

GENERAL SCHEME OF HEALTH ADMINISTRATION FOR LOCAL AUTHORITIES.

A considerable amount of evidence was presented to the Commission bearing upon the question of what should be the position, powers, and responsibilities of local bodies, such as City Councils, Hospital Boards, and others, in a general scheme of public-health administration. Representatives of the City Councils and Hospital Boards at Auckland, Wellington, Christchurch, and Dunedin dealt more or less with this issue. From the representations made we find there are four distinct views of this matter, each of which may be upheld upon certain grounds of public policy. The four views submitted are the following :—

- (1.) That all health matters should be placed under the control of the Health Department, which should direct the local authorities as to the steps to be taken by them for the preservation of public health.
- (2.) That the City Councils should be vested with full power and responsibility, apart from the care of hospital and charitable institutions, in respect to the preservation of public health within their respective districts.
- (3.) That the Hospital and Charitable Aid Boards should be constituted Boards of Health, and have general control of all health matters within their respective districts.
- (4.) That local Boards of Health should be appointed, consisting of representatives from the City Councils, Hospital Boards, and other local bodies concerned in matters of public health.

The first of these views is upheld from the standpoint of public health being a matter that affects the whole people of the country; that there should be centralized control and direction, as the neglect of any local body may seriously injure other than its own ratepayers or citizens.

The second view is based partly on the local right of self-government exercised by municipalities, and also upheld on the ground that the large Corporations possess the means for carrying out inspections, sanitary works, and general administration affecting public health.

The third plan is presented from the viewpoint that the Hospital Boards are already dealing with matters of public health, and in addition to the management of health institutions the Boards are now charged with duties affecting the public health generally.

The fourth view was pressed very strongly by witnesses having a long experience of local-government affairs. It was urged that the creation of local Boards of Health would give more direct attention to health matters, and secure more independent and expeditious administration. Witnesses in Dunedin advocated giving such Boards distinct rating-powers.

This subject is an exceedingly difficult one, for the reason that from time to time precedents have been established in the way of vesting all these various authorities with some particular powers relating to public health, but no one authority has ever been charged with the full responsibility for the care of public health within their district.

The Commission is strongly of opinion that the existence of several authorities dealing with general health matters in these urban districts is very undesirable, as its effect is to divide responsibility, create delay, and in some instances produce actual neglect. We are not disposed to advise a change which would entail the creation of another local body. We urge that what is really required is to give definiteness in the matter of which authority shall be held responsible for the exercise of defined powers and the fulfilment of specific duties.

After full consideration the plan which we have to recommend is as follows :—

- (1.) In respect to the cities and larger towns of the Dominion, the districts comprising these boroughs, together with the town districts and small boroughs adjoining, to be constituted sub-health districts.
- (2.) That the chief borough in each such combined district be the controlling authority.