The institution has averaged about 550 confinements per year for the last eight years. The number of beds is twenty-eight, and the average number of occupied beds last year was 22·7.

The accommodation is barely sufficient for present needs, and it is evident that in the near future either the St. Helens Hospital will have to be extended or alternative

public provision will have to be made by the Hospital Board.

With an efficient St. Helens service existing, the Wellington Hospital Board has not up to the present felt obliged to make any provision for normal maternity cases, except that, through its Social Welfare Department, financial assistance has been given to a small number of indigent cases to meet partially the costs of confinement in one of the existing maternity hospitals and that the district nurses working under the Board give occasional emergency help.

An Obstetric Department has, however, been developed at the Wellington Hospital, under an honorary obstetrician and assistant obstetrician, to deal with emergencies and complications unsuitable for treatment in the present St. Helens Hospital or in the other

maternity units.

The conditions of accommodation and nursing under which the Department is at

present working are not very satisfactory.

There is a very small labour ward, but there is no special ward for the nursing of these cases, most of whom are treated in the general medical and surgical wards; the babies are accommodated in the general children's ward.

There is no separate maternity-trained staff. The Committee was informed by the Board that no provision has been made in the plans of the new hospital for a Maternity

Department, though some improvement may result from the release of existing wards.

"Intermediate" Hospital Facilities.—Wellington is particularly well served in regard to "intermediate" maternity beds, where the patient is able to obtain modern hospital facilities at moderate cost and where she is able to make private arrangements for attendance by her own doctor.

In this instance the provision is made by two philanthropic organizations—the Salvation Army (Bethany Hospital) and the Wellington Women's Christian Association (Alexandra Hospital)—and has been rendered possible by the fact that both these bodies were already operating maternity homes as a social service for unmarried mothers.

Both the Bethany Hospital and the Alexandra Hospital are well-equipped and well-staffed hospitals with attractive wards and fine records for careful service.

Both are training-schools for maternity nurses, and it is interesting to note that the attendance of a number of different doctors does not interfere with training.

Each hospital deals with three types of patient:

(a) Unmarried mothers.

- (b) Married women not engaging a doctor for the confinement (as at St. Helens).
- (c) Married women attending with private doctors. The approximate figures for the year were :-

					Alexandra Hospital.	Bethany Hospital.
(a) Unmarried mothers					50	50
(b) "No-doctor" cases (c) Private cases	• •	• •		• •	70 280	$\begin{array}{c} 40 \\ 210 \end{array}$
					400	300

Analgesics are used quite freely in both these hospitals for patients of all three types; anæsthesia in the case of "no-doctor" patients is limited to the Murphy inhaler method.

Private Hospitals.—There are in Wellington City four private maternity hospitals of eight to twelve beds each, and a few smaller hospitals. The total number of cases attended in these hospitals last year was 670. All are converted private houses, and, speaking generally, the wards are small and the accommodation for staff restricted. Herein lies a definite weakness in the hospital provision in Wellington City. The work of these hospitals is good, but the buildings are not modern in type. Private-hospital enterprise is faced with particular difficulties in Wellington; suitably situated property is difficult to acquire and exceptionally costly. It is a significant fact that while in the last ten or twelve years "intermediate" accommodation has improved markedly in extent and type, there has been practically no alteration in the private hospitals.

There is a need and an opportunity for better private-hospital facilities, but it is felt that only by a combination of interests—medical, nursing, and public—could the requirements for an up-to-date private maternity hospital be met. A satisfactory feature of the Wellington position is the almost complete absence of the ill-equipped and badly staffed one-bed maternity home, this obviously being the result of adequate lowpriced modern hospital accommodation being available.