

London or New York, full details of which may be got in "The Charities Register and Digest, 1884" (Longmans, Green, and Co.), they could reduce by more than one-half the money that is now being spent mainly in pauperising the people, and at the same time provide adequate assistance to all deserving cases. It is not yet too late to stamp out the pauper class that has risen among us owing to our own apathetic folly in dealing with it. The State cannot do this, but I am certain that a Charity Organization Society in each of our large centres can do it if it be taken in hand now. How far such a society ought to be subsidised, and from what sources, is a matter of public policy.

In conclusion, I may say that the reason why the North Island almost alone furnishes the examples I have given is that the winter was over before I had time to overtake the South; and to compare the two properly the facts must be collected at about the same time of the year. I may also say that I have in my possession written notes of hundreds of illustrative cases observed by myself, of which I have only given enough to point my moral.

In order not to make this report too long, I content myself this year with the following brief statements regarding the hospitals of the colony.

AKAROA HOSPITAL.

THIS hospital continues to be well managed. It contained two patients at the time of my visit, with one old man who has been there for several years, and makes the hospital his home. The drug bill is most exorbitant, amounting to over £6 last month. Evidently the local druggist knows the value of a monopoly. Considerable improvements have been effected; the colonial oven in the kitchen has been replaced by a capital Leamington range. A small lean-to has provided a much-needed extension of the sleeping-accommodation as well as a small scullery and sink. The tanks have been connected, the drainage greatly improved, and the back roughly laid down in concrete.

17th January, 1888.

ARROWTOWN HOSPITAL.

THIS hospital is one of the most comfortable and best managed hospitals in the country; yet at the time of my visit it contained only one patient, the total for the year being sixty-three in-patients; out-patients numbered fourteen. The charge to non-subscribers is £1 10s. per week; but most qualify at entering, and thus escape with a charge of £1. Females and children are charged 10s. Subscriptions and donations amounted to £170 19s. 8d., and patients' maintenance amounted to £91.

16th March, 1888.

ASHBURTON HOSPITAL.

NOTWITHSTANDING the unsuitable structure and arrangement of this hospital, which I commented on in my last report, it is so comfortably furnished, and so well managed, that patients are evidently attracted to it. At my visit they numbered fourteen, ten being males and four females. There were 127 in-patients during the year, who paid £82 7s. 9d. for maintenance; while the subscriptions and donations amounted to £1.

AUCKLAND HOSPITAL.

THIS hospital, after a long period of strife, has entered on what I trust will long continue to be a peaceful course of public usefulness. The new Board, by appointing Drs. Lindsay and Bell, have secured most trustworthy and capable officers, and the condition of the hospital in all its parts is most satisfactory. The in-patients for the year numbered—males, 659; females, 242; total, 901. The outdoor patients are provided for by means of a dispensary, which last year cost £295.

BLLENHEIM HOSPITAL.

SINCE my last years' visit, the new hospital, about two miles and a half from the town, has been opened. Except that it is too far from the town, this hospital is situated very suitably, on a gravelly bank or shingle-bed, providing admirable drainage, but very bare and shelterless. The building, I find, is badly designed. The large ward opposite the front door has been divided into two divisions, each 33ft. by 30ft. by 16ft., one opening directly out of the other. The awkwardness of this arrangement is greatly increased by the fact that the ten beds in the far ward are all occupied by old men who are not hospital patients at all, but simply old worn-out people who are supported by the Board, and who nevertheless grumble if they are not as well fed and cared for as the patients in the adjoining ward. A second great defect in the plan is that the only means of conveying things from the kitchen to the wards is through the dispensary. Last, and worst of all, the only access to the bath-room, lavatory, and closets on the male side is either round by the back or through this pauper-ward. The hospital is plainly but suitably furnished. To right and left of the front door are two private wards, male and female respectively. In the male private ward I found a most successful case of suprapubic lithotomy, which was very creditable to Dr. Cleghorn. The back yards in the male and female sides are well laid out, and the outhouses and other appliances are very suitable. The whole inside of the institution is well kept, and all the patients expressed themselves as well satisfied with their treatment. Miss Rees, the matron, struck me as being a very capable woman. She is assisted in the nursing by her sister, who gets £30 salary, while she herself gets £100. A cook and laundress and housemaid complete the staff.

3rd April, 1888.

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