

6670. Just by hand. Is that a slow process?—It is a pretty quick one.

6671. Is there not a likelihood of the food getting cold?—There is a liability of that.

6672. I mean, of the food being cold by the time that it reaches the ward?—There have been no complaints about that. The matter has been considered by the House Committee. Owing to the position of the kitchen, it is difficult to make better arrangements for the conveyance of food to the wards.

6673. You do not think that the food is sent up to the wards in as satisfactory a manner as it might be?—No, I do not; but it is a difficult matter to deal with under present conditions. I may mention that all the plates are sent up with covers over them.

6674. But that is not a hot plate. Have you tried hot water round the plates?—I tried that, but it was found that it made the tray too heavy. It would hardly work satisfactorily.

6675. Do you approve of the position the kitchen is in?—No. It is in a wrong position. It is under some of the wards, in the first place, and the ceiling of the kitchen itself is too low, and then there is the difficulty of conveying food to the wards.

6676. Is it lighted sufficiently for the cooks to see what is going on?—It is not in some places, and especially on dull days.

6677. How is it ventilated in the summer time?—It is very hot just around the roaster.

6678. More than a kitchen ought to be?—Yes.

6679. It must take some considerable time preparing the food—fish, meat, &c.—for a large hospital?—There is a daily delivery of fish and meat, and the fish is sent down cleaned and all ready for the cook. It does not lay about in the kitchen; just during the process of cooking.

6680. Have you ever seen signs of the food decaying?—I could not say that. Occasionally we have had bad fish, but it was at once sent back. I do not think that we have noticed anything go bad since we put up the safe.

6681. How often is milk supplied to the Hospital?—Once daily.

6682. Where is the milk kept?—In the kitchen. It is distributed to the wards, and the nurses and wardsmen keep it in little cupboards just outside of the ward-doors.

6683. It is not put in the wards?—No. There are cans provided for the milk, and when a patient wants a little milk the warder or nurse draws it off.

6684. How do you find it keeps?—There have been complaints from time to time.

6685. Who is the contractor for the milk-supply?—David Findlay, of Pine Hill.

6686. Does your milk ever go sour?—Yes.

6687. Does that take place in the Hospital, or is it the fault of the contractor?—I think it is the fault of the contractor. It occurs in the summer-time. It is very difficult to keep it fresh in that part of the Hospital. We sometimes scald the milk in the summer.

6688. Is there any objection to having a morning and evening delivery of the milk?—I think that is provided in the contract.

6689. Why is it not done? Is there any special reason against it?—I think it would tie down the contractor, and would probably cost more. When we have the contractor taking an interest in the supply we have very little trouble, but we sometimes get into the hands of a man who wants to make a little too much out of it, and then we have trouble.

6690. Then, you sometimes have trouble about your milk-supply?—Yes.

Dr. TRUBY KING recalled.

6691. *Mr. Solomon.*] There are one or two points to which I wish to direct your attention. In the first place, we have been told by one witness for the Hospital Trustees that in considering the question of possible reform at the Hospital the question of ventilation should be placed very low down on the list. Supposing that we were considering the advisability of effecting reforms in the Hospital, where would you place ventilation in comparison with other possible reforms?—I have already stated that I consider it a first consideration.

6692. *The Chairman.*] Do you consider it of the first importance?—Unless, possibly, providing a special ward for the isolation of fever and other infectious cases ought to take precedence.

6693. You do not mean, do you, that it should be postponed until after isolation has been provided?—I think that both are of equal importance. It is an urgent matter.

6694. *Mr. Solomon.*] We have also heard from another witness that, although he admits that the Hospital offends in the various matters you have pointed out—that is to say, imperfect ventilation, too many beds, insufficient cubic space, improper closets, baths, &c., improper walls, &c.—he is of opinion that these defects are doing no harm. Can you agree with that?—No; certainly not.

6695. *Mr. Solomon.*] Do you think it reasonable to expect that the defects which we have heard so much about, and which the various witnesses throughout this inquiry have one after another pointed out and condemned, can remain in existence for any length of time without causing injury?—I am quite sure that you cannot get the best results in any hospital with so many defects.

6696. You do not agree that the process of fallowing would render the Hospital safe?—I have heard the system of fallowing and disinfecting the wards as used in the Hospital described to-day. The burning of sulphur in the quantity mentioned would, I think, exercise practically no effect at all. It was stated that 3lb. of sulphur are used for disinfecting a space of about 20,000 cubic feet. Koch experimented in smaller rooms, but when he used sulphur in the proportion of about 2cwt. to such a space he found that only a prolonged exposure would kill the spores of microbes. He concluded that for practical purposes sulphurous acid was useless as an ordinary aerial disinfectant. Even when a closed room was saturated with moisture and dense fumes of sulphurous acid, Koch found that the spores retained their vitality for a very long time, especially if they were not immediately upon the surface.

6697. You think it would be useless unless you kept the room saturated?—Even if the room