

Dr. Truby King has made some interesting remarks on the prevention of insanity in his annual report, to which I would draw your attention. He deals with early nutrition in relation to cerebropathies, a matter upon which he has earned the right to speak with authority.

In this connection, even from the limited point of view of this Department, I desire to place on record an opinion that the work and example of Lady Plunket, during her residence in the Dominion, in exalting the ideal of motherhood, will leave a beneficial impress on our future statistics. When dealing with heredity in a former report I stated that a lessened resistance, similar in its after-effects, might be created by ignorance of the nutritive needs of the rapidly developing organism for some months before and some years after birth, and that the subject was one of immense importance to the State. It will be seen that the bearing of Lady Plunket's mission upon this aspect of the subject is direct, and justifies the opinion expressed.

*Weekly Reports.*—One of our statutory books is a Medical Journal in which the Medical Officer of each institution records once a week, among other matter, an epitome of facts relating to the employment and recreation, and the health of the patients. The information required has been extended to a summary of the work of the institution from week to week. A copy is sent to the Head Office, bringing it directly in touch with the doings in each mental hospital. One is able to institute comparisons concurrent with the happenings, and have a knowledge of the salient factors in the life of the whole body of the patients. This return has proved very useful.

*Accommodation.*—To make proper provision for the patients has given us much anxiety. In addition to keeping pace with the natural growth, there has been the knowledge that the population of Mount View would have to be provided for, and therefore additions have been in progress, large at Porirua and on a smaller scale elsewhere; but necessitating some crowding pending the outlet to our overflow which will be provided by the proposed mental hospital at Tokanui. It was expected that by this time we should have been busy there with building operations, but to the taking of the Native portion of the land objections have been lodged, and these have still to be heard before we can get to work. In the meantime, preliminary buildings are designed, and, once the objections have been disposed of, there will be no delay in making a start. I had hoped to publish in this report a lithograph of the estate, showing the details of the proposed scheme of the new hospital; but, under the circumstances, this must be incorporated in the next report. The general interest evoked by your communication of the broad guiding principles laid down, and of its unqualified approval by the Press of the Dominion, is very encouraging to those who are engaged in the working-out of details. Some papers had apparently published their articles before getting the full text of your remarks, and were led into the misconception that the proposed hospital at Tokanui was to replace the existing mental hospitals. Of course, such centralization is out of the question. The mission of the Tokanui Hospital for some years to come will be the absorbing of the yearly increment, leaving the other hospitals much the same size as they are at present, by providing for the reception by transfer of numbers of patients who as a class can be managed in less expensive institutions than the ordinary mental hospital. This class comprises for the most part patients who keep very fairly well under skilled supervision, but are quite unable to adjust themselves to the larger environment of the world outside the institution. Their transfer will supply workmen to assist in developing the new estate, and accommodation in the hospital they have left for patients requiring stricter supervision and more active treatment.

The Wolfe Bequest Hospital is practically completed, and will soon be in occupation. The success which has attended the reception cottage established at Seacliff some years ago assures the new hospital filling a want, if any assurance be needed.

At the time of writing, the Mount View Mental Hospital has ended its career of usefulness. The majority of the patients have been removed to Porirua, and a few, the remainder, have gone to Sunnyside and Seacliff. When we are free to build at Tokanui, a proportion of the patients so transferred will be sent there, leaving the accommodation which was provided for them to meet future needs. The removal from Mount View was a large undertaking, carried out, to the credit of all concerned, without a hitch. Work was found for all members of the Mount View staff, and in the destination chosen for them and for the patients transferred individual preferences were given effect to as far as possible. No one unassociated with the care of the insane can realize the difficulties under which the officers worked during the last year of the hospital in order that the patients should not suffer inconvenience or restrictions of liberty nor yet be exposed to danger, conditions difficult to fulfil with a large building under progress across the front of the old, and with portions of the old building being removed as the patients who had occupied it were transferred. I must take this opportunity to congratulate the officers and other members of the staff.

In the last report he would issue from Mount View I asked Dr. Crosby to place on record the history of that institution. In my many visits during its closing year I had some touching evidences of the attachment of the patients to the old place.

*The Staff.*—I have every reason to believe that the nursing staff and other workers are satisfied and have performed their duties faithfully, and I would once more point out the hardship they suffer with respect to the superannuation allowance when compared with employees in other Departments of the public service. Their salary is obviously the money paid plus the emoluments of board, lodging, washing, &c. If we required them to live out we should have to pay a higher salary, and on this the superannuation allowance would be calculated as a matter of course; but we require them to live on the premises, and the value of the emoluments (by which sum in effect their salary is reduced) should benefit them when they come to retire.

The following names were added to the Register of Mental Nurses. Names which appeared before are those of candidates who had obtained second-grade certificates (under 70 per cent. of