

The various main items of expenditure are detailed in Table XXI. They vary in different institutions according to the number of patients and local conditions. The Department recognizes that economies in food-supply and in little comforts which largely sum up the pleasures in the life of a mental hospital patient were not admissible, and the energies of our officers have been in saving waste and by keenness in buying to advantage whenever opportunity offered. An exceptional deal in any commodity at one institution has been circularized to others, permitting their participation.

Some years ago I advocated standardization throughout the Public Service of various things commonly used by many Departments, their purchase under the increased advantage of a larger and definite order, and their distribution by a special Stores Department, which would exercise itself to keep supplies in stock at the lowest level compatible with efficiency. The Department would be affiliated with the stores branches of certain Departments specializing in particular lines. The experience of the last few years has confirmed me in the opinion that a great advance could be made in simplification of methods, together with an all-round reduction of cost, both initial and supplemental, and an improvement in quality and suitability, if a properly organized Stores Department, knowing the requirements of the Public Service and fixing a common standard for each item, undertook its purchase or manufacture and distribution.

This statement will be more convincing if one take an example or two—say, cloth for uniforms. Uniforms are supplied annually in the Public Service, requiring some thousands of yards of cloth, and there must be a particular fabric which is the all-round best for the purpose. Where there are not good reasons advanced for making an exception this cloth should be adopted for all Public Service uniforms, the distinctions between one Department and another being in the make-up. Take another example—sanitary fittings. We have standardized these to some extent, and, though the supply of standard patterns of recent years has been interrupted, our experience has demonstrated the enormous advantage of replacing one article by a facsimile, both in regard to ease of requisitioning and the saving of time and labour of plumbing.

Not a little proud of buying well and eliminating waste it is amusing to reflect that such economies may recoil on one. It has been seriously advanced that, as we manage to provide for patients at an average cost of £65 per head for everything, we should not charge more than that sum, otherwise well-to-do patients are paying a special tax. The trustee or the person liable for the maintenance of a well-to-do patient should remember that an average cost of £65 per annum means an expenditure of two guineas a week or more on certain patients—those who need more medical and nursing attention, or who are more destructive, or otherwise require more supervision or care than the average, a class not confined to but including for the most part all recent admissions. The expenditure on the average patient will approximate the average cost as stated, while robust, clean patients, requiring little supervision, are obviously at the other extreme and cost less than the average. But, whatever the cost, and apart from the nature of the case, the rise and fall is largely governed by the numbers dealt with, and in no case could a patient be privately managed—given the same medical attention, food, clothing, recreation, &c.—for anything like the amount charged. The poorer patient, by his mere presence, is lessening the cost to the better-off, and there is no hardship or injustice in charging an amount which in some particular case may be in excess of the actual cost—an excess which, if it exist, would be applied to a reduction in the appropriation for the upkeep of mental hospitals.

Another fact which is often lost sight of is that the grounds, gardens, and general amenities of the institutions have been improved in the course of years, and that present-day patients are getting the great advantage of all this past work, an advantage which does not appear in the table of average cost, except to a fractional extent for annual upkeep. If any of our improved estates were capitalized at what would be their selling-value rather than at what was originally paid for them, a maximum charge of 6s. a day for maintenance, medical treatment, &c., of persons who were too troublesome or destructive, or what not, to be kept at home leaves little ground for complaint on the part of those in a position to pay the full amount. Of course, it need not be pointed out that there are some patients who are not paid for at all, and that all assessments are made strictly according to the means of the persons liable to contribute.

In 1918 the total amount collected for maintenance was £52,657, equal to £11 14s. 4½d. per head on the average number of patients and voluntary boarders resident.

You, Sir, have from time to time received letters from persons wishing to pay more adequately to have their relatives cared for in some special institution. We now have buildings at each of the larger institutions admirably suited for reception-houses which are centres of treatment, dealing with a maximum of twenty-five patients in a ward; but the request made was for something more exclusive—for something which would be more a home than a hospital—and as the desire expressed was backed by offers to pay five guineas a week or more you were impressed by the sincerity of your correspondents, and, acting on instructions, the Department considered, to begin with, the question of building near one of the centres, provided some land could be acquired, suitably laid out, and conveniently placed for visitation by our expert medical staff—a *sine qua non*. At this time our attention was drawn to a property near Hornby Station, which fulfilled our initial requirements, and permitted of extensions with a minimum of alteration. The house, which is well placed in regard to sun and light, stands in 50 acres of land—lawns, gardens, orchard, and grass paddocks—and is well sheltered from prevailing winds. The outlook is cheerful and extensive. Negotiations were entered into for purchase, and we hope to enter into possession in September next. Among the manifest advantages of this situation is the fact of its being on the road between Sunnyside and our farm property at Templeton, where it can be visited in the ordinary round of the Medical Superintendent of Sunnyside, though completely separated from that institution. It is not contemplated that male patients will be admitted to begin with.

Among other items reducing the cost of maintenance are our farming operations. The produce supplied from our farms for the use of patients, totalling in value £19,734, is not included in Table XXI under “provisions.” The actual cash receipts for sales of stock and produce (£10,588) and by-products (£3,526) totalled £14,114, and there were sundry other receipts. All these have been collected together in Table XXA in the appendix, and show a total of £69,195.

A statement of farm expenditure and receipts will be found on pages 6 and 7.