CORRESPONDENCE

RELATING TO

THE MANAGEMENT

OF THE

CHRISTCHURCH HOSPITAL

SEPTEMBER 20, 1870.

CHRISTCHURCH:
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MDCCCLXX.

CORRESPONDENCE

RELATING TO

The Management of the Christchurch Hospital.

To His Honor
The Superintendent of Canterbury.

Sir,

We the undersigned Members of the Medical Profession practising in Christchurch, beg to bring under your Honor's notice the desirableness of increasing the Hospital Staff, for the following reasons:—

Coincidently with the abolition of the Lyttelton Hospital, the introduction of machinery into various branches of industry, the extension of the railway, and the increase of population, it has been found necessary from time to time to considerably enlarge the accommodation afforded by the Christchurch Hospital. At the present moment it numbers sixty-seven beds, and there is every prospect of further additions being shortly found necessary.

As the Members of the present unusually small Staff are actively engaged in private practice, the Hospital duties not only press heavily on their time, but it is manifestly impossible that they can do justice to such a numerous body of cases as are constantly under treatment; and further, no provision is made for the attendance upon urgent cases during the absence on private Professional engagements of the Visiting Staff—an event by no means improbable.

Cases of a grave nature frequently occur where it is desirable that more than one opinion should be sought. Under these circumstances, the custom of the present Staff has been to call a consultation of Medical Practitioners unattached to the

Hospital; and it is clearly unjust that assistance thus obtained should receive no equivalent. Moreover, under the present arrangement, the Christchurch Practitioners are deprived of the opportunities of scientific study afforded by Hospital practice, and thus the community at large must necessarily suffer.

We would submit to your Honor's notice how different is the practice pursued at home, where in Hospitals containing on an average under twenty beds, the Staff numbers not fewer than five, and in such as are commensurate in their accommodation with the Christchurch Hospital, the number of Officers on the Professional Staff is seldom, if ever, under ten.

We append, as a precedent, a list of twenty English Hospitals, taken from the Medical Directory.

We would, therefore, respectfully suggest that the Staff should be increased to seven; and we have good reason for knowing that the following selection would meet with the approbation of the Profession:—

CONSULTING SURGEON:
BURRELL PARKERSON, ESQ.

VISITING PHYSICIANS:
W. DEAMER, M.D.
C. NEDWILL, M.D.
J. D. FRANKISH, M.D.

VISITING SURGEONS:
H. H. PRINS, ESQ.
J. S. TURNBULL, M.D.

OPHTHALMIC SURGEON AND PATHOLOGIST:
L. POWELL, M.D.

(Signed)
WM. DEAMER, M.D.
COURTNEY NEDWILL, M.D., Q.U.I.
J. D. FRANKISH, M.D.
L. POWELL, M.D., L.R.C.P.
BURRELL PARKERSON.
J. W. S. COWARD, L.S.A.L.
JAMES. S. TURNBULL, M.D. Edin.

Christchurch,
April 16, 1870.

Name of Hospital or Infirmary.	Number of Beds.	Consulting Physicians.	Visiting Physicians.	Consulting Surgeons.	Visiting Surgeons.	Total Number of Staff.
Bradford Infirmary	68	One	Two	Two	Five	10
Royal South Hants Infirmary, Southampton	67	One	Two	Three	Three	9
Huddersfield Infirmary	60	One	Two	Two	Five	10
Stockport Infirmary	50	None	Two	One	Four	7
Durham County Hospital	48	One	Two	None	Two	5
Stamford, Rutland, and General Infirmary	44	None	Two	None	Four	6
Sunderland General Infirmary	40	Two	Two	One	Four	9
Torbay Infirmary, Torquay	40	Three	Three	One	Three	10
Halifax Infirmary	30	One	One	One	Three	6
St. Mary's Hospital, Manchester ...	30	One	One	Three	Six	11
West Kent General Hospital	30	None	Two	One	Two	5
Coventry and Warwickshire Hospital ...	26	None	Two	None	Three	5
East Sussex, Hastings, and St. Leonard's Infirmary, Hastings	22	One	Two	None	Four	7
Newark upon Trent Dispensary and Hospital	22	None	Two	None	Three	5
Strand General Hospital	20	None	One	Two	Two	5
Dover Hospital	16	None	Two	None	Three	5
Kidderminster Infirmary	12	One	None	None	Three	4
Salford and Pendleton Royal Hospital and Infirmary, Manchester	10	Two	One	Two	Six	11
Clayton Hospital and Wakefield General Dispensary	6	None	One	None	Two	3
Monmouth Hospital	3	None	One	None	Two	3
CHRISTCHURCH HOSPITAL ...	67	None	One	None	One	2

Superintendent's Office,
Christchurch, Canterbury, N.Z.,
June 6, 1870.

SIR,

As the gentleman whose name appears first on the list of those Members of the Medical Profession who addressed a Memorial to me in the month of April last, on the subject of the desirableness of increasing the Staff of the Hospital in Christchurch, I have to communicate to you the decision of the Government on the points submitted for its consideration. I may state that I have, since the time that the deputation waited on me, taken occasion to gain all the additional information that I could obtain on the subject, and to consult the Medical Officers at present engaged in the Hospital as to the proposals made in the Memorial The Government has now considered the whole question, with a desire to meet the wishes of the Profession, and at the same time to promote the efficiency of the Hospital. The opinions of the Medical Officers at present connected with the Hospital, upon the suggestions contained in the Memorial are at variance, and strong objections are alleged by one Officer to the proposed increase; it therefore remained for the Government to consider the force of those objections, and to obtain all the additional evidence it could respecting the management of Hospitals in other Colonies, and in other parts of New Zealand.

In doing this I have had the advantage of consulting a very valuable Memorandum issued by the Imperial Government on the subject of the management of Colonial Hospitals throughout the world.

Of these Hospitals, those in this hemisphere, especially those of Tasmania and Victoria, are spoken of as the most satisfactory. The following Table gives the particulars which bear upon the question under consideration.

Average Number under Treatment at one time.		Medical Officers.	Proportion of Honorary Non-resident Officers to Patients.
TASMANIA ...	126	One Resident and Restricted, and Four Non-resident	1 to 31½
MELBOURNE ...	320	Four Resident and Restricted, and Sixteen Honorary	1 to 20
GEELONG ...	135	One Resident and Restricted, and Four Honorary	1 to 34 nearly
CASTLEMAINE ...	90	One Resident and Restricted, and Four Honorary	1 to 22½
BALLARAT ...	94	One Resident and Restricted, and Six Honorary.	1 to 15⅔

On an average about one Honorary Officer to 25 Patients.

In the Colony of New Zealand I am informed that there are:—

	Beds.	Physicians and Surgeons.
IN THE DUNEDIN HOSPITAL	155	One Resident and One Assistant, and One Visiting Medical Officer
„ WELLINGTON „	45	One Resident Dispenser, and One Medical Officer
„ NELSON „		One Resident Surgeon in charge of all cases

At Hokitika, with 60 beds, there is one Surgeon Superintendent, with four Medical Visitors, who are said to be Consulting Officers, taking a turn of duty by rotation.

In the Christchurch Hospital the average number under treatment during the past twelve months has been 35, that is one Visiting Officer to about 17 patients, and I am informed that a number of these are chronic or routine cases, which do not require daily attention.

From the statements made to me I gather that the Surgical cases do not press heavily on the time of the Visiting Surgeon, but that the Visiting Physician finds that he is unable, in justice to his private patients, to devote the time necessary to the cases which come under his charge.

I agree with the opinion implied in the Memorial, that provision should be made, with the approval of the Government, for attendance upon urgent cases, during the absence on private Professional engagements of the Visiting Officers, and such I understand from the document before me to have been the case hitherto.

From the facts above given as to the other Hospitals, and the evidence of the Officers in the Christchurch Hospital, it does not appear to the Government that any material increase of the Staff would be necessary to the efficient working of the Hospital, and I am here bound to take occasion to express the high sense which the Government entertains of the services of the Medical Officers now connected with the Hospital, and the cordial manner in which they have worked with the Government in the interests of the Institution.

The Government is desirous of giving to other Medical gentlemen the opportunity they seek of scientific study, which is afforded in a Hospital, both on their

own account and that of the public generally, so far as it considers this can be done without impairing the efficiency of the Institution for the administration of which it is responsible.

One of the first considerations which presents itself in regard to the administration of this, as of any other department of Government, is the necessity o maintaining a well-defined responsibility between the Officers of the Instititution and the Government, no less than between the several Officers themselves. The creation of a number of offices of equal authority, and in the same relation to the Governing Body (the Provincial Government) would obviously tend to a diffusion of responsibility which would render the control and economical management of the Institution a matter of considerable difficulty.

The intention of the Government, therefore, is to request the present Honorary Officers, after the lapse of a specified time, to take the position of Consulting Physician and Consulting Surgeon to the Hospital, and to appoint other Officers in their place for a limited period, thus giving different Members of the Profession, from time to time, an opportunity, should they desire it, of holding a responsible office in the Hospital. This arrangement will not, of course, interfere with the practice which now prevails, of consulting other Members of the Profession in extraordinary cases.

I have only, in conclusion, to express a hope that the decision which I have now communicated to you may meet the wishes of the gentlemen, who, together with yourself, signed the Memorial, and may be satisfactory to those Members of the Profession in the Province who may desire at some time to avail themselves of the opportunities sought by the Memorialists, and which they could scarcely look for were appointments conclusively made for an unlimited period.

I shall feel obliged if you will communicate the contents of this letter to the other Medical Gentlemen signing the Memorial.

I have honor to be,
Sir,
Your obedient servant,

WM. ROLLESTON,
Superintendent.

To William Deamer, Esq., M.D.

Christchurch,
27th June, 1870.

To His Honor
William Rolleston, Esq.

Sir,

We have the honor to acknowledge the receipt of your letter dated June 6, 1870, and numbered 290, and in reply we beg to state that after a very careful consideration of the whole question, we think it incumbent upon us, respectfully to solicit your Honor to appoint a Commission to enquire into the management of the Medical Department of the Government, or to ask you to entrust that duty to a Select Committee of the Provincial Council during its next session. Our reasons for making this request we give in detail.

In your reply to us you state that "it does not appear to the Government that any material increase of the Staff would be necessary to the efficient working of the Hospital, because—

"1st. An increase would tend to the diffusion of responsibility.

"2nd. That extra assistance can be secured outside the Hospital Staff.

"3rd. That the number of patients attended by each of the present Staff is not greater than that allotted to each Officer in other Hospitals.

"4th. That the Visiting Surgeon finds that his cases do not press heavily upon his time."

You further state that it is your intention to request the present Honorary Officers, after the lapse of a specified time, to take the position of Consulting Physician, and Surgeon to the Hospital, and to appoint other Officers in their place.

We may be permitted at the outset to express our feeling of dissatisfaction with the scheme of management laid down in your memorandum; but before we enter upon its merits we desire respectfully to bring under your notice that we are justified in making the complaint that you have carried out this scheme prior to making any reply whatever to the petition of the profession recently laid before you.

We respectfully submit that in the ordinary sequence of official intercourse of Government with petitioning bodies, it was fairly our due that we should have received a reply before you brought your own scheme into actual operation.

In entertaining this expectation, we submit that we were not unreasonable, especially when the scheme initiated by you is so entirely opposed to the one brought by us before you, with all due attention to the forms which are properly enforced upon petitioners.

We submit that it cannot be conducive to the continuance of a wholesome respect for the Officers administering Government that the Officers themselves should so completely ignore the forms surrounding the intercourse of the public with the Government.

We feel that it might be more judicious for us to pass unnoticed your practical denial of our petition; but inasmuch as a scheme entirely opposed to our own has been already initiated by your Honor, we find ourselves not only arbitrarily debarred from that impartial hearing which you so recently pledged yourself to give to public grievances; but we have imposed upon us much additional labour and annoyance in our attempts to secure the position which we desire to occupy.

We trust that your Honor will admit that we have stated this our first complaint not only plainly but courteously.

We confess, however, that when we proceed to our second ground of complaint, we do so with a fear lest even the plain statement of facts should seem to violate the courtesy which we are so anxious should characterize our remarks.

We do sincerely deprecate the entertainment on your part of any idea of a lack of respect for your office or yourself.

Some such preliminary warning seems necessary, because the point to which we have now to draw your attention embraces a very marked departure from your word or promise.

It will be within your recollection that on the 16th day of April last, four Members of the Medical Profession waited upon you and presented a petition (signed by seven), praying for an increase of the Hospital Staff. That you then discussed the question with them; that you informed them "you had for some time held views in unison with their own as to the desirableness of increasing the Hospital Staff, but that from the near approach of the election for the Superintendency you could not entertain the idea of making any new appointments in any department of Government whatever, as you had decided upon undertaking only routine work during your present term of office;" and you moreover concluded by informing the deputation that, "if in the event of your re-election, it could be shewn that the proposed increase would not interfere with the efficient working of the Hospital, you would gladly comply with the wishes of the Profession."

You will remember also that when speaking to the Electors of Lyttelton you said, "It is advisable to have the Hospital as large as possible, in the central town, as patients can receive better attention, and besides it offers greater facilities for forming a School of Medicine in connection with it," a view especially enforced by us upon your Honor as a reason for the desired increase of Staff. We have laboured

under the impression that your promise to the deputation and your statement to the electors involved a guarantee that the views and arguments of the Profession would be duly heard and considered.

It was with considerable pain, therefore, we learned that not only had the views of the Profession been deemed unworthy of consideration, but that their Petition was left without a reply until you had put in force a scheme wholly at variance with their views.

Lest any doubt should rest upon your Honor's mind as to the nature of our complaints, we now beg respectfully to repeat them.

1st. That seven Members of the Medical Profession having presented a Petition praying for an increase of the Hospital Staff, you, prior to sending any reply to the deputation, made permanent arrangements for the Medical attendance of the Hospital, at variance with the prayer of the Memorialists.

2nd. That having made an expressed promise that should the arrangements proposed not threaten to impair the efficiency of the Hospital you would gladly comply with the wishes of the Profession, you, without giving a single opportunity to the Profession to prove that the efficiency of the Hospital could not be impaired by the proposals, ignored your promise to the deputation, and denied the Profession a fair hearing.

We have already earnestly deprecated the idea that we have any desire to detract from the respect due to you, but, in common, we imagine, with the rest of the community, we believe that that respect would be perfectly worthless if unaccompanied by a respect for ourselves.

That self-respect necessitates the assertion that the promise distinctly made to us, entailed upon you, the obligation of ascertaining fully the grounds upon which the unanimous opinion of the Profession rested, previous to making any permanent arrangements.

That opinion was based upon the fact that we received our Professional education within the walls of European Hospitals, that subsequent to that time we have had opportunities of seeing the working of other Hospitals, and that we have had ample opportunities of forming an opinion upon the efficiency of the Christchurch Hospital. When, therefore, we, with four other Members of the Profession, asked for an increase in the Staff of the Christchurch Hospital, we naturally supposed that we had such a knowledge of the subject as would justify us in expressing an opinion. We gave it as our opinion that the efficiency of the Hospital could not be maintained without a marked increase in the number of its Medical Officers. You will pardon

us when we say that neither your reply nor the scheme which you have put in force alters our opinion. On the contrary that reply fills us with regret that you should have put into execution a scheme so thoroughly inadequate to meet not only the growing requirements of this institution, but the increasing necessities of this community.

We respectfully submit that if you had given us an opportunity of replying to the objections, or of stating fully the reasons why we advocated an increase of the Staff, there would have been no necessity for the appointment of a Commission of Inquiry before, or of a Select Committee during the Session of the Provincial Council, but as the objections urged against our scheme are deemed by you of sufficient weight to justify you in refusing our request, and as we are fully convinced that the reasons we had to advance in favour of our idea are sufficient to convince the country, and perhaps to convince your Honor, that a necessity does exist for a reconsideration of the whole question, we now beg to lay our views before you at some length, in the hope that our prayer for further inquiry may be granted.

We now turn to a consideration of your Honor's reply :—

You say, "I have consulted a very valuable Memorandum issued by the Imperial Government on the subject of the Management of Colonial Hospitals." You will excuse us if we object to attach much value to this Imperial Memorandum. Its date may not in reality be far back, but in comparison with the age of our colonies, it may be considered ancient.

It may be quite true when it was published, ten years ago, that this same Memorandum was justly deemed valuable, but if we can show that a main principle in the Management of Hospitals cited in this Memorandum, has been since set aside, its value as a guide becomes much reduced. We will show that an entirely different principle is now in use in these Hospitals. We, however, confess that had you quoted from a Colonial Memorandum of the same date, even though it urged exactly the same views, we would have given it greater consideration, because we can easily suppose that men intimately acquainted with the country, its climate, and the social condition of its people, would be better fitted to express an opinion than any Imperial Officer, who never saw the country he advises.

You quote a table from this Imperial memorandum, showing the average number of patients in five Hospitals, the number of Medical Officers attached to each Hospital, and the proportion of patients allotted to each Officer.

You do this to show that the number of patients allotted to each Officer in those Hospitals is not less than those under the charge of the Officers of the Christchurch Hospital.

You do not seem to be aware of the fact that the appointments you quote as honorary, are *now* held by paid officers.

The Victorian Government spends annually upon medical attendance alone, upwards of nine thousand pounds.

This fact prevents your valuable Memorandum frem having the slightest weight in reference to your system of managing the Christchurch Hospital, because a paid Officer can always afford to attend a larger number of patients, and give them more time than an Officer who discharges an honorary duty.

But the one point which alters entirely the value of this Memorandum is, that each of those Hospitals has one or more fully qualified *resident* Medical Officers, whose time is wholly given to the medical care of the patients. Those gentlemen, possessing the degrees or diplomas of recognised Schools of Medicine, are competent to meet any emergency.

Now, we ask your Honor how is the Christchurch Hospital situated in this respect? You have a gentleman occupying the position of Resident Officer without a single medical or surgical qualification from any school whatever—who does not even pretend to cope with emergencies; and who was placed there by you more for his qualities as a general manager, than with any regard to his medical qualification for the post.

But not simply is he wanting in qualifications from any Medical School, but he has his time taken up with numerous other duties. He is the Superintendent of the general work of the Hospital : he has to attend to the Hospital Midwifery ; he has to attend to the out-patients and vaccination, and he crowns all by devoting a large portion of his time daily, as Registrar of Births, Marriages, and Deaths for the Christchurch district.

But let it not be supposed that we are willing in the advocacy of our own ideas to do an injustice to a meritorious officer. We gladly testify to the anxiety which the present resident Superintendent of the Hospital has always shown to conduce to the comfort and well-being of the patients, to meet the wishes of the Profession, and to carry out the instructions of the Government.

We, however, ask your Honor if any comparison whatever can be instituted between the work of the fully qualified paid officers of the Victorian Hospitals with the unpaid officers of your Christchurch Hospital, backed by a gentleman burdened with so many duties to perform. In addition, we have no hesitation in saying, that in the absence of the two Visiting Officers (who are engaged in extensive private practice), the Hospital has been placed occasionally in a very awkward predicament. Additionally awkward, because when outside Professional assistance arrives any Physician or Sur-

geon is almost compelled for his own sake, to incur no responsibility in an institution in which he has no control or recognised position.

Practically you have only one officer in cases of emergency, because the Physician may quite properly object to act in a Surgical case, over which he is to have no subsequent control; and the Surgeon may with equal propriety decline interfering effectively in a medical case for the same reasons; and we could give your Honor instances to illustrate this view; so that, in reality, you rely only upon one officer for cases of emergency. A condition of things rendered much more unsatisfactory by the peculiar qualification of Resident Officer, which we have described.

But let us illustrate the evil of so limited a staff in the case of a surgical operation. Say that an operation of any ordinary importance is about to be performed. The physician administers chloroform, and must attend to it throughout the operation. The surgeon operates, but something goes wrong with the patient from the chloroform. Can the surgeon leave his open wound to assist the physician; or, in the case of the surgeon needing assistance, can the physician leave the chloroform to its operation? We ask again who have you to assist either? A resident officer who is called Resident Surgeon, but in reality is only Superintendent. Hence it is evident that not even a simple operation can be prudently performed without assistance from outside practitioners, and the history of the operations confirm this statement. This is true of the operation itself, but before the necessity for operative interference has been decided upon in serious cases, the opinion of outside Practitioners has always been sought as a necessary preliminary.

In your mention of other New Zealand Hospitals, we submit that you have made one or two mistakes.

In quoting the number of patients to each officer in the Hospitals of Dunedin, Nelson, Hokitika, &c., you take the number of beds in the Hospital, and immediately after you give the proportion in the Christchurch Hospital, reckoning from the average number of patients, and you give the proportion as one in seventeen; whereas if you estimate this Hospital by its beds as you have done the other New Zealand Hospitals, the proportion becomes one to thirty-four, a proportion much more in keeping with facts, during the hot, sickly months of the year, than the one given by you, of one to seventeen.

The second mistake is that the Visiting Officers of every one of the other New Zealand Hospitals are paid.

You thus a second time wipe out the possibility of comparing the work quoted by you with that of your unpaid Christchurch Staff.

The payment of the Medical Officers of a Hospital exercises a very important influence in the arrangement of the Staff of a Hospital.

If an Officer is properly paid, it is to his interest to devote time to his work, and not to allow too much outside practice to interfere with his public duties.

If, however, he is not paid, it is against all reason that he should lose remunerative work outside, by spending more time than he can help in the Hospital on work by which he makes nothing. Hence to secure an equal amount of efficiency under the two systems of paid and unpaid Officers, this principle is acted on.

When paid, there are many patients attached to each Officer.

When unpaid, there are many Officers to an equal number of patients, so as to be certain that at no time shall the work be more than an Honorary Officer can perform efficiently with justice to the patient and himself.

We are of opinion that the Christchurch Hospital having now only two unpaid Officers, will fail to give thorough satisfaction to the patients, and quite possibly will seriously diminish the value of the institution to the public.

We believe that the ideas which you hold as to the number of unpaid Officers required to discharge efficiently the Medical and Surgical work of the Christchurch Hospital, to be based upon this error.

You take as the estimate of the work the average number of patients at one time.

In this climate the Hospital is comparatively empty for at least four months of the year; but for six, and in some years eight months, the wards are quite full.

Illness in the Hospital is always an indication of illness outside; the private work of the Officers therefore increases at the same time as their public work. Hence their power to do justice to the Hospital patients diminishes with the increase of the necessity for that justice.

The unsatisfactory working of this state of things has been demonstrated this year in both the Medical and Surgical departments of the Christchurch Hospital.

Last February the Physician addressed a note to you expressing his inability, in consequence of much outside work, to do justice to his Hospital patients, and asked you to appoint another temporarily in his place.

It is no injustice to that Officer to infer that before he actually asked for assistance he had for some time been dissatisfied with the time he spent at the Hospital.

This fact demonstrates the mistake made by you in regulating the number of officers by the average of patients, because the maximum of private work, coming at the maximum of Hospital work, the two clash, most likely with unpaid officers, to the injury of the public patient.

We would combat the idea implied in that portion of your reply in which you say "I am informed that a number of these are routine or chronic cases, which do not require daily attention." It is not necessary that we should enter into a long explanation why chronic absorb as much time as acute cases, but we may state as a fact that the treatment of chronic, and often obscure cases, involve a greater expenditure of time and thought than those which are acute.

Let us now draw your attention to a very important department of the Hospital —the Medical and Surgical treatment of the out-patients.

The people who attend as out-patients at the Hospital are confessedly very poor —they are barely able to provide for the wants of their families in health, and wholly unable to pay for professional attendance.

We would remind your Honor that civilised nations take a pride in providing the poor with Medical advice, and they are eager that the advice so given shall be the best the community can command. The result however arrived at by your arrangements is opposed to this generally accepted idea or wish of communities. You place in charge of these out-patients a gentleman who has not a single Medical or Surgical qualification from any School of Medicine or Surgery, when by an increase of the Staff you might give to your poor the same talent with which the rest of the community are content. We submit that such a state of things is not in keeping with the wishes of the people. We are certain that it cannot be in accordance with your own desires, and that whatever your action may be on the general question now brought forward, you will remedy a state of things which could only arise from your attention not having been drawn to the subject.

We feel obliged to direct your Honor's attention to a point which we cannot reconcile with the general reasons given for your refusal of our offer. You state that the Physician could not find time to attend properly to his Hospital patients, but that the work of the Surgeon did not press heavily upon him—yet the only addition you have made to the Staff (Opthalmic Surgeon) is one to relieve the Surgeon—who did not complain—of an important part of his duty, and you leave the Physician, who asked for assistance, without any aid whatever. We would point out that your Honor, in creating the appointment of Opthalmic Surgeon to the Christchurch Hospital, seems to agree with the Memorialists in the desirableness of increasing the Staff, but we would also draw your attention to the fact that it is contrary to recognised rules in General Hospitals, that specialties should have separate Officers, before the General Departments are thoroughly organised.

We had hoped, from your Honor's remarks, vouchsafed to the Deputation, and from your speech to the Lyttelton electors, that you were quite alive to the importance of the fact urged upon you—that an additional accommodation in the Christ-

church Hospital, for only twenty-five beds more, with the increase of Staff we proposed, would enable you to have the Hospital recognized in England by licensing bodies—a very important fact indeed for parents and guardians in New Zealand who may, with limited means at their command, be wholly unfit to bear the expenses attached to sending their children or wards, to be educated in England for such a length of time as is now necessary.

We now come to two peculiar clauses in your Honor's reply:—

1st. "I agree with the opinion implied in the Memorial—that provision should be made, with the approval of Government, for attendance upon urgent cases, during the absence, on private professional engagements, of the Visiting Officers, and such I understand, from the document before me, to have been the case hitherto."

2nd. "This arrangement will not of course interfere with the practice which now prevails of consulting other members of the Profession in extraordinary cases."

The document then before your Honor, we take for granted, was the Memorial lately presented by us to you.

That document states the fact that in emergencies, Medical consultations, and Surgical operations, Medical Practitioners unattached to the Hospital have given their assistance and time gratuitously; but it also states that the Memorialists complain of the injustice of having no equivalent granted them.

We have ventured to term this clause peculiar, because while your Honor perfectly agrees with us as to the necessity of this extra assistance, you ignore the claim put forward for acknowledgment of this assistance, which you admit is absolutely necessary for the proper working of the Institution.

We seem to recognise that, by admitting the necessity of this extra assistance, you admit the whole tenor of our Memorial; and while we urge you to give the Government the right to our services by constituting us Officers of the Hospital, responsible to the Government for our actions, you prefer perpetuating the injustice by taking those services without the slightest acknowledgment.

We are unwilling to express our opinion upon a principle of Government which has a much wider application than to matters connected with our Profession; but we cannot avoid stating that it seems undignified and exceedingly unsafe for a Government to depend in any important matter upon irresponsible advice or assistance.

We could therefore rejoice to see the principle firmly and consistently carried

out, which is so well stated in your own letter, that, "one of the first considerations which presents itself in regard to the administration of this as of any other department of Government, is the necessity for a *well defined responsibility*."

Your Honor further adds: "The creation of a number of offices of equal authority, and in the same relation to the governing body (the Provincial Government), would obviously tend to a diffusion of responsibility, which would render the control and economical management of the Institution a matter of considerable difficulty."

Now it appears to us that the difficulty which to you seems so obvious, would be entirely removed by a careful perusal of the Imperial Memorandum which you consulted, and in which the practice of other Hospitals on this point is set forth.

Take the case of the Melbourne Hospital as given in your own tables.

There are four Resident and sixteen Non-resident Medical Officers, involving a very diffused responsibility indeed according to your ideas.

A similar arrangement holds good in the case of every Hospital referred to by you in quoting from that Memorandum, and yet those are the Hospitals described by you "*as the most satisfactory in the Southern Hemisphere.*"

But it is useless to say that a similar state of things must necessarily arise in the Christchurch Hospital itself, at no distant date, whatever the opinion of the Government may be.

In concluding this somewhat lengthy communication, we would again draw your Honor's attention to the fact that after concurring in the views expressed by the deputation as to the desirableness of an increase of Staff, you stated that "if it could be shewn that the proposed increase would not interfere with the efficient working of the Hospital, you would gladly comply with the wishes of the Profession."

We would respectfully submit to you that we have fairly proved that the proposed increase of Staff instead of lessening the efficiency, would add very materially to the proper working of the Hospital—that the evils arising from the qualifications of the Resident Officer would be almost removed—that responsibility would be defined—that the necessity for outside assistance in operations, emergencies, and Medical and Surgical consultations, would be done away with—that the out-patients would receive the best advice obtainable—and that by an increase of Staff the danger of neglect to patients during the sickly months of the year when they would most require it, would be completely avoided.

Having thus proved that our offer of assistance to the Government was in keeping with the imperative necessities of the Hospital, and as we cannot but believe that your Honor declined the offer for reasons sufficient, in your own opinion, to

justify you in so doing, we being in ignorance of the nature of the objections entertained by you to ourscheme, respectfully solicit you to submit the whole question of the management of the Medical Department of the Government to the investigation of a Commission before, or to a Select Committee during the next session of the Provincial Council.

The purpose of our Memorial has simply been to point out how all the advantages of such an enlarged Staff of Officers may be at once secured to the public. We feel that in making this offer we have discharged the duty which we owe to our Profession and the public, and we must leave with you the responsibility of declining to carry into effect an arrangement by which the Christchurch Hospital might at least so far resemble those Hospitals which your Honor deems "the most satisfactory in this Hemisphere."

We are,

Sir,

Your obedient Servants,

JAMES S. TURNBULL,
COURTNEY NEDWILL,
J. D. FRANKISH.

We have every reason to believe that the seven Practitioners who signed the original Memorial still entertain the same opinions, but it may be necessary to explain why only three out of the seven now sign this letter.

BURRELL PARKERSON—Not asked.

J. W. S. COWARD—Paid Officer of Government.

WILLIAM DEAMER and LLEWLLYN POWELL — Accepted Appointments under New Arrangement.

the "Times" Office, Gloucester street, Christchurch.

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