HOSPITALS AND CHARITABLE AID.

In the previous reports of the Department the tables were confined to the receipts and expenditure of institutions under the control of Boards. In this report the expenditure on all institutions is shown—including those institutions under the entire control of the Department, such as the maternity hospitals and the Cambridge Sanatorium. By this means the total expenditure of the Dominion in relieving sickness and distress is better shown.

Receipts.

Though the receipts, as shown by Table I, subjoined, have increased by some £50,000, the levies on local authorities have only increased by £2,513. This should be satisfactory to the ratepayers, especially when the enlargement of our hospital machine is taken into consideration. particularly with regard to public health, district nursing, &c., and the increase by some £20,000 in expenditure on new buildings. One-third of the increase of, roughly, £15,000 in subsidies from the Consolidated Fund is accounted for by the increase of £4,372 in voluntary contributions, which last year amounted to £35,433. The increase of £5,174 in payments by persons relieved is satisfactory. From this source is now derived one-sixth of our total hospital expenditure.

Expenditure.

For the increase of £7,058 in maintenance expenditure of general hospitals can be shown that there were 130 more patients daily under treatment than was the case last year, the average number of patients occupying beds in the general hospitals in 1910 being 1,839, against 1,709 in 1909-10.

The increase by £7,068 in hospital maintenance is practically accounted for by the 130additional patients under daily treatment. In connection with this increased expenditure it is satisfactory to note that the cost of maintenance-exclusive of administration-per occupied bed (£96 19s.) is lower than the previous year (£100 7s.).

The following table shows the cost per occupied bed during the last four years, which has been

on a steadily decreasing scale :-

				Maintenance.			
				£	s.	\mathbf{d} .	
1907-8	 	 	 	128	18	0	
1908-9	 		 	107	6	()	
1909-10	 	 	 	100	7	Ü	
1910-11	 	 	 	96	19	0	

The above reduction in cost has been principally effected by the relatively smaller expenditure under the items "provisions" and "surgery and dispensary," concerning which I have so strongly commented in previous reports. The actual expenditure on the last-mentioned item during 1910-11 was less by £800 than during the previous year.

There is no doubt that many hospital authorities are making dogged efforts to prevent unnecessary expenditure or waste in the management of their institutions, and they have been very much stimulated by the adoption throughout the Dominion of the model system of hospital accounts, whereby hospital authorities are the better able to compare their expenditure under the various items.

An indication of the reduction in expenditure per bed of the general hospitals is shown in the accompanying tables, but further details can be gathered from Table IV in Appendix II:—

COST PER OCCUPIED BED.

1010 11

		1910-13.			1909-10.		
		£	s.	d.	£	s.	d.
Provisions	 	 22	15	1	23	14	7
Surgery and dispensary	 	 8	14	1	9	16	8
Domestic and establishment	 	 26	14	3	25	17	10
Salaries and wages	 	 38	15	9	40	17	11

The increase under the item "domestic and establishment" is largely due to renewal of

equipment in the wards—especially new beds and ward lockers.

That there would be a decrease in the cost per bed in "salaries and wages" was quite unexpected. As compared to hospitals in other districts, including hospitals in the Commonwealth, the relative cost per bed under this item is very large.

The number of employees considered necessary not only increases the cost per bed, but naturally increases the cost in buildings for their accommodation.

CAPITAL EXPENDITURE.

The increase by £11,601 in hospital capital expenditure is largely due to expenditure on new wards at the Christchurch and Wellington Hospitals, and the enlargement of the Nurses' Homes at Christchurch and Auckland.

On taking into consideration the condition of many of our country hospitals, we can look for no reduction in "capital expenditure" for many years to come; on the contrary, we should hope for an increase.

${\it Administration}.$

The increase by £3,152 in hospital and charitable administration was only to be expected—in fact, it was feared that the expenditure under this head would be even larger.

Many of the Boards now recognize that they are composed of too many members, and this fact not only militates against effective work, but increases the travelling-expenses, which in some