

Where it is possible to make satisfactory arrangements elsewhere for the mother beforehand, and for mother and baby subsequently, the St. Helens Hospitals can take the unmarried mothers for the actual confinement period. This also applies to the majority of Hospital Board annexes, and, of course, similar arrangements can be made with private maternity hospitals.

ECONOMIC CONSIDERATIONS.

Finally, the Committee has discussed the economic considerations involved as follows :—

“Modern maternity care of the standard rightly regarded as necessary in New Zealand cannot be cheap. Whether it be hospital service or full-time domiciliary nursing attention, the expenses are necessarily considerable. The only cheap service is a no-doctor district midwife system with the nurse attending daily and not living in the home; this, the Committee is convinced, is not generally acceptable in New Zealand.

“The Committee gave close attention to the question of costs throughout its investigation.

“It is satisfied that the fees charged in the public maternity hospitals are by no means high for the service given; this is clearly proved by the fact that they rarely cover the cost per patient in these hospitals.

“The provision of even the minimum facilities and equipment necessary for carrying out the recognized aseptic and antiseptic technique; the addition of an antenatal service requiring extra facilities and extra staff; the payment of nurses in training who previously received no remuneration; the increase in staffing necessitated by shorter hours; a much developed teaching syllabus and a standard of care which calls for closer supervision of the patient—all these factors have added greatly to the hospital costs.

“Similarly, the private maternity hospital fees are not high when the costs of maintenance and the work involved are taken into consideration. Maternity nursing is exceedingly arduous and responsible, and the administration of a maternity hospital is associated with particular difficulties owing to the uncertainty of the dates on which patients will be admitted to hospital; no maternity hospital is able to book patients up to its full capacity.

“Few maternity hospitals, regarded as investments, would be found to be giving an adequate return for the capital involved. In the majority of cases they are merely providing a home and a moderate living for the nurses who own them, or, in the case of doctor owners, a satisfactory environment in which their midwifery work can be conducted.

“The Committee is also satisfied that, taking into consideration the range of service involved, the responsibility and the exacting nature of the work, the medical fees in midwifery practice are moderate and in some cases quite inadequate. Thus, while the total costs when paid by the individual may seem considerable, the charges for the various items of the service are by no means excessive.

“The fact must also be faced that certain of the improvements recommended in this report—the further development of doctor attendance, the extension of the antenatal and post-natal services, and the more general administration of pain-relief—would add somewhat to these costs.

“The economic problem, therefore, appears to be not how the services can be cheapened, but how the individual in need can be assisted to meet these necessary costs.

“It is quite clear that the expenses of the service are beyond the means of a large section of the community and a definite burden to others.

“Already the care of the indigent in maternity has for some years been the statutory responsibility of all Hospital Boards, and satisfactory provision has been made in most Hospital Board districts. The Committee has recommended the development of the maternity hospital system in such a way that the deficiencies in this respect shall be remedied and assistance to the indigent shall be available in all cases.

“The position of those who, while not indigent, find difficulty in meeting the expenses of confinement, has also been very considerably helped by the provision of public maternity hospitals—either St. Helens hospitals or maternity annexes to general hospitals—in which very adequate facilities are available at a moderate fee which is further subject to adjustment according to the circumstances of the patient.

“In a number of instances a very valuable assistance has been given to still another section of the public by making the public maternity hospital facilities available for those who desire the services of their own doctors. It will thus be seen that at the present time a very great deal of public assistance is being given both by providing modern hospital facilities and by giving service to the recipient either free of cost or at reduced fees.

“In the majority of cases this public assistance is based on the midwife system, with a doctor available in cases of difficulty.

“It will be understood that, under existing conditions, the development of the maternity services in certain directions which have been considered desirable would necessarily call for further public assistance.

“An alternative method of meeting the relatively high costs of this complete maternity service is by a system of health insurance.