupation for some years, and the addition will not be costly. The extension and alteration of the laundry is practically completed, and the new machinery is working. This will be a saving in cost, and an incalculable boon. To complete the facilities a larger area should be taken in for a drying-green, and paths should be made at intervals to allow of the washing being taken out and in comfortably when the ground is wet. The present phenomenal season is apt to make one forget such disabilities, but the sticky nature of the clay after wet weather in this locality is not easily forgotten. Considering the drought, the water-supply is happily sufficient, and the farm is looking better than I had anticipated. I inspected all parts of the institution and found everything in good order, as usual, and I received no complaints from the patients. I missed Mr. Newman, the chief plumber, who lately left after nearly twenty years of memorable service. As a man and as a tradesman he will be difficult to equal. His loss is keenly felt by the whole staff, and his exceptional gifts and capacity, his thorough and promptly executed work, will be a loss to the institution. Once more I have to express my pleasure in the well-being of this great establishment, and in the consistently good work done therein, of which Dr. King has just reason to be proud. I am happy to indorse his acknowledgment of Dr. Tizard's co-operation, and of the faithful labours of Miss Beswick and of the staff generally. The laboratory at Orokonui is nearly completed, and will give scope for scien

## HOKITIKA MENTAL HOSPITAL,

13th July, 1907.—I visited this Mental Hospital on the 12th and 13th instant. As the period is a convenient one for reviewing the statistics of the hospital, I shall deal with the changes from the 1st January to date:—

Number of patients resident, 1st January, 1907 Number of patients on probation, 1st January, 1907		Males. 123 4	Females. 37 2	Totals 160 6
Number of patients on register, 1st January	•••	133	40	${173}$
Discharged recovered          5         2           Discharged unrecovered          0         0           Died          2         0	Totals. 7 0 2			
Totals discharged and died — —		7	2	9
Number on register on 13th June, 1907 Number on probation on 13th June, 1907	•••	$\frac{126}{3}$	38 1	$\frac{-1}{164}$
Number resident on 13th June, 1907		$\frac{-}{123}$	37	160

Small numbers such as these are apt to produce statistical absurdities. It will be seen that the proportion of female recoveries on admissions is 200 per cent. The causes of death of the two men who died in the six months have no reference to institution life. The health of the patients is capably supervised. There is a staff of twelve attendants and four nurses directly associated with the patients. The actually effective ratio of attendants and nurses to patients is 1 to 12.3 in each case. Two attendants and two nurses have been over five years in the service. The following number of patients require special attention, for the reasons assigned:—

		•			Males.	$\mathbf{Females}$ .	Totals.
Liable to be wet and dirty					13	16	29
Actually wet and dirty	•••		• • •		6	6	12
Epileptics					5	4	9
Suicidal		• • •			1	1	<b>2</b>
Dangerous	•••		•••	• • •	3	4	7
		•			Males.	Females.	Totals.
The number of patients who	o do no	ot work (	being me	ntally	Males.	Females.	Totals.
		ot work (	being me	ntally 	Males.	Females.	Totals.
The number of patients who or physically unfit) is And those usefully employe			. •	•	_		
or physically unfit) is					32	17	49

Sixty-four patients (males 52, females 12) are able to take part in the regular entertainments. The institution is run on homely lines. The patients look well cared-for, and the general health is good. The food was tasted, and found to be wholesome and abundant. I went over, with Mr. Downey, the alterations necessary to accommodate extra patients to relieve the accommodation in the Wellington District, which the high admission-rate last year has taxed. We found that the accommodation could be greatly increased and improved by remodelling the cottage (bought three years ago) on the boundary of the estate, and by extension of the dormitory at the convalescent cottage. Mr. Downey's estimate for the work is £100. Some improvements have been carried out on the estate—notably the approach from the north-east, where the road has been well graded and made practicable. My visit coincided with the stocktaking, which was being carried out very thoroughly. The statutory books are neatly and correctly kept, and the general impression left by the visit is satisfactory.