

British Medical Research Committee, who would report on public-health matters and research work to the New Zealand Government. The view was also expressed that in addition to advising the New Zealand Government on all matters relating to the control of disease such a representative might act as Commissioner for New Zealand hospitals. If given effect to this plan would, we recognize, be of material advantage to the Health Department in New Zealand, and we recommend the suggestion to the Government for consideration.

ADMINISTRATION OF HEALTH DEPARTMENT IN RELATION TO PUBLIC HEALTH GENERALLY.

The administration of the Department in relation to public health generally rests upon the state of the law, and the general plan upon which the Department exists and operates, on both of which subjects we submit some recommendations. There has been no evidence presented which indicates neglect in the administration of any officers of the Department. The defects manifested are grounded in the Department being understaffed, the time of Medical Officers being taken up in administrative duties for which they have no special qualification, whilst debarred from the proper studies of their profession, and the powers and duties of Chief Sanitary Inspectors being ill defined.

PUBLIC-HEALTH LAW.

To rightly consider the question of administration, both local and general, referred to in clause (4) of the Commission's order of reference—viz., "The administration of the Public Health Department and the local authorities with regard to their responsibilities in relation to the epidemic, and generally in regard to public health"—it is necessary first of all to examine the character and provision of the law that has to be administered. The New Zealand statutes relating to public health, like those of England, have undergone considerable changes during the last thirty years, and are still subject to very frequent revision and amendment. From evidence taken the Commission is strongly of opinion that many of the defects in the existing law are due to hasty and ill-considered action on the part of our Legislature, and, considering the manifold evils which result from defective public-health legislation, we counsel that all future amendments of the law shall be entered upon and dealt with in a comprehensive manner, and with full regard to the present state of science relating to matters of public health. The general scheme of English public-health law, which rests mainly on the Public Health Act, 1875, establishes two authorities of public health within the Kingdom—viz., the general authority represented by the Local Government Board, and the district authority represented by the local authority (urban and rural). It is only this last year that there has been brought forward in England a Bill to establish a Ministry of Public Health.

The English Ministries of Health Bill, 1918, is of interest to us in that it provides for the setting-up of "Consultative Councils," with functions similar to those of the "Board of Health" and "District Advisory Committees" established by the Public Health Amendment Act, 1918, of New Zealand. The English Bill requires that the Consultative Councils shall be composed of "persons of both sexes," which principle might with benefit be applied in our Dominion. In New Zealand a Ministry and Department of Public Health was constituted by the Public Health Act, 1900. The charter of public health in New Zealand is mainly contained in the Public Health Act, 1908, which is a consolidation of the Public Health Acts from 1900 till 1908. Whilst there is only one Public Health Act, with three short amending Acts, we find that the Public Health Department in its administration has to keep track of provisions existing in at least fifteen other Acts. Here is a list of Acts which the Department has to administer: Hospital and Charitable Institutions Act, Public Health Act, Sale of Food and Drugs Act, Plumbers Registration Act, Midwives Act, Nurses Registration Act, Immigration Restriction Act, Social Hygiene Act, Medical Practitioners Act, Poisons Act, Quackery Prevention Act, Destitute Persons Act, Pharmacy Act, and Dentists Act. In addition to these