

Maori Hygiene.

634. Prior to 1920 the Department maintained a small staff on this work, and the Division was strengthened in 1920 by the appointment of two additional officers. The Division, as such, has recently been abolished, and the staff now employed on the work, including nurses and part-time medical officers, numbers fifty-two. In addition to the salaries of officers employed by the Department, grants totalling approximately £500 are made to nine Hospital Boards which employ Native Medical Officers.

635. There has been a general increase in departmental activities in connection with Maori hygiene, including the supply of medicine to Native schools, and the net cost in 1930-31 was £10,487, while the approximate cost in 1931-32 was £8,000, exclusive of general office expenses. It should be stated that this expenditure is to a degree linked with the item of £7,000 appearing in the Civil List for Native purposes, as a recovery of approximately £3,600 is made from that item to vote Department of Health, in respect of medical services, &c. We have already recommended the abolition of the item of £7,000 appearing under the Civil List, and a corresponding reduction in the expenditure by the Department should follow. **We suggest that the expenditure on Maori hygiene should not exceed £6,000 per annum.**

Saving, £2,000.

School Hygiene.

636. The Division of School Hygiene was first established in 1912, when three School Medical Officers were appointed. These officers were, in the first place, attached to the Education Department, but in 1921 the service was transferred to the Health Department.

637. The staff at the present time consists of the Director of School Hygiene, eleven School Medical Officers, and twenty-seven school nurses, while, in addition, two Medical Officers of Health act as part-time School Medical Officers. The aim of the service is to secure for each child three complete physical examinations during his or her school life; but special examinations are carried out at the request of parents or teachers, or when the School Medical Officer considers them necessary.

638. The work is mainly confined to the examination of children attending the State primary schools, although recommendations for the extension of the service to secondary schools have been made to the Government in the past; but such extension has been deferred owing to financial considerations. The service has now been extended to include the examination of the pre-school child, kindergartens throughout New Zealand being inspected by School Medical Officers.

639. The School Medical Officers do not provide medical attention for the child, the practice being to notify the parents of the treatment required, leaving the choice of medical attendant to the parents themselves. It sometimes happens that the parents are unable to obtain the necessary advice and treatment, and in these cases it is the duty of the School Medical Service, through the school nurse, to see that treatment is obtained. The school nurse thus acts as a link between the school and the home, and where treatment is arranged for, owing to the inability of parents to provide for it themselves, the treatment is carried out at the public hospitals.

640. The total cost to the State of this service in 1930-31 was £21,436, which covers salaries, travelling allowances and expenses, uniforms for nurses, &c.

641. School Medical Officers and nurses must travel in the performance of their duties, **but every effort should be made to minimize this cost.**

642. **In regard to allowances for nurses' uniform, we see no justification for the free issue of them or an allowance therefor, and recommend that this be discontinued.** A nurse having obtained employment, would suffer no undue hardship in providing her own uniform.

643. **We recommend that the position of Director, Division of School Hygiene, be abolished, and that the work be supervised by the officer in charge of the Division of Public Hygiene.**

644. Similarly, with regard to the School Medical Officers, **we believe that these officers should be under the direct control of the Medical Officers of Health in the respective districts.** This should enable the work of all Divisions of the Department to be more closely co-ordinated and make for greater economy.

645. Without wishing in any way to detract from the admittedly valuable service carried out by this Division, **we are of opinion that in view of present financial conditions it must be considerably curtailed. We accordingly recommend that the staff be reduced by at least one-third, including both Medical Officers and nurses. If the present service cannot be maintained with the reduced establishment, we are forced to recommend that the activities be adjusted accordingly.** For instance, instead of three complete physical examinations during the school life of the child, in the altered circumstances two may have to suffice.

646. In 1925 the routine medical examination of entrants to the teaching profession was placed under the School Medical Officers. It had been the custom previously for them to go through their period of training without special examination, a medical certificate being asked for at the end of the training period. This was found to be extravagant both to the State and to the student, as in some cases after time and money had been spent in educating the trainees, they were unable to pass the necessary medical test. It is claimed that examination of candidates by the School Medical Officers has had beneficial results. **It is pointed out, however, that this medical examination is carried out free of cost to the trainee, and this appears to be an unnecessary concession.** In other branches of the Public Service the appointees have to undergo medical examination at their own cost, and **we see no reason why a charge should not be made for the medical examination of candidates for the teaching profession. We suggest a fee of 10s. 6d. for each examination.** The indications are that there will not be very many candidates accepted for training; consequently the imposition of a charge now may not produce much, but it is an avenue of economy.

Estimated saving by reduction in staff, £5,000.