Name.	Opened.	Controlling Authority.	Beds.
Te Waikato Sanatorium	1903	Public Health Department	60
Otaki	1906	Wellington Hospital Board	35
North Canterbury	1909	North Canterbury Hospital Board	
Pleasant Valley	1910	0. 77	3 0

In addition to the above, special annexes, providing in the aggregate accommodation for some 100 patients, have been erected at various hospitals—notably, Wellington, New Plymouth, Nelson, and Palmerston—in fact, there are few hospitals where special provision has not been made for patients in the early stages, but little or no provision has been made for those in the later stages of this disease. This lack of proper provision for the chronic and "incurable" patient is the blot on what might otherwise be regarded as a satisfactory initial campaign.

A working camp has also been established near Rotorua, where patients in whom the disease has been arrested, but who are not fit to resume their ordinary occupation, are engaged in tree-planting. During the past year the patients at the camp have practically supported themselves by wages paid them by the Lands Department for work done.

The time is now ripe to press the campaign. The public is better informed as to the need for precautionary measures, and members of the medical profession are less reluctant to notify cases of the disease, than was the case in the early days of the Department. Moreover, with the new Hospitals Act it is possible for Boards, with the aid of the combined Departments (Hospitals and Health)—especially if the Boards assume the responsibilities of local authorities under the Health Act—to put into operation measures of a more far-reaching nature than was possible under the old law and the old organization, where Hospital, Health, and Charitable Aid matters were controlled by separate authorities.

Briefly, the extended plan of campaign is as follows:-

- (1.) Rigorous enforcement of notification by the medical profession of all forms of tubercular disease. Though there were 800 deaths, there were only 556 notifications last year.
- (2.) A wider dissemination of literature as to the causes of the disease, and its prevention.
- (3.) Whole-hearted attempts to encourage the "early" case, and also those who had been in contact with consumptives, to seek treatment by means of—
 - (a.) Extension of the out-patient departments of our general hospitals, with a special branch devoted to the diagnosis and treatment of chest-complaints. From such a department the patient could be drafted for treatment to an institution suitable for his case. This department should also keep under supervision patients who have returned from sanatoria.
 - (b.) District nurses, who will keep in touch with the patients treated in the outpatient department, and see that they conform to the rules of life laid down by the medical attendant, arrange for the examination of suspected cases or "contacts," and keep the out-patient department informed of those who have returned from sanatoria.
 - (c.) Medical inspection of school-children: A report on this subject is now before the Government. If put into operation it should prove of great value in detecting early cases among school-children.
- (4.) Extension of "sanatorium" accommodation for the educative treatment of suitable cases. The smaller Hospital Boards should combine for the purposes of erecting and maintaining such.
- (5.) Provision by all Hospital Boards of suitable accommodation for patients in the chronic and "incurable" stages of the disease, special wards being needed for these classes.
- (6.) Establishment of a "working" sanatorium, where patients could be taught outdoor occupations—farming, bee-culture, forestry, the planting of fruit-farms, &c.
- (7.) By co-operation between public and private philanthropic agencies, whereby a nursing system could be developed at a maximum of efficiency with a minimum of cost; and also a system of relief, whereby the dependants on those isolated would be well cared for during the absence of the breadwinner.
- (8.) By co-operation with the Agricultural Department, as heretofore, in matters relating to the control of dairies and dairy herds, and the storage, conveyance, and distribution of milk; nor must be forgotten the need for better supervision of the slaughtering and inspection of pigs.

There is every reason for believing that Hospital Boards will gladly work in the direction outlined, and that the contributory authorities will cheerfully grant the money needed.