

veniently be added to, there was no elasticity in the size of the wards, and the characteristics of patients varied from time to time. The inadequacy of the original designs had to be met by adding separate buildings, some connected to the main building, some quite disconnected. These buildings, though lacking architectural features, are simpler and better in design. Some are built in wood, and these are all single-story where patients are accommodated. The fire risk has been greatly reduced by doing away with the ordinary horizontal ceiling which forms the floor of a tunnel in which fire travels, and by having brick cut-offs at intervals. One naturally prefers solid structures, but rather than wait for funds that the additional first cost would entail, and for the time taken in building, it would be better to build a proportion of the requirements as above in detached blocks. We should aim at being a year ahead of requirements, or at the very least six months, plus a margin for classification.

The distributing of the patients at the closing of Mount View was equal to nearly a two-year surplus, and then the abandoning of the "reef site" buildings, when everything was prepared to be gone on with, was another set-back, diverting energies to trying to catch up to mere accommodation when one's anxiety was to get surplus accommodation for a proper classification.

The new Act has a procedure for the admission of minors, and it was hoped that we would be able to divide with the Education Department the duty of looking after the mentally deficient. Mrs. Cunningham, Official Visitor at Christchurch, has often drawn attention to young people of this class being in the ordinary wards, and so far we have only been able to provide for a mere handful of boys at Richmond. The estate there is too small to allow of extension, and Tokanui was chosen for the place to erect buildings, but the urgency of fulfilling the demand for ordinary accommodation has forced a postponement. Separate blocks will be necessary for juveniles and for adults of each sex, with subdivisions, and later separate buildings for further classification. I would point out in this connection that the orchard has been extended at Richmond, and the property has increased in value. Its sale would partly provide funds for this desirable object.

I sincerely trust that the building programme will be proceeded with without hindrance, and that one may look forward to carrying out in the near future the classification and treatment of patients on approved lines, and I am glad to know that the Department has your entire sympathy in this matter.

The first of the permanent buildings at Tokanui is now completed, capable of providing comfortable accommodation for fifty patients and quarters for the staff, also a general kitchen and laundry. A boiler-house and buildings for the electric-lighting plant are in progress. A reservoir is to be placed on a hill near by to get water under pressure. Two, or may be three, further buildings, each for fifty patients, can now be gone on with as one job; and, to reduce the delay and expense of carting, a working-party has been improving about two miles of the road from the Te Mawhai Railway-station, situate about a mile and a half from our first buildings.

Part of the initial scheme to expedite buildings and development and effect economy of administration was a light rail or tramway, the route of which was surveyed from the railway-station to the centre of the estate, but the work was deferred at the time—I trust not indefinitely.

Work is at last to begin which will remedy the overcrowding in Auckland. There is to be a brick block for seventy-five females and one for 100 male patients. The plans are designed to give ample accommodation for this number and to secure ease in working and facilitate observation. Ventilation has been considered, and the free admission of sunlight into every room. Into these buildings will be drafted the more turbulent patients, leaving the main building free of this class, and allowing certain structural alterations to be carried out to improve their lighting, comfort, and ventilation. When completed—and this should be at the earliest possible—the institution will be free from the difficulties of administration with which it has been handicapped. Even then, considering the growth of population in the town and northern district, it will soon be necessary to transfer to Tokanui suitable patients, especially those drawn from Waikato, and later to admit them to Tokanui direct.

With respect to the "reef," the mental hospital reserve which, owing to an agitation, we were not permitted to use in the manner best suited for our purpose—namely, by building upon—it should be sold and the proceeds applied for the permanent benefit of the institution. If the data furnished at the time of the value of neighbouring land and the depreciation which would follow if we built upon the site may be taken as a guide, the sale should furnish a good round sum, and enable us to purchase some neighbouring estate on which we could build for male workers.

At Porirua the additions on the male side have proved a great boon, and additional accommodation must be proceeded with for female patients. The convalescent cottage, run on the open-door system, could be put to other use, and a larger building of the same character substituted for it. Negotiations are pending for the purchase of a property capable of adaptation; but, should these prove unsuccessful, a site on the estate should be selected and building proceeded with.

At Sunnyside the new building for women was used as an isolation hospital during an epidemic of scarlet fever, which was introduced by a visitor to one of the patients. This building will prove a notable addition to our resources, being sunny, airy, and comfortable. The axis of the main institution is approximately east and west, with pavilions running to the south, an elementary error in institutional designing, and one very difficult to remedy, because the addition of pavilions to the north would intercept the sun streaming across corridors into rooms with a southern aspect, and make matters worse. It has been decided to build a separate reception block and hospital to be placed under the direction of a trained nurse, as in the case of the Wolfe Hospital in Auckland. As a desirable feature for a reception-house is a distinct entrance from that for the main institution. This has been secured by the purchase of land running in a line from the centre of the institution to Martin's Road. A roadway through this entrance will lead direct to the boiler-house, and will permit the closing of the present circuitous route for carting coal. The wiring of the institution for electric light is in progress, and when the Lake Coleridge power is available it will be utilized for lighting, pumping, and, to a limited extent, for heating.