

By such an arrangement the latter would feel in better touch with the parent institution, and such a scheme would also make for the *esprit de corps* of the nurses in the hospital district.

Having explained an ideal hospital district, we must now consider the amendments in the law necessary to carry out such a scheme. Such districts would of necessity have to be fairly large ones to justify the upkeep of the several institutions indicated, and it would be necessary for District Boards to have under their control charitable aid as well as hospitals. Larger districts would allow the Boards to take a wider view of the hospital and charitable aid of their respective districts, and decide where their base hospital and where their cottage hospitals would be situated. This would have the effect of limiting the constant demands for new institutions, as is the case at present. A large Board, moreover, would be better removed from the pernicious local influence which is having so disastrous an effect on our local administration, especially of charitable aid. There is every reason why a Board should have under its control hospital and charitable aid. Our hospital and charitable-aid system is so closely interwoven that any attempt to define its respective limitations results and will result in disputes between the controlling authorities. For example, a combined Board could decide where to send its cases—to the hospital, to the chronic ward, to the consumptive annexe, to the convalescent home, to the old people's home. But how could that be done under the present system, say, at Dunedin or Wellington, where there are practically four Boards controlling hospital and charitable aid? Two separate institutions and two Boards—two Boards spending the money of the two Boards who find it. What wonder, then, that disputes arise amongst these bodies as to which is responsible for certain cases? The matter is too absurd. If the Conference does not do anything else, I hope it will agree on the need for putting the control of hospitals and charitable aid under one large and representative Board.

The institutions of each district should be controlled by one Board, with local committees to carry out the details of management. It would also be necessary to insure to the Board and committees a longer continuity of office, so that the policy of the Board would not be liable to perpetual alteration, as is the case under the present system. Besides, it is some time before the members of Boards and committees realise the importance of the various problems with which they are confronted, especially with regard to the distribution of charitable aid. This particularly applies to the Chairman, honorary or paid, who should certainly be elected for three years; and, to my mind, this position should be an honorary one.

I have endeavoured to show the need for larger districts and for the control of hospital and charitable-aid matters being placed under one Board. These are provided for, as you know, in the Bill.

We will now turn to the more debatable provisions in the Bill—viz., (1) the mode of election, (2) the proposed reduction of the subsidies, and (3) the Government assuming more control.

As regards the mode of election, many of you are aware that there has been a constant demand for reform in this direction, so that the Boards should be more directly representative of those entitled to vote for members of local bodies; indeed, there are not a few who consider that the hospital franchise should be even further extended.

Speaking generally, the system of nomination by local bodies—in those districts where there are no separate institutions, and where the Boards combine the duties of hospital and charitable-aid administration—works well, though it is not directly representative of those who find the money. I believe that extension of the franchise in the manner indicated in the Bill should have the effect of obtaining the services of many excellent men, who, with no ulterior motive, would make a special study of hospital and charitable-aid matters, and who would confine their public duties to hospital and charitable-aid work.

However, it will be very interesting to hear the various opinions of delegates on this much-vexed question; but I am sure you will all keep in front of you that any legislation that is likely to have the effect of minimising local interest in our institutions would be a very grave mistake.

The Bill foreshadows District Boards taking over the separate institutions, except those mentioned in the schedule. Though I can well imagine that this will hardly meet the views of some of the Trustees, I feel sure that the reasonableness of the suggestion will commend itself to every person who has considered the subject. The present Act was framed with the view of casting on the local bodies the responsibility of providing the greater part of the cost of their local institutions, and thus reducing the demands on the Consolidated Fund, which shortly after the abolition of Provincial Government became almost outrageous. Until the passing of this Bill the grants from the fund were very unequally distributed. At the same time, it was recognised that putting this responsibility on the local bodies might have the effect of lessening voluntary contributions, consequently provision was made in the Act of 1886 for "separate institutions," with the view of encouraging the benevolent to continue their donations. So, if not less than 100 persons subscribe annually £100 in sums of not less than 5s., a separate institution can be incorporated, subject to the approval of the Board, or, failing that, to a commission appointed to inquire into its necessity or otherwise. In almost every case the request of the petitioners is granted, and the opposition of the Board overridden. The history of these institutions is that when once incorporated public interest dies, and the Trustees have to come on the District Board to make good the ever-increasing deficits. In speaking in support of the Bill of 1885, Sir Julius Vogel said, "The object we desire to compass by the Bill is, as far as I can see, identical with the ideal which has been set before us by nearly every speaker. That ideal is to avoid as far as possible *the having to deal with these institutions by means of local rates and to encourage as much as possible voluntary contributions*. The Government believe that nearly all institutions which it is desirable to continue to maintain will, within a reasonable period, be incorporated into separate institutions, and the bulk of those which are not incorporated by the local residents into separate institutions will be more or less institutions which it is not desirable to keep in existence. We therefore consider that within a reasonable period—say, a year or two, or more—all these institutions which it