

RUINOUS BUILDINGS.

The following notices for repairs or condemnation of buildings have been issued: For repair—Parnell, 11; Newmarket, 1; Mount Eden, 1; for condemnation—City, 6; Parnell, 3; Onehunga, 3; Devonport, 2; Otahuhu, 2; Te Aroha, 3; One Tree Hill, 1.

BUILDING-AREAS.

During the year much attention has been drawn to the question of overcrowding of buildings on land, and the suburbs of Auckland have been the scene of a struggle between the land-speculating, jerry-building fraternity and those who are unwilling to see potential slums established in so young a country.

In Epsom and One Tree Hill strong efforts were made to reduce the building-areas from the quarter-acre limit established some years since by by-law. There was much dubiety as to soundness of the legislation on which such by-laws were framed, and the doubt became certainty when a speculating company obtained in the Supreme Court a decision upsetting the by-law of the Mount Roskill Road Board requiring a quarter of an acre.

Strong representations to Parliament were made by both sides, and ultimately an amendment to the Public Health Act was hurried through in the closing-hours of the session, establishing the right of any local body to fix a minimum area. It is greatly to be regretted that the amendment did not also fix a definite limit of a quarter-acre for certain classes of land, since often the evil is done and the overcrowding begun in the very earliest stages of a town's growth, long before there is a local body to make a by-law on the subject. A simple remedy, and one in no way hampering the rights of local self-government, would have been a clause fixing the minimum area at one-quarter of an acre in the absence of any special by-law on the subject.

PROVISION FOR INFECTIOUS DISEASE.

Auckland Infectious Diseases Hospital.—A very severe strain was thrown on the accommodation at the infectious-disease wards of the General Hospital owing to the widespread epidemic of scarlet fever, and it was only by the rigid exclusion of any but the most necessary cases that the Hospital authorities were able to prevent serious overcrowding.

On the appearance of plague the Board made preparation for the opening of the reserve wards at Point Chevalier, but, fortunately, they were able to accommodate the three cases in the isolation block in the General Hospital grounds, and so avoided this extra expense.

In a few years it will be necessary to transfer all the accommodation for infectious cases from the Hospital grounds to Point Chevalier, which is without doubt admirably situated for this purpose.

PROVISION FOR CONSUMPTIVES.

As a result of a meeting of the Hospital Board, at which Dr. Valentine was present, it was resolved to make special provision for the reception and treatment of all classes of consumptives in the Auckland Hospital District. A committee of medical men has been formed to assist the Board as to the best methods.

QUARANTINE OF OVERSEA SHIPPING.

The only matter of special note in regard to port health work was the arrival of the "Knight of the Garter" from Lyttelton, where a case of small-pox in one of the officers had occurred. As all precautions had been taken already at the southern port, it was only necessary to keep the crew under observation for a few days while completing the quarantine period.

UNDESIRABLE IMMIGRANTS ACT.

Several cases were dealt with under the Act, chiefly in regard to tuberculosis. In one case the prohibited person was a youth in the earliest stages of the disease, who was willing and able to undergo treatment at the Sanatorium at his own cost, and in the event of failure was prepared to return to England. As he was a good type of settler the decision to exclude him seems unnecessarily harsh, as there was every safeguard against his becoming a danger or burden to the community.

SANITARY INSPECTION.

The subjoined tables, together with those under the Food and Drugs Act, summarize the principal work of the Inspectors for the Auckland District, Messrs. Grieve, Bennett, and Franklin. It says much for the energy of these officers that, in spite of the large area covered, the local authorities generally should have shown by their unwillingness to take advantage of section 83 of the Hospitals and Charitable Institutions Act, 1909, that they were satisfied with the existing system of contribution towards the salary of departmental Inspectors. The following bodies have joined this scheme during the year: Te Aroha, Te Kuiti, and Waihi Borough Councils, and Cambridge, Mount Wellington, and Tamaki West Road Boards. Remuera Road Board withdrew on finding that they were still legally responsible for the enforcement of the provisions of the Public Health Act.

We are now occupied in reorganizing the Inspector scheme, in consequence of the new provisions in section 5, Hospitals and Charitable Aid Amendment Act, 1910, whereby all work in connection with the investigation and prevention of infectious disease becomes the duty of the Hospital Boards. In this work we shall endeavour as far as possible to avoid disturbing the working of the former scheme of inspection in those districts where it has been established with satisfactory results.