

in those cases where, after careful investigation, the Public Trustee is satisfied that it is in the interests of the estate to do so.

From the circumstances surrounding them the administration of mental-patient estates often presents very difficult problems. Frequently it is found that the estates are heavily involved, the financial embarrassment having contributed, to some extent at least, to the mental indisposition. The greatest care and vigilance have to be exercised that the interests of the patient are conserved and administered in the most advantageous manner.

In the smaller estates where a mental patient has dependants in need of support, and payment for the patient's maintenance in the mental hospital would unduly deprive such dependants of that support, arrangements are made with the Mental Hospital authorities either to reduce the usual rate or to postpone payment of the maintenance so long as support of the dependants is necessary. These arrangements are of assistance to wives and children, widowed mothers, and aged parents, and appreciation of the action of the Public Trustee in conjunction with the Mental Hospital authorities in this matter is often expressed.

There are numbers of mental patients who, although they possess means, have no relatives or close friends in the Dominion to visit them in the institutions in which they are detained to make representations on their behalf for the providing of comforts beyond such as can be given in a mental hospital. Wherever such representations are made the Mental Hospital authorities are consulted, and, having regard to the circumstances of each case, wherever it is justified authority is given for the expenditure of a reasonable amount for this purpose. It is felt, however, that in every case the care of a patient should bear close relationship to the value of his estate and the demands on that estate, so that where it can be legitimately done justifiable comforts beyond the ordinary rule of mental-hospital routine should be given. In order that more may be done in this instance where there are no relatives or friends, the question is now under consideration with a view to drawing up a scheme for the guidance of departmental officers.

The powers, duties, and functions of the Public Trustee cease—

- (a.) When a patient dies ;
- (b.) When a private committee is appointed ;
- (c.) When an administrator of the estate is appointed under Part III of the Prisons Act, 1908 ; or
- (d.) When the patient is discharged in pursuance of the Mental Defectives Act, and it appears from the discharge that he is able to manage his own affairs.

When a patient has completely recovered, the Mental Hospital authorities issue what is known as a "Discharged Recovered" Certificate, and on receipt of it the control of the patient's estate is handed back to him. There are, however, instances of persons who have sufficiently recovered to be liberated from mental hospitals, although in the opinion of the authorities their mental condition is such that it is not advisable, for one reason or another, to issue an unqualified discharge. The question frequently arises whether such persons are to be allowed to resume control of their affairs. It is to these persons that section 2 of the 1914 Amendment Act applies. It is provided in that section that in the case of any person who is discharged or is deemed to have been discharged under the principal Act, if the Public Trustee on receipt of such evidence as he may require is satisfied that the person is able to manage his own affairs he may hand over such control. The Public Trustee has a discretionary power in these cases, and, as it is his duty to protect these persons, such discretion must be wisely exercised. Where application is made to the Public Trustee to relinquish his control in pursuance of these discretionary powers, each individual case is considered on its merits, and such medical and other testimony, both from private medical practitioners and the Mental Hospital authorities, as is deemed necessary.

In conducting the administration of mental-patient estates it is recognized that there is a delicacy in the position so far as relatives and friends of the patient are concerned. There is a natural reluctance to have the fact of the mental deficiency made publicly known. The Office endeavours not to offend sentiment