

Summary and Recommendations.

(1) The Committee is of the opinion that the public maternity facilities in Dunedin are of a very high order. In the Queen Mary Maternity Hospital are embodied the principles which the Committee has recommended for adoption in the development of a main obstetric centre in each of the large cities.

(2) In Dunedin, as in some other large centres of population, there is a marked deficiency in intermediate facilities for those women who desire to be attended by the doctor of their choice. The development of such a service is most desirable.

(3) The Committee is of the opinion that there is an opportunity for the development of more modern private hospital facilities in Dunedin, as in other large cities.

44. SOUTH OTAGO HOSPITAL BOARD DISTRICT.

The Board's district comprises the Bruce and Clutha Counties, extending from the Taieri River in the north to Chasseland's Mistake in the south, a distance of about seventy miles. The population is approximately 17,000, and is engaged in mixed farming, mining, fishing, and timber-milling. The population of the Bruce County has decreased 4.66 per cent. during the past decade, while that of Clutha County has increased 2.41 per cent. during the same period. The centres of population are Milton (1,423), which shows a decrease of 5.39 per cent. over the past ten years; Balclutha (1,546), an increase of 0.65 per cent.; and Kaitangata (1,375), a decrease of 11.12 per cent.; Clinton (440), an increase of 14.52 per cent.; and Owaka (475).

The number of doctors in the district is six—two at Milton, two at Balclutha, one at Kaitangata, and one at Owaka.

The only public maternity hospital in the district is at Kaitangata, where there is a six-bedded hospital. The average number of occupied beds per day is 2.3, and last year forty-six patients were confined therein, eighteen of them being indigent.

The South Otago Hospital Board endeavours to persuade all its indigent cases to go to Kaitangata, but because of the distances such patients must of necessity travel, and because of transport difficulties this is obviously not satisfactory.

Kaitangata, being a mining town, has an uncertain future, and the present facilities thereat are adequate for Kaitangata and its environs. Analgesics should be used at the Kaitangata Hospital.

The time has now come when public maternity facilities should be provided by the addition of a maternity block to the cottage hospital at Milton. Until such is done the Hospital Board should make provision for ante-natal care and lying-in accommodation for indigent cases at Milton.

BALCLUTHA.

At Balclutha there are two private hospitals supplying nine beds. These are adequate for the needs of the district, but some provision should be made for indigent cases at Balclutha as is suggested for Milton.

OWAKA.

At Owaka there is a four-bedded private hospital. It is desirable that the Hospital Board should pay the fees of indigent cases confined in this hospital.

Recommendations.

It is recommended that the Hospital Board should erect a maternity block in connection with the Milton Cottage Hospital and that better provision should be made for those unable to pay private fees at Balclutha and Owaka.

45. VINCENT HOSPITAL BOARD DISTRICT.

This Hospital Board area corresponds with the county of the same name. It extends to the Alps at the back of lakes Hawea and Wanaka and borders on the Waitaki, Maniototo, Tuapeka, Southland, and Lake Counties. Its population of 6,500 is engaged in mixed farming, fruit-farming, mining, and public works. Its centres of community interest are Cromwell (737), which shows an increase of population of 21.22 per cent. over the past decade; Clyde (293); Alexandra (871), with a population increase of 42.79 per cent.; Lauder (285); Omakau (382). The area as a whole has shown a population increase of 32.61 per cent. over the same period. The number of doctors in the area is four—one each in Cromwell, Clyde, Alexandra, and Lauder. The only public facility is a public hospital at Cromwell. The bed space is ten, the average number of occupied beds is three, and the number of patients confined therein last year was seventy-two. The fees are £4 4s. per week, no fees being payable to the doctor if he attends at the confinement, but patients pay consultation fees for ante-natal consultations. This is a most undesirable practice, as it discourages adequate ante-natal care. The remuneration paid to the doctor by the Board should cover the cost of ante-natal care and attendance at the confinement by the doctor.