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evident, and I consider matters will not be on a better footing until a senior resident Medical Officer or Medical Superintendent is appointed, with extended powers of administration. I pointed this out to the Chairman of the Hospital Board and the Hospital Committee, and strongly urged the appointment of such an officer. I also made similar representations to the honorary staff, and it is to be hoped that the advice given will be acted upon, otherwise I feel confident that troubles will arise in the Hospital, especially as regards the admission and general treatment of the patients. [Note.-In June last Dr. McGuire, late Principal Medical Officer at Tonga,

was appointed Senior House Surgeon, with extended powers.] I was glad to see that the Board had decided to effect considerable improvements in the medical ward devoted almost entirely for the treatment of typhoid. There were 25 patients in the ward with this disease. The Board has decided to increase the lavatory accommodation in this ward, and provide new slop-sinks, which will facilitate the cleansing of utensils, &c. A verandah is to be erected on the eastern side of the male ward, which will be a great boon to patients, and allow for better ventilation of the ward and the treatment of patients in the open air. The Board also decided to arrange so that the patients in this ward would be nursed by registered nurses or probationers in their second year of training. Acting on the recommendation of the Medical Committee, the Board decided to recommend that nurses employed in this ward should be given the option of being treated with anti-typhoid vaccine.

There were too many chronic cases in the Hospital, and better facilities should be given than exist at present for such cases being transferred to the chronic ward at the Costley Home.

I also recommended the Board to provide accommodation for delirium-tremens and violent cases. At present there are no padded rooms for the reception of such. At the same time I pointed out that patients who had already been treated for delirium-tremens should not be admitted to the Hospital for the third or fourth time. As a matter of fact, there was one patient who had been admitted within a comparatively short time no less than four times on account of delirium-tremens, and I was informed that this man was in a position to pay for medical treatment outside the institution.

It is time that an institution of this size was provided with the services of a paid bacteriologist, who could manufacture the vaccines necessary and examine specimens for typhoid, swabs for diphtheria, and other matters necessary in the interests of public health.

The secretarial department of the Hospital was in excellent order.

The dispensary is now under charge of Miss Williamson, who lives in the Nurses' Home. The arrangement is working satisfactorily, and the state of the dispensary compares most favourably with those under male dispensers. The dispensing for the Costley Home is done here.

Much-needed additions to the Nurses' Home are well under way. It has been necessary to largely increase the nursing staff during the last year, partly owing to the adoption of the eighthour system.

Domestic and establishment: The chief increase in cost in this item has been in maintenance of buildings and improvement of Hospital grounds. The need for extra expenditure on the latter can scarcely be grudged.

Though there were 6 more patients on an average in the Hospital last year, the actual cost of provisions was over £200 lower. There is a slight decrease in "Surgery and dispensary," but an increase in the cost per bed in "Salaries and wages." The economics of this institution are being carefully watched by the energetic Secretary, Mr. Fenton.

Costley Home for Aged Poor.

Stipendiary medical staff: A. N. McKelvey, L.R.C.P., L.R.C.S.

Master: Dr. A. N. McKelvey.

Matron: J. Forbes.

Localities, broadly, from which patients came: Auckland District, 409; Bay of Plenty, 2; Waikato, 1.

Visited in January, 1910, and 14th March, 1911.

There were 229 patients in this institution—183 males and 46 females. I found that under Dr. McKelvey's régime matters affecting this institution had very much improved. Improvement was particularly noticeable in the dietary of the inmates, which was very much better served, and, apparently, better foodstuffs were in use.

The condition of the chronic ward was as good as could be expected, considering the fact that the inmates were attended to by male attendants, who, with the exception of the head attendant, had had little experience in the treatment of the sick. I am strongly of opinion that the patients in the chronic ward should be attended to by trained nurses, with a proportion of probationers. This is the practice in other chronic wards in the Dominion.

Improvement was also noticeable in the consumptive shelters, where there were 5 patients

under treatment. In the male shelters there were three vacant beds, and in the female four.

The dining-room and the kitchen need painting. With these exceptions, the institution was in most excellent order.

Alexandra Convalescent Home.

Honorary medical staff: D. M. Murray, M.B., M.D.

Localities, broadly, from which patients came: Auckland Hospital District.

Visited by the Assistant Inspector on the 12th January, 1911.

There were only 6 patients in, but 5 had gone out the day before. The Secretary said there

were several patients from the Hospital ready to go out.

The place is now being made good use of. The expense of keeping it up is much reduced. A nurse from the Hospital who had almost completed her term of training was in charge, having