A local subsidy suggested.

Undoubtedly a city gains enormously by the fact that a professional school is established within its area. This fact prompted one witness, Professor Park, of Otago University, to suggest that a local subsidy should be paid annually by the district in which the special school is situated. The proposal, in the absence of a satisfactory scheme of national bursaries for maintenance allowances, has much to commend it.

Enough has been said to show how difficult is the problem, and to emphasize the need for an expert and impartial inquiry into this vexed question.

A long-range policy desirable.

We consider that, in the best interests of the Dominion, a very definite and long-range policy should be laid down by the Government in respect of facilities for special professional education, and that a decision should be come to at an early date as to the locality for each special school likely to be needed during the next twenty years. Either the governing body of the University, or a special committee of expert professional men, should go into the question and make recommendations which, when adopted, should become the basis of public policy.

Evils of duplication.

Unnecessary duplication in a young country involves a dissipation of resources, and produces as an inevitable result two schools of mediocre standard. A professional school of high standard will give to the community graduates able to serve it efficiently and creditably; two schools of lower standard may flood the country with poorly qualified practitioners, who are a danger to society rather than a help. In subjects like medicine, dentistry, and engineering, in which the field to be covered by the teachers is ever widening the legitimate demands for increased staffing and equipment are very hard to satisfy at the best of times. Yet they must be satisfied, if professional men with the necessary outlook and training are to be forthcoming. It is essential that the Dominion should signify in no unmistakable terms that the unnecessary duplication of special schools must be avoided.

Every legitimate concession should be made to distant students.

But such a decision need not preclude the making of arrangements to lessen the hardship imposed on those students in distant centres who have to attend a professional school, *e.g.*, medicine, several hundred miles from their homes. It should rather facilitate the making of such arrangements. It is already the custom to allow the medical preliminary year in pure science to be taken in any University college. But this alone does not satisfy those who ask for facilities nearer home. It is argued, and with force, that, given good will on the part of the Medical Faculty at Dunedin, there is no good reason why medical students in their last year should not take their clinical instruction in Auckland or Wellington. It is claimed that in Auckland not only are there doctors and surgeons of the first rank, but also better and far more abundant clinical material in the hospitals of that city than in the smaller hospitals of Dunedin. Our inquiry showed that there is no strong opinion against the proposal in the Medical School, but that there is at the same time no great enthusiasm for it, and no constructive policy to give effect to it. It can readily be understood that a medical school desires to keep in close touch with its students right through their course; but we think we are right in saying that in many university medical schools the last year of the course is taken almost entirely in hospital, and that such lectures as are prescribed are given by specialist practitioners, and not by the full-time medical school staff.

If the arrangement asked for can be made without loss of efficiency, it seems highly desirable that active steps be taken by the Faculty to bring it into operation. Sir Lindo Ferguson, Dean of the Faculty of Medicine, in his evidence made the following statement:—

Should clinical teaching be provided at Auckland hospitals?

"A difficulty which is less easily overcome than the need of buildings and staff is the matter of hospital facilities whereby the clinical teaching may be made more practical and a larger amount of personal contact with patients ensured than is at present the case. We endeavoured for a time to obtain this result by a system of intern work on the part of selected final-year students, but for various reasons, unconnected with the working of the system, this valuable opportunity for practical work is no longer available. Some method whereby closer contact with the clinical work is obtained is more than desirable, and it may be that the solution of the problem will be found in carrying on portion of the training in residence in other hospitals of the Dominion than the Dunedin one."