H.—31. 34

check on both purchase and distribution is not very elaborate, whilst an effective stores system facilitates economical buying, avoids errors in ordering and losses from dead stock or excessive stocks, and also assists the financial control of the institution's activities.

There is considerable room for improvement in the purchasing methods adopted by some of the Hospital Boards, and it is satisfactory to learn that at the instance of the Hospital Boards Association steps are being taken towards the introduction of uniform specifications covering articles of common use in hospitals with the object ultimately of bringing about greater economy in buying.

It is recognized that "standardization" of supplies requires careful investigation and

study, and that it may take some little time to achieve agreement on the part of those

concerned as to what is to constitute the future standards for various articles.

However, the necessary inquiries are being actively pursued, and it is expected that standard specifications in respect of a number of textiles will be shortly made available.

Apart from the question of standardization there is need for a wider adoption of the

practice of obtaining and accepting quotations for supplies on a "line for line" basis.

STORES ACCOUNTING.

Stores should be defined as including any article of a consumable or non-consumable

nature required in carrying out the services of any institution.

Accounts for stores should be kept in such a form as will enable a properly classified and continuous record to be maintained of all stores. Wherever practicable the principle should be observed—that it should require concurrence and action on the part of two or more officials to complete a transaction.

The main points in a proper stores system are that all stores should be recorded both for receipt and issue, and every entry supported by proof of its accuracy. This envisages

the following minimum requirements:-

(a) Store ledgers.

(b) Official order forms. (c) Internal requisitions.

(d) Inventories for non-consumable stores and their periodical check.

(e) Proper regard to writing-off unserviceable stores and breakages.

(f) Yearly stocktaking.

The system for the larger institutions would naturally involve greater detail than for the smaller institutions, and extra subsidiary records applicable to special sections or departments.

HOSPITAL INQUIRIES.

During the year serious administrative trouble developed at Grey and Waihi Hospitals. The dissension at Grey has been in evidence for the past two or three years, and it was hoped that with the changes in executive officers and the personnel of the Board that the institutional administration would proceed smoothly. Unfortunately the reverse happened, and culminated in February, 1936, in the resignation of the Medical Superintendent, Matron, and six Sisters. Endeavour was made by the Board to hold an inquiry, but owing to the fact that the ex-Matron had left Greymouth immediately on handing in her resignation and also that the six Sisters declined to make any statement before the Board, proper investigation was not possible.

At Waihi the troubles arose owing to the action of a majority of the Board insisting on the reinstatement of a Hospital Aid who, in the opinion of the Medical Superintendent, was incompetent. This Hospital Aid had been suspended by the Medical Superintendent in July, but in the same month the suspension was removed by the Board. In view of subsequent action on her part she was given notice of dismissal by the Medical Superintendent

While she was under notice of dismissal the Board held an inquiry into the circumstances, and decided to terminate the services of the Matron and to order the Superintendent to reinstate the Hospital Aid. Following this, the entire nursing and domestic staff tendered their resignations. The Medical Superintendent and the Assistant, consequent on the Board's insistence on the reinstatement of the Aid, also resigned.

Unsuccessful endeavours were made by the Department to bring about a reconciliation. Subsequently the Board experienced considerable difficulty in obtaining a suitable nursing

staff, and only one application was received for the position of Medical Superintendent.

It is noteworthy that in both the Hospital Boards controlling these institutions there has been and is intense difference of opinion among the members of the Board and, in my opinion, where the lack of harmony exists on a Board, troubles such as these are very likely to arise. Under existing legislation the Department's jurisdiction is distinctly limited, and however unreasonable may be the decisions of the Board, provided they do not involve any illegality, the Department appears to have no power actively to interfere.

QUEEN MARY HOSPITAL, HANMER.

The work at this hospital continues to increase. The women's block is practically always at full capacity. A new block for men has been approved and plans and specifications are being prepared.

> R. A. Shore, Director, Division of Hospitals.