REPORT OF PROCEEDINGS.

FIRST DAY (TUESDAY, 9TH JUNE, 1908).

SPEECH OF HON. G. FOWLDS.

THE Hon. Mr. FOWLDS, Minister of Public Health, in opening the Conference, said,—

I am very glad to have this opportunity to welcome you to this Conference, and I have no doubt that your deliberations will ultimately result in a Bill that will be acceptable to the Dominion at large. I have every hope that, as was the case when the Acts of 1885 and 1886 were introduced, the new Bill will not be in any sense of the word regarded as a party measure. As you are aware, the Bill which you have assembled to discuss proposes to make considerable changes in the law, and without doubt the various principles will elicit a very considerable and animated discussion. I believe you will all recognise that public opinion has demanded an amendment of the law. This public opinion has found expression year after year in Parliament, and promises have been made that legislation on the subject would be brought down. The chief principles of the Bill are,—(1) That the committees of management shall be essentially local; (2) that such committees shall be amenable to public opinion by being made elective; (3) that the expenditure on the various institutions should be somewhat localised; (4) that the Government, out of consolidated revenue, should meet a reasonable proportion of the cost of the institutions. I mention these principles first, because they were the cardinal principles of the Bill which was introduced by Sir Julius Vogel in 1885, and which subsequently became to a certain extent the law which now governs our hospital and charitable-aid system. You will notice, however, that two of the first-mentioned principles, the election of local committees, never became law; consequently they have been again introduced in the present Bill. The other chief principles of the Bill are,—(5.) The mapping-out of the Dominion into larger hospital districts. (6.) The direct election by the ratepayers of the Boards controlling the committees; such Boards to have longer continuity of office. (7.) That the District Boards should control hospitals and charitable aid. (8.) Putting a limit on the establishment of separate institutions. (9.) The Central Department assuming more control, and especially with regard to buildings and appointments. Now, it is not my purpose at this juncture—indeed, the time is not opportune—to dwell on the various principles embodied in this Bill. I shall have to face the subject in another place, but you may be sure that the suggestions and recommendations of this Conference will carry weight when the Bill is being discussed in Committee.

It is freely recognised that there are a great many gentlemen amongst you who have for a great number of years had considerable experience in the local administration of the Acts now governing our hospital and charitable-aid system. It was with a view of getting such gentlemen together that the Department adopted the suggestion of the Counties Conference of last year, and called this Conference after circulating the Bill among the various bodies concerned. I think that this Conference will agree with me that it was the right and proper thing to do, so that those who would have to administer the laws proposed should have at any rate some say in the framing of the Bill.

This is not necessarily the actual Bill which it is proposed to introduce, and there is little doubt that some of the remits already submitted will be included in the draft of the new Bill. Many of you are aware that the Acts of 1885 and 1886 were regarded at the time as tentative measures: it says much for the original framers that those measures have stood the test of twenty-three years, despite the advancement and altered conditions of the Dominion, social and otherwise. There are hospitals now in districts which at the time of the framing and passing of the Bills were never dreamed of; and in considering the Bills retrospectively it is exceedingly interesting to read speeches in *Hansard* when they were being framed. Especially have I been struck by Sir Frederick Whittaker's almost prophetic utterances on the likely effects of those Bills. He did not share the optimism of Sir Juius Vogel with regard to separate institutions, which were introduced with a view to stimulate private charity for their maintenance.

In 1884, the year before the Bill was introduced, of the thirty-one hospitals fourteen were maintained entirely by the Government, the remainder getting subsidies ranging from £1 to £3 for every £1 collected. The sums derived from voluntary contributions then amounted to about one-ninth of the cost of the upkeep of the hospitals of the then colony; now they have fallen to about one-thirteenth. In 1884 the expenditure on hospitals was £67,826, and on charitable aid £34,649 — total, £102,575. At that time the population of the colony was 552,590, against 968,797 in 1906–7, for which year the cost was—For hospitals, £185,942; for charitable aid, £102,866: total, £288,808. So that while the population has not doubled, yet the expenditure has nearly trebled. Though the expenditure has gone up out of all proportion to the increase in population, I will admit that the advancement of medical and surgical science and the exigencies of nursing have greatly increased the cost of hospital-administration; but, nevertheless, this great increase gives need for ample reflection.

And now let us turn to the question of the increase in charitable aid. It seems to have gone without the bounds of reason, despite the wave of prosperity which the Dominion has experienced this last twelve years. There is something wrong somewhere, and I sincerely trust that one result of your deliberations will be a reduction in this cost, especially that on outdoor relief, which cannot