

the fact, I would take the report of the night attendant. I do not remember your ever losing your temper in dealing with a patient, or ill-using a patient. You got on ordinarily well with the patients. Patients have made charges against every one, doctors and all, which are entirely devoid of foundation. The room is not a padded room. The night-book shows that this patient was noisy and restless all night. I have seen patients quite worn out with one night's unrest, and others who could carry on for three or four days. I do not think this patient was worn out; he had two good nights before. This patient has never asked me for brandy. I do not know what he has asked other attendants. He did not identify you at all. The rules state that no attendant is allowed to enter into a struggle with a patient. It is a recognised thing that attendants are not to go to patients' rooms; I do not know whether or not there is a rule. If a patient is making a strange noise, an attendant would have a right to open a patient's door, but not without first getting another attendant—the night attendant in charge in this instance.

(To Mr. Beetham): He should go to the night attendant in charge, and not go himself.

(To Mr. Thornton): I do not think five or six years' experience qualifies a man to look into a patient's room; he should go to the night attendant in charge. I do not think the filth, &c., in front of the door showed that the patient had been knocking about; you might have gone in in the dark yourself and kicked the chamber over. It is often the case that a patient gets knocked about without one's being able to account for it. If you wanted to abuse the patient, I think you chose the best possible time.

*Dr. Levinge* (to Mr. Thornton): The patient has had bruises on him from time to time—bruises for which you are not to blame.

*Witness* (to Mr. Thornton): This patient was in the habit of making various charges. It has never been reported to me that he has attacked attendants with his chamber. I believe you were in the building that night—the 6th August. I do not remember Chapman mentioning that this patient had attacked him with his chamber.

THOMAS STEVENS, Day Attendant, examined.

*Witness* (to Dr. Levinge): I remember visiting ———'s room with the Head Attendant on Sunday morning, the 7th August. I remember meeting Thornton that morning in the ward. He passed the remark that he had not had a wink of sleep all night. I said I did not understand him.

(To Mr. Beetham): Thornton said he had not had a wink of sleep, that he had been kept awake by that man ———, or words to that effect; I do not remember exactly.

(To Dr. Levinge): He did not tell me that he had been in ———'s room. He had no right to go into ———'s room; he was not attached to my ward. It is not usual for day attendants to visit patients in other wards. I would resent an attendant from another ward visiting any of my patients unless he was summoned by the night attendant through the patient being noisy and he should be passing the door at the time. When I went into the patient's room with the Head Attendant, he was sitting up in bed and rolling about. He put his hand on his side and said, "For God's sake give me some brandy." The chamber was knocked about in the room.

(To Mr. Thornton): I am aware that the mops and buckets are often taken down to the locker; I have often seen you there looking for buckets. I did not think what you were there for that morning; you passed so quickly that I took very little notice. It is not usual for an attendant to go to a patient's room unless the patient is in his charge, or he is summoned by the night attendant. I could not say whether or not it is ever done.

(To Dr. Levinge): Thornton did not have a mop or a bucket in his hand that morning; he had nothing in his hand.

CHARLES SYKES, Night Attendant, examined.

*Witness* (to Dr. Levinge): I am in charge of the Main Ward. I remember the morning of Sunday, the 7th August. You reported of a man called ——— that he did not sleep at all and was noisy all night. It is not usual for an attendant to visit patients in single rooms unless I request them to do so. I did not ask Thornton to visit ——— that morning. I considered the patient was under my charge. Thornton followed me on that morning to get a cup. He did not tell me he had been in the patient's room. Nothing was said about ———. If he had been in the patient's room while the patient was under my charge, he should have told me. I saw the patient before I went on duty, about ten minutes to 6. He was lying on his back with the clothes up to his chest, talking and throwing his arms about.

*Mr. Newport* said it must have been about five minutes afterwards that he (Newport) saw the patient.

*Witness* (to Mr. Thornton): The man was noisy all night. To my knowledge, he was not knocking about the room. I was there twelve times during the night; he was in bed all those times. He did not make any rational statements to me. He made some slight complaint, but followed it up by an irrational statement immediately afterwards. He asked to be let go to Timaru to see Mr. Hall-Jones. He did not ask for brandy. I saw a little urine at the foot of the bed, that was all.

*Mr. Newport* said the patient made a complaint to him about ill usage when he went into the room.

*Witness* (to Mr. Thornton): I do not know of the patient using his chamber to hammer the door at night-time. Before the 7th August, I believe this patient's chamber had been removed three or four times because he was knocking the door with it.

(To Dr. Levinge): The patient had not been knocking his room-door that night with his chamber, not while I was there.

RICHARD THORNTON examined.

*Witness*: I should like to know if the statement I made to the doctor at the time will be put in?

*Mr. Russell* produced a statement, which he read: In answer to Dr. Levinge's questions,