wards?—Yes. A reduction of beds in the wards from seventeen to fifteen would be 1,166ft., and to fourteen, 1,243ft. per patient.

5050. Do you know if the number of beds was reduced then?—I asked not very long ago, and I was told that it was reduced by one in one of the wards, but I was not in the house when it was done.

5051. *The Chairman.*] I understand you acknowledge that report, and admit you were a party to it?—Yes.

5052. And you held to all the opinions expressed in the report?—Yes.

5053. And you still hold them?—I do.

5054. *Mr. White.*] Dr. Copland has said that the beds downstairs were reduced from seventeen to fifteen, and upstairs from sixteen to fourteen?—I am not aware of it.

5055. Do you know if the "Unitas" closets have been improved?—I do not.

5056. I notice that the closets there suggested are Unitas ones. Do you know whether that has been done?—I do not know.

5057. *The Chairman.*] Have these closets been got since then?—I cannot say.

*Mr. White:* As a matter of fact, many of them were in use in the Hospital at the time that that report was written.

5058. Are these closets an improvement or not?—There certainly have been improvements made in some respects. Double doors have been put up.

*Mr. Solomon:* I think you are wrong in that respect. You will find that in the report.

*Witness:* At all events, our main recommendation that the closets should be built out has not been given effect to.

5059. *Mr. White.*] With regard to the closets, are you of opinion that everything has been done to make them sanitary?

*The Chairman:* The better plan would be to ask Dr. Colquhoun if he wishes to make any remark on the report.

*Witness:* The bed-space per patient is, I think, an important point. I do not think that the reduction we recommended has been made. I was in the wards yesterday, and saw what I considered to be a very narrow limit between some of the beds in the female wards.

5060. *Mr. White.*] You asked the space to be increased to 100ft. by reducing the number of beds, did you not?—If that has been done, then I should say that there should be a further reduction. I am especially speaking of No. 7 ward, where the beds are far too close together.

5061. You asked for the space to be increased to 100ft. by reducing the number of beds?—If that has been done I should say there should be still further reductions. I am speaking now principally of No. 7 ward, where the beds are far too close together.

5062. What is the result of the beds being too close together?—I think it is very unpleasant for the patient. It is likely to be distinctly harmful; and, further, if a patient has an offensive discharge, it is both unpleasant and a source of risk.

5063. Do you know the distance the beds are apart from each other in the wards?—I only know that somebody said there were 18in. between them in the wards, but I did not measure them myself. When I was in there yesterday I only went through the female wards, and I certainly think the distance between them was wider than that.

5064. *The Chairman.*] Do you think it would be more than 2ft. between them?—I am certainly of opinion it is not more than that. As I said, I did not measure.

5065. *Mr. White.*] You have been accustomed to see other hospitals?—Yes, I have seen a good many.

5066. And you can tell by the eye whether the beds are too close or not?—Yes.

5067. I believe they have been measured, and found to be from 3ft. 2in. to 3ft. 8in.?—I would not think that would be sufficient. That is coming nearer to what my impression of the distance was.

5068. However, you think they are too close?—Yes, they are certainly still too close. In some of the wards it is worse than it is in others.

5069. *The Chairman.*] Do you think that the plan of setting aside empty wards for a time offers sufficient advantages to counterbalance the necessary overcrowding which must take place in other wards in consequence?—If I were to have a choice of two evils I should certainly prefer to keep the one ward empty.

5070. That is, one ward for males and one for females?—You do not need that at all, because there is no reason why males should have a separate ward.

5071. Would you still be of opinion that fallow wards would be needed if you had wards as they have in the Christchurch Hospital, constructed on modern methods?—Yes. I think it ought still to be done, because, no matter how perfect your building is, you cannot too carefully guard against septic disease.

5073. *Mr. White.*] What do you think the results in the Dunedin Hospital generally have been?—I think the results have been fairly good, on the whole.

5074. *The Chairman.*] When you say "fairly good" do you mean the results of your own practice in the Hospital have been fairly good?—Yes.

5075. *Mr. White.*] Can you compare the results with the results of other places?—If you want a comparison made with the London hospitals, I should certainly expect to find better results out here. I have seen much better results in Dunedin.

5076. *The Chairman.*] How do you compare the results of your private practice?—They compare favourably. In the cases of poor people with serious diseases they run a better chance in the Hospital than they do in their homes; and in the case of well-to-do people, who can afford comforts which poor people do not get—good attendance, good nursing—I should say that the home treatment gives better results.