H.--31. 53

That afternoon I gathered from Dr. Ewart that for the last six months the resources of the Hospital had been sorely tried to accommodate infectious cases from the city and suburbs, and were accommodation provided thirty

sorely tried to accommodate infectious cases from the city and suburbs, and were accommodation provided thirty beds could have been kept occupied during the last six months.

The present accommodation for infectious diseases at the Hospital consists of a building 30 ft. by 24 ft. This ward, which is separated from the main block, is about 18 ft. high, but for the purposes of ventilation can scarcely be reckoned higher than 14 ft.; so that, allowing 2,000 cubic feet of air-space as the minimum for each patient, there is accommodation for barely six patients. This ward is divided off with wooden partitions for separation of the sexes. There is no accommodation for the nurses on duty, who have either to sleep in one of the cubicles in the ward itself, or in the kitchen adjoining the ward.

In the main Hospital building are the usual small isolation-rooms which are necessary for the reception of those cases of infectious disease which periodically crop out among the inmates; but these rooms can scarcely be regarded as affording accommodation for the general public.

I have therefore endeavoured to show that at the Hospital there is accommodation for barely six persons; that poor provisions are made for the separation of the sexes; that only one kind of infectious disease can be treated at a time; and that there is no proper accommodation for the nurses on duty.

At the Berhampore Hospital are two wards, each containing some 6,000 cubic feet of air-space, or accommodation for six persons. Authorities on the subject agree that the minimum allowance of accommodation for the

At the Berhampore Hospital are two wards, each containing some 6,000 cubic feet of air-space, or accommodation for six persons. Authorities on the subject agree that the minimum allowance of accommodation for the treatment of infectious disease should be one bed for every 1,000 of the population. In Wellington and suburbs, with a population of 55,000, there are at the most only fourteen beds available for the treatment of such cases.

I would therefore respectfully suggest to your Council the desirability of providing not less than thirty beds for the treatment of infectious cases. As accommodation for six persons has already been provided at the Berhampore Hospital, this would entail the erection of a building for the reception of twenty-four cases.

The adjoining Borough Councils should unite with your Council in providing a hospital for the treatment of infectious diseases. The expenses of such an institution might be apportioned on a basis of population ("The Public Health Act, 1900," section 38, subsection 8). I would also suggest that your Council approach the Hospital Board in this matter. If some satisfactory arrangements could be made with that Board it might result in the erection of an infectious-diseases hospital worthy of the city and suburbs, and the question of administration might be greatly simplified.

It is almost unnecessary to point out that it is impossible to cope successfully with certain forms of infectious

It is almost unnecessary to point out that it is impossible to cope successfully with certain forms of infectious disease without proper hospital accommodation. Preparations for the treatment of infectious disease should be made in non-epidemic times, as under the influence of the panic, often caused by the immediate presence of a dangerous infectious disease, an authority is liable to erect buildings of an unsuitable description, and in unsuitable places, and often at inordinate cost.

places, and often at inordinate cost.

There is another matter to which it is my duty to call the attention of your Council. At the present time the only means available for the disinfection of infected things are: (1) An alformant lamp, which is very suitable for the disinfection of houses, but is of little value for the disinfection of bedding, clothes, &c.; (2) the obsolete "dry-heat infector" at the Hospital, which is practically valueless as a disinfector. It is very necessary that a modern steam disinfector should be provided. Here, again, it may be possible to come to some arrangement with the Hospital authorities, who, I understand, contemplate erecting a modern apparatus. At present, however, there is no place in the city where the process of disinfecting infected things can be carried on.

I have, &c.,

T. H. A. Valintine,
District Health Officer.

The Hospital authorities now intend to erect another ward for the accommodation of infec-When this is accomplished there will be in the city—on Dr. Ewart's estimatetious cases. accommodation for twenty-six cases of infectious disease, but this would not be sufficient. Although in the letter to the Mayor thirty beds were asked for, the usual allowance for an infectious hospital is one bed for every 1,000 of the population. In the meantime the diphtheria cases are treated in the small isolation wards.

Nothing at present has been done about a proper ambulance; the present vehicle is nothing

short of a disgrace to the city.

Plague Precautions.

Owing to the recrudesence of plague in Sydney during the early part of the year, additional precautions had to be taken to insure the sanitation of the city, and the department is very grateful to the Mayor of Wellington for setting an example that was subsequently followed by the authorities in the larger cities of the colony. Six additional inspectors were appointed to make a house-to-house inspection throughout the city. The reports of these inspectors were handed in to the City Engineer every night, and carts were despatched to remove the accumulations of rubbish, &c., reported on. A premium of 3d. per head for rats was also advertised.

The reports of these inspectors showed that the sanitation of the city was better than had been anticipated, although many faults in the drainage connections were brought to light.

Insanitary Buildings.

During the year a number of insanitary buildings have been condemned and others placed in a state of sanitary repair. The drainage arrangements of many stables have been altered so as to comply with the city by-laws. A good many insanitary buildings still exist, however, particularly in the narrow lanes off Tory Street. Some of these small houses, though insanitary in their surroundings, are cleanly kept. The housing of the poor is always a difficult problem, but has hardly reached the acute stage in this city, though it must not by any means be lost sight of. In this matter we should profit by the experience of the London County Council, and not embark on a wholesale demolition of insanitary houses without first ascertaining if better accommodation could be readily obtained for those evicted.

## Sanitation of the Suburbs.

The sanitation of the suburbs is not satisfactory. In the more thickly populated portions of the Melrose Borough a service for the removal of nightsoil has been instituted, but very little, if anything, has been done with regard to the removal of rubbish. The attention of the Department has been called to the existence of several nuisances in this borough, particularly at Mitchelltown, and the polution of the Island Bay Creek. The condition of some swamps adjoining the borough boundary has also been the subject of some correspondence.

In the Onslow Borough no measures have been taken with regard to the removal of nightsoil. This is only necessary in the neighbourhood of Wadestown and Kaiwarra. During the past year

many nuisances have been reported from both these portions of this suburb.