405. What happened at that meeting?—The Minister asked me for a statement, and I made the statement verbally that I have written down and produced here. I wrote it on the 8th.

406. The Minister asked you for a report?—Yes, I was asked to put it in writing.

407. And that is the report you read this morning?—Yes. I made a verbal statement at first, with which the Minister was satisfied that it was not so bad as had been made out to him.

408. Were you informed that an inspection had been made of the hospital in your absence?—Yes.

409. By whom?—Major Elliott, I think.

410. Was he in charge during your absence?—He would be, I suppose. I know there was a report sent in, but I never saw it.

411. You do not know who sent it in?—No, I do not know definitely.

412. It was because of that report you were asked to see the Minister: was any change made in the hospital in consequence?—No.

413. You continued in control just as before?—Yes; but with the exception that they were to provide all accommodation.

414. Who are "they"?—The Public Health Department: they took all responsibility from my shoulders.

415. *The Chairman.*] You were in charge of the medical treatment?—Yes.

416. But the accommodation was left to the Health Department?—Yes.

417. *Mr. Salmond.*] When was Colonel Valintine appointed Director of Military Hospitals?—He was practically appointed on the 13th June.

418. He began to exercise his functions as Director of Military Hospitals on the 13th June?—Practically from the 6th June.

419. From that time he was practically in charge?—He took charge in providing buildings.

420. In what way did that affect your position as Director of Medical Services?—Practically not at all.

421. You mean you had the same functions as before?—Minus the camp. The arrangement that is now in existence is practically an arrangement that I myself suggested in 1911.

422. Do I understand rightly that you have no longer charge of the Trentham Camp?—I have nothing to do with Trentham Camp at all.

423. Have you anything to do with any of the hospitals?—No, except indirectly. The arrangement lays down that the Director of Military Hospitals will make all arrangements and provision for the sick in Wellington, also all arrangements for hospital and convalescent homes, sanitation of the camp, charge of the camp hospital, provision for the sick outside Trentham Camp, and arranging accommodation in hospitals and homes for sick and wounded on arrival from abroad.

424. Does not that mean this: that you have no longer any responsibility over the hospitals or sick men?—Absolutely no longer any responsibility.

425. When did that responsibility cease?—Practically, as I say, there was a sort of interregnum period between the 6th and the 20th. They guaranteed to provide accommodation, and we were to do the administration and medical attendance, so that by the 20th June there was a distinct line of demarcation between the two duties of D.S.M. and D.S.H., and it was arranged that the control of convalescents from hospitals be entirely in charge of the D.S.H.

426. I take it that Colonel Valintine's powers have increased since, and you gradually retired accordingly?—Yes. This scheme was a scheme I laid down for the mobilization for war in 1911. The only thing that none of us at that time expected was that there would be a huge standing camp.

427. What has happened to Berhampore since Colonel Valintine took charge?—I do not know. There are still patients there, as far as I know—there were up to a short time ago.

428. In smaller numbers than what there were before?—No, not as before. We had a rush.

429. *The Chairman.*] And is there a medical man there now?—No; there is no medical man resident at Berhampore, and there never has been.

430. Or attending daily?—I do not know whether he attends daily.

431. Have they temperature charts there now?—I do not know.

432. *Mr. Salmond.*] Who is in charge of Berhampore now if there are patients there?—I do not know.

433. Coming back to the beginning, who does the Berhampore Hospital belong to?—To the city.

434. Do you mean the Wellington Hospital Board?—No, the City of Wellington.

435. What buildings are there there?—There is what you might call a central block, and then three or four extra houses.

436. Take the central block?—It has what you might call two wards in it.

437. How many patients is that centre block adapted for?—I should think ten or twelve. The two wards could easily accommodate from twenty to twenty-four men.

438. And adapted for that purpose?—Yes.

439. What are the other buildings?—They are buildings that have been gradually put up round the central block—a sort of cubical spot for holding one or two people.

440. Were they intended for holding patients?—Yes, I should think so—isolation cases.

441. They are not connected with the main block?—They are close to it: one is about 6 ft. away.

442. How many additional patients would those extra buildings hold?—I should think altogether the buildings would comfortably and conveniently hold thirty patients, and in a squeeze at least forty.

443. What sanitary appliances exist there?—Now they have three water-closets.