

In comparison with the figures of the previous year, increases will be noted in the figures for admissions, discharges, and deaths.

I think it is worthy of note that over 22 per cent. of all admissions for the year entered hospital as voluntary boarders. The nature of the great majority of mental disorders precludes the possibility of such cases being admitted voluntarily. The great majority of these cases lack volition, lack insight, and are incapable of seeing the necessity for making a written application for such admission. I think that under these circumstances the percentage of admissions who have voluntarily applied for treatment and have been admitted at least indicates that there is a growing section of the public which has an appreciation of the possibilities of the early treatment of nervous and mental disorders and a confidence in the facilities which the Department has available for such cases.

An extension of the principle of psychiatric wards in general hospitals has been carried out by the opening in May last of a small ward in the Wellington Public Hospital for male patients, so that there is now available in the Wellington Public Hospital, under our supervision, male and female psychiatric wards for the observation and, where possible, early treatment of cases exhibiting some mental or nervous symptoms. Statistics show that the organization of these units and the work in these wards has been well worth while. Even those cases whose psychosis or psychoneurosis necessitated eventually their admission to the mental hospital, during their period in the psychiatric ward the complete technical organization of the hospital, such as laboratory tests, X-rays, &c., has been conveniently available for the investigation of the physical aspects, if any, of their mental illnesses. The psychiatric out-patient clinics at the Wellington Public Hospital and the Palmerston North Hospital have continued as formerly.

The numbers of individual cases dealt with during the year are as follows:—

(1) Cases in male and female psychiatric wards, Wellington Public Hospital ..	138
(2) Bi-weekly out-patients clinic, Wellington Public Hospital ..	194
(3) Palmerston North Hospital Clinic	96

Separate persons seen	428
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The most important building completed during the year was the new stores block, which is now in use and allows of efficient storage and issuing of stores. The adjoining boiler-house, engineering, and artisans block is nearing completion and when in occupation should facilitate a more efficient working in these sub-departments, and, in the case of the new boiler-house, overcome certain technical difficulties existing with the present plant. A new bakehouse and butchers' shop, especially the former, are amongst our most urgent needs.

It is hoped during the year to obtain money to make structural alterations to the administration block, in providing visiting-rooms and additional medical and clerical offices. When the present engineering block is evacuated it is hoped to convert same into an attendants' mess and recreation-room and have the ground floor fitted up as an occupation centre for basket-making, weaving, handicrafts, &c. Plans have been drawn up for an extension of the main hall, reequipment of the kitchen in the main building, with some decentralization by the addition of four small kitchens in the main female block.

During the year the artisan staff has been fully occupied in repairing and renovating existing buildings, and a certain amount of this work has been carried out by contract.

The interior of the Nurses' Home has been painted and papered. The dormitories, corridors, day-rooms, &c., of the female wards A, B, C, E, and H, and the male wards I and 8, have been renovated throughout. At present the exterior of the male wards 6, 7, 8, H, cottage, and certain staff residences are being renovated. Additional poultry-houses were erected during the year, and extensive repairs were made to the upper and lower reservoirs. In the five villas, supporting piles were replaced, and improvements made to the ventilation. Flooring was renewed in wards M. 6 and M. 7, whilst alterations were made in the bathroom of the lower building block by the addition of showers, and a considerable portion of the malthoid roofing of the same block was renewed with galvanized iron. Hot-water extensions were made at Rauta and the staff quarters in M. 7.

A staffing innovation made during the year was the appointment of a full-time hairdresser. The facilities made available by this appointment have been much appreciated by a large section of our patients, more especially those in the female admission and convalescent wards.

The therapeutic value of useful employment has been constantly kept in mind during the year, and wherever possible patients have been encouraged to interest themselves in useful work on the farm, in the gardens, artisans' shops, sewing-rooms, and in domestic tasks about the villas and wards. Instruction in cane-work by the occupation officer during the year has been extended, more especially to those cases who, for various reasons, have not participated in other forms of occupation. The recent appointment to the nursing staff of a nurse qualified to teach weaving and simple handicrafts has enabled us to commence with weaving.

On the whole, the health of the patients during the year has been reasonably good, the only unusual feature was that we had, during the year, seven cases of typhoid, one of whom died. These cases were confined to a ward housing the more difficult patients and in a ward where the prospects of "contact infection" were at its greatest. Fortunately, early active measures of isolation and preventative inoculation limited the outbreak to seven cases. Despite the active co-operation of the Health Department and considerable investigation by my Assistant Medical Officers on staff and patients, we were unable to trace the carrier or source of entry of the bacillus to the hospital. The mode of infection was proved to be by direct contact and not due to the general water, milk, or food supply to the hospital. Prior to these cases there is no record of typhoid at Porirua for over fifteen years.