KINGSEAT MENTAL HOSPITAL

Dr. Tothill reports:—

I have the honour to submit my report for the year ending 31st December, 1946.

The total number of cases under care during the year was 993 with a weekly average of 848. Admissions numbered 121, of whom 79 were committed patients, 28 voluntary boarders, and 14 transfers from other mental hospitals. A large number of new admissions were congenital mental defectives and senile cases, and, as they are unrecoverable, the percentage of recoveries does not give a true picture of the recovery rate. Approximately one in every three new admissions has been a voluntary patient. In the past five years the admissions, excluding transfers, have increased fivefold. This indicates a steady development of the hospital in spite of its distance from Auckland and restricted wartime travelling facilities.

Discharges numbered 49, 22 being committed patients and 27 voluntary boarders. In addition, 8 patients were transferred to other mental hospitals. There were 38 deaths, a very low death-rate considering the large number of elderly patients.

Owing to the increased admissions and relief given to other hospitals, our accommodation has been severely taxed, and overcrowding to the extent of 65 beds is present. No buildings have been erected since 1940, the war of necessity causing a cessation of the building programme. However I feel the hospital should be completed to full maturity as soon as possible not only to relieve overcrowding, but to provide better facilities for the treatment of infirm patients, occupational therapy, recreation, and administration.

During the six months of 1945 that I was in charge of the weekly clinic at the Auckland Hospital 367 consultations were given. The out-patient treatment at Kingseat has considerably increased, but the distance from Auckland is a disadvantage.

A large number of examinations, reports, and treatments have been arranged for the Child Welfare Department. Child psychiatry in Auckland has almost reached the stage where a full-time psychiatrist in charge of a child-guidance clinic is necessary. I am sure that this would not only help the educational authorities to sort out the subnormal child attending school so that appropriate training could be given, but also by solving environmental difficulties and mental conflicts, problem children could be more adequately catered for, and perhaps future mental breakdowns prevented.

All the modern forms of treatment have been carried out at this hospital, and, though physical methods are spectacular and have been much publicized, it is my opinion that, without psycho-therapy and treating the patient as a whole, permanent recovery is unlikely. The principle of maximum freedom with safety has been followed to the full, and most of the villas are open. In consequence, the majority of the patients have considerable liberty and, apart from enjoying out-door recreation, derive much benefit from fishing expeditions, picnics, visits to town and pictures, &c. It is hoped to erect a seaside cottage where suitable patients can have a holiday and change from institutional life.

Our occupational classes have made good progress, but the desired expansion cannot take place until suitable buildings are available. The present arrangements are makeshift, and day-room accommodation has had to be sacrificed to enable the classes to be carried on.

Apart from general maintenance, minor alterations, and the erection of two cottages, no constructional change has taken place during the past year. Tenders have been called for the building of more staff cottages at the settlement, but no finality has been reached yet.

General improvements have been made on the farm, the milk-cans are all steamsterilized, and our herd is free of tuberculosis. Apart from regular tuberculin tests, blood tests for all suspect undulant fever carriers are done, and injections given for mammitis. Sea erosion of part of the farm is taking place, and flood-gates will probably be necessary to stop this.

Staff shortages, especially female, have been serious during the year, and, although overtime has been worked ungrudgingly, tired nurses cannot do their work properly, and this in turn must reflect on the efficiency of the staff and welfare of the patients.