

questionable whether the average could not be reduced to even less than twenty without any detriment to the patients.

Hospital Board Accounts.—Owing to the pressure of work entailed by the Department assuming control of various hospitals previously administered by the Defence Department, neither the Inspecting Accountant nor the Inspecting House Manager have been able to visit all the Boards during the past year, but much good has notwithstanding resulted from the appointment of both these officers.

It is satisfactory to note that the annual returns and balance-sheets are now being presented in a much better condition than in the past, in many cases leaving nothing to be desired. In this connection the helpful co-operation of the Audit Department and its Inspectors cannot be overlooked. There is little doubt that in many cases an enthusiastic auditor can do and has done much to assist a Board's secretary in the intricacies of hospital accountancy. At the commencement of the year an Order in Council was issued revising the regulations for the keeping of hospital accounts, and this has been circulated for the information of Board officials.

Institutional Inspection.—The field of activities covered by the Inspecting House Manager's duties was practically a virgin one, and much has been accomplished in both efficiency and economy thereon. Much, however, remains to be done, but during the year several Boards have seen the wisdom of appointing qualified house managers to their institutions.

Accounting for Stores and Equipment.—In the majority of institutions visited during the year the inadequate control exercised over the custody and accounting for stores equipment was apparent. Elaborate systems are not expected or desirable, but the simple elements of recording receipts and issues and periodical checking are expected and desirable, for obvious reasons. The total sum sunk in equipment of a stationary nature in the hospitals of the Dominion amounts to over £375,000, and purchases of supplies and equipment during last year amounted to over £400,000. The accounting for such items should be attended to with the same regard as is given to receipts and issues of pounds shillings and pence.

Purchase of Supplies.—Wide discrepancies have been noted in the prices paid for standard lines in contiguous localities throughout New Zealand. In many cases this is mainly due to the purchase of articles from retailers in small quantities instead of in bulk in the wholesale market.

Constructional Economies.—The appointment of the Technical Inspectors has effected a large saving to the Department through the checking of plans and specifications sent in by the Hospital Boards. A further advantage in the interests of smaller Boards has been obtained by the preparation of plans and specifications for such of these as cannot secure the services of an architect who had specialized in hospital-construction. Also, more efficient building and engineering services have resulted from the checking of plans forwarded for the Department's approval.

Engineering.—As I write I have before me the reports of the Consulting Engineer to this Department. Only too vividly they portray the necessity, certainly for our larger hospitals, of obtaining competent engineers instead of leaving engineering matters in the hands of architects or persons not qualified to speak on the subject. Commenting on the unsatisfactory state of affairs in this respect the Consulting Engineer states:—

"The engineer's department in a modern hospital must be recognized to be a fairly important one; steam and electricity are indispensable to provide the various services required, and much depends on the efficiency of this department in the successful administration of the hospital in all its branches. It is therefore essential that the engineer in charge should have the necessary experience and qualifications if his department is to provide efficiently and economically the services for which he is responsible. The credentials of applicants for these positions should therefore be carefully scrutinized, and expert advice, when making appointments, taken full advantage of. The same argument applies even to a greater extent where Hospital Boards employ consulting engineers, as the scope of the consultant is much more extensive than that of the resident engineer of the hospital, and an incompetent consultant can very soon lead Hospital Boards into difficulties from which it will be a costly business to extricate themselves. This has been my actual experience—viz., Napier, Auckland, and Wanganui."

With these few remarks I am putting the matter in the very mildest form.

SECTION 3.—PROPAGANDA.

Much useful propaganda-work covering many phases of preventive medicine has been carried out by officers of the Department. Articles have been contributed to the newspapers, and lectures delivered under the Red Cross Society, New Zealand Sanitary Inspectors' Association, and kindred associations. The Department heartily co-operated with the Wellington City Council in a "Health Week" campaign, which met with a considerable amount of success. The addresses and health talks arranged by the Medical Committee and given by members of the British Medical Association, New Zealand Dental Association, departmental officers, and recognized authorities on architecture, town-planning, &c., should have a stimulating effect in creating a sound public opinion on matters affecting the public health. At the exhibition held in the Wellington Town Hall the Department contributed three divisions. First there was a dental section, in which a very good collection of casts and other exhibits were displayed, and the importance of proper dietetic habits was demonstrated. The second showed pictorially the methods of transmission of disease. The third section, under Dr. Truby King, included a fine exhibit of health posters, and also diagrams showing the calorific value of foodstuffs, samples of which, suitably grouped according to the age and needs of the individual, were also exhibited.