

DARFIELD HOSPITAL.

In 1925 the Tawera County, being aware of the fact that a good deal of money was being spent on the establishment of Maternity Hospitals throughout North Canterbury, requested the Hospital Board not to overlook the claims of their district in which a Maternity Hospital was urgently needed. The township of Darfield is situated thirty-six miles from Christchurch and goes back fully forty-five miles to the west. It embraces the Counties of Selwyn, Halvern and Tawera.

Members of the Finance Committee of the Hospital Board proceeded to Darfield for the purpose of considering the question of establishing a Maternity Hospital and met representatives of the Counties already named. As the three Counties represented would be served by a Maternity Hospital, the Board was asked to provide accommodation for four maternity beds and two extra rooms that might be used for emergency purposes. The case in favour of the erection of a Maternity Hospital was outlined as follows:- In 1923 there were 205 births - of these, 103 were handled by the medical practitioner in the district, but many others went to Christchurch because of the lack of proper maternity home accommodation. There was no nurse resident in the district. There were one or two persons who took cases, but they would not materially affect the hospital.

The section suggested as a site was visited, and it was decided to erect the institution at the corner of Creyke and Mathias Streets, a sufficient area of land being available at the cost of £45 or £50 per acre. On this site there were five Crown sections in the block, numbers 14 to 15 and 20. The sections 14 to 15 were reserved as a gravel pit and were under temporary lease. Mr. W. E. Willstead of Hornby made an offer to the Board to exchange his section number 20 for number 16 on condition that the Board paid all expenses in connection with the transfer, or he would sell. His price was undoubtedly too high owing to the fact that a quarter-acre section on the main road could be obtained for considerably less. Authority was gazetted for the exchange of Reserve No. 3,647, Section 20 for Section 16.

In 1925 application was made to the Director-General for a permit to erect a Maternity Hospital, but the matter was deferred. The Director-General addressed the Board on the project of establishing various Maternity Hospitals and was favourable to the erection of one of four maternity beds and one casualty ward to be used as a surgery at Darfield. Plans were prepared and submitted for the Department's approval in June, 1926, with an estimate of £3,500. The Ministerial consent was received in October, 1926, and tenders were called for. W. Beanland & Sons were successful, their tender being for £3,599.10.0. The maternity rooms were in a self-contained suite cut off from the remainder of the building.

On the 27th May, 1927, the Hospital was opened by Mrs. McMillan, whose husband, as the County's representative on the North Canterbury Hospital Board had done much excellent work in connection with the hospital, not only with regard to the building, but in the interests of the Hospital generally. A letter of appreciation from members of the Board was forwarded to Mr. McMillan.

It was suggested to the Halvern County that an Advisory Committee be set up at Darfield, but the Council considered it unnecessary as the member of the Board representing the

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County lived near the Hospital and took an active interest in it.

1914.

No history of this hospital would be complete without mention of what is probably a unique record on the part of the McMillan family. Mr. David McMillan, Senr., M.B.R., represented the Selwyn County on the Hospital Board from 1887 - 1894, and his son has been a member of the Charitable Aid Board and the North Canterbury Hospital Board from 1908 until the present day, representing the combined Counties of Selwyn, Halvern and Tavera, while the latter's uncle, Mr. William McMillan acted for the Selwyn County from 1902 - 1908, and for the Paparua, Halswell and Heathcote Counties from 1917 - 1919. His son, Mr. R. T. McMillan was elected in 1941 to represent Ilkempere. Lastly, in the third generation appears a third David who was the Board's Medical Officer at the Darfield Hospital from May, 1927 to November, 1928.



Darfield Hospital.



1918.

The establishment and history of the Ellesmere Hospital provides entertaining reading, for it appears that the residents of the district suffered from the aroma of the Hospital septic tank. Little did the promoters of the Hospital in 1918 dream that the institution would be the centre of so much local interest that grew as the nuisance continued to make itself apparent over a period of three years. But the tank is later history.

In September, 1918, the Ellesmere County made application to the North Canterbury Hospital Board for a Maternity Hospital to be erected. After a visit of inspection, it was decided that Leeston, 27 miles from Christchurch, was a suitable centre for such a hospital.

1919.

In January, 1919, Mr. Holley made an offer through the Ellesmere County Council, of eight and a half acres of land. Later he included a residence in the offer but the Director-General of Health would not recommend the Board to accept, owing to the cold southerly aspect of the property.

For the next few months the matter of a hospital seems to have been left in abeyance, but by October, 1919, the County Council had formulated plans by which it proposed to raise a loan to cover its share of the cost of one. However, this scheme lapsed through lack of Government support.

From the Acting Chief Officer of Health, it had been ascertained that grants from contributing local authorities could not automatically carry subsidy, and this, therefore, was the general ruling to be followed in all cases that might arise. It was not possible to alter the ruling given in the case of the Ellesmere Hospital (Leeston).

1920.

This "cold douche" did not dampen the enthusiasm of the County Council. The members still wanted their hospital and by March, 1920, they had secured through the Hospital Board copies of Collins & Harman's plan of the Amuri Hospital. The Hospital Board showed its sympathy by discussing the cost of establishing a hospital, and it informed the Council that it was willing to continue with the plans, if the County could find means of raising voluntary contributions, which, with subsidy, would provide two-thirds of the cost. The Council did not seem disposed to accept this suggestion without dispute. Again, several months elapsed before negotiations between the County Council and the Board appeared to reach some satisfactory conclusion.

1922.

On the 4th April, 1922, the Ellesmere County made formal application for the erection of a Maternity Hospital. The local Doctors stressed the need of such an institution, and to prove their claim, pointed out that 78 births had been recorded in the Ellesmere District the previous year.

The local paper, the "Ellesmere Guardian", took up the matter and a leader appeared on 13th May, 1922, supporting the application of the County Council and pointing out that in spite of the fact that the Hospital Board had recognised that the need existed by placing a sum of its estimates for a hospital at Leeston and several other centres, no attempt had been made to provide necessary accommodation in the Ellesmere District. Evidently the 78

babies won the day! for on 17th May, 1922, the Board requested the County Council to submit any suitable sites for inspection. The Council replied promptly, recommending a site which was part of the estate of the late George Sandry; this property of 4 acres had two distinct advantages, good drainage and proximity to the Main Street of Leeston.

The estimated cost of a hospital then was given as £4,300.

A breakdown occurred when the Council was asked to contribute two-thirds of the expenses. This certainly did not meet with the Council's consent. Rightly or wrongly the Council insisted that the levy paid per annum to hospital funds were sufficient contribution from the district. Any further contribution was regarded as "extra and unwarranted". The Council won the argument for no additional financial assistance from the residents of the district towards the cost of erection was paid to the Board.

Having obtained the approval of the Health Department to the plans of the proposed building, the Board then went into the matter of purchasing a site, which proved to be beset with difficulties. The Sandry Estate had fallen on the market and the Board offered to purchase about 4½ acres of this property known as "The Lodge" and valued at £33 p.s. There was an enclosed road known as the Tramway Reserve running through it which the Estate could not claim for.

1923. On 31st March, 1923, the Board tried to ascertain the names of the Executors of the Estate as it had been reported that a sale was to take place immediately. It was unfortunate that the property was sold before the Board was able to close any transaction. The property was purchased by Mr. J. S. Free and the Board then proceeded to negotiate with him for the purchase of four acres, irrespective of the Tramway Reserve. Tenders were called for, but it was found that the proposed building which was to be constructed in concrete, was £900 above the estimate of £4,000. It was, therefore, decided to call for tenders for a wooden building.

In the meantime, negotiations were still proceeding over the purchasing of the land. The Tramway Reserve was proving to be the cause of considerable discussion. This reserve of 1 acre, 3 rods, 22.8 perches had been set aside some fifty years previously as Crown Land reserved for special transport purposes. The Hospital Board communicated with the Ellesmere County with a view to having this area transferred. The matter was not so simple. The transfer of this particular property could not be made without the concurrence of the Leeston Town Board that had recently been formed. This local body saw an opportunity for a possible sale and agreed to the transfer of land on condition that the Hospital Board paid the same price per acre as was being paid for the privately owned land. The Board objected, pointing out that the land had not been used for the original purpose for which it had been set aside and that as a hospital was required for the district it should be possible to use the available Crown Land without further expense to the Hospital Authorities. In fairness to the Leeston Town Board it should be stated that it could foresee that there would be extra expenses to the local authority in increased street lighting, road improvements and better drainage. The Hospital Board, however, took a strong stand and rejected the proposal.

The Board, not wishing to disappoint the Ellesmere-Springston Districts, sought legal advice as to whether it was possible to obtain the closing of the reserve without the consent of the Leeston Town Board. The advice received was that the Leeston Town Board had no jurisdiction over the

Ellesmere Hospital, contd.

area in question and that application for transfer should be made through the Commissioner of Crown Lands.

The Southbridge Town Board, visualising the possibility of there being no hospital at all in the Ellesmere District, offered a site for a hospital in Southbridge, free of cost and with the undertaking that the residents of that town would defray all cartage costs.

The Hospital Board was very anxious for some settlement of the whole transaction. There was the added difficulty that the successful tenderer might, if another big contract were available, come on the Hospital Board for compensation for delay, or refuse to take up the work when at last the land had been acquired.

The Ellesmere County urged again the necessity for the establishment of a hospital in the County, and, failing an amicable settlement between the Leeston Town Board and the Hospital Board, offered to show another site outside the Leeston Board's area, and to assist in every way possible with the roading, drainage and requirements. The Council did not have to put their offer into effect as the Leeston Board, "being more conversant with the whole position," withdrew their letter requesting payment for the Trway Reserve unreservedly.

By the end of 1923 the site had been acquired. The proposed building was to be for a Maternity Hospital. Drs. Volekman and Hewins regretted that the Government had not agreed to provide accommodation for ordinary cases. The Leeston Town Board took up the plea for an additional Casualty Ward and the Hospital Board placed these facts before the Director-General. The result was entirely satisfactory to the local residents. The Minister approved of the proposed extensions. Building operations were begun immediately and on 1st October, 1924, the Hospital was opened.

1924. Provision had been made for four maternity and five general beds with excellent verandah accommodation. The cost, however, had not diminished, for it is stated that the capital cost was £7,392.

A silver mug was presented to the first child born in the hospital. Here again, the cost did not coincide with the original estimates, for on 20th December, 1924, two silver mugs were presented, the recipients being the twin children of Mr. and Mrs. J. Smith.

1927. From its establishment onward the Ellesmere Hospital proved its worth to the residents of the district. It survived the crucial years - 1931/1932 when economies were necessary in every Department. The Government reviewed the work of all hospitals and recommended the closing, or leasing and subsidising of some of the lesser hospitals. In fact, except for the odorous septic tank, reports show that the Hospital progressed steadily. The tank was responsible for making history as far as the hospital was concerned. It first appears on the correspondence file in 1923, when application was made for installation and from then onwards it does not appear to have been satisfactory. In 1927, the Town Board stated definitely "that improvements would have to be carried out". Alterations were put into effect and it was hoped that the extensions would minimise any further trouble.

LINCOLN HOSPITAL.

The Christchurch Hospital Committee visited Lincoln in compliance with a request for a Maternity Hospital for the district, which is central for the Halswell, Paparua and Springs Counties.

The Springs County offered the Hospital Board a site of two acres for the purpose of a Maternity Hospital as there was no Maternity Home in the district. There was only one house where a person took in a case at a time. If a Maternity Home was established, it was considered that 100 to 150 cases would be dealt with.

1924.

In September, 1924 a deputation waited on the Board which was of opinion that as the distance of fourteen miles from Christchurch was so small it was not justified in erecting a hospital in that locality. The Board's commitments for the erection of institutions at a considerable distance from Christchurch made it practically impossible to arrange the necessary finance.

1925.

In September, 1925 the County Clerk wrote to the Board confirming the offer of land situated opposite the Public School. On the Board's behalf, McIntyre and Lewis surveyed the land and Collins and Harman prepared plans similar to those of the Darfield Hospital.

1926.

In February, 1926 the plans for the building were approved by the Director-General of Health and G. L. Bull's tender of £3,227 was accepted in October, 1926. In the following June, the Hospital was opened by Lady Rheden.

1931.

All went well until 1931, when the Board received the Director-General's suggestion of the closing of the Country Hospitals, and it sought the opinion of the various medical officers so that their reports might receive the Board's consideration.

The local Doctor reported that in the case of Lincoln Hospital, it was becoming more popular each month and there was little difficulty in persuading expectant mothers to apply for admission. The number of cases going to Christchurch from the district within easy reach of Lincoln was practically nil.

The Board's Economy Committee and representatives of the various Local Bodies interested in the subsidiary hospitals met to consider the proposals of the Director-General. It was pointed out that if the Departmental rules could be relaxed in the direction of allowing admission of medical cases and such other cases that were in no way septic, more general use could be made of the hospitals by the medical practitioners, especially with regard to Cheviot, Little River and Lincoln, where these were regarded solely as institutions for maternity purposes. The Department raised no objection to the admission of non-infectious medical cases or minor clean surgical cases to the hospitals already named.

1933.

Owing to the demand for maternity accommodation in Christchurch in 1933, the Board made a decision that cases of this class applying for admission to the Essex Home should be transferred to Country Hospitals and arrangements were made accordingly. The transport was made possible through the Free Ambulance Service.

Lincoln Hospital, contd.1938.

The land surrounding the Hospital suffered somewhat from neglect and in 1938 the gorse-grown area was cleared and approximately 400 pines and macrocarpas were planted.

Lincoln Hospital survived the years of financial depression and continued to serve the needs of the Springs County and surrounding districts.



Lincoln Hospital.



L. River

No 120



Little River Hospital.



LITTLE RIVER HOSPITAL.1920.

Towards the end of 1919 Dr. William Todd commenced practice in Little River. At that time the Wairewa County Council entered into a guarantee that the practice would be worth £600. Dr. E. E. Smyth took over Dr. Todd's practice in March, 1920, and the Council increased the guarantee to £700 with free residence. As Mrs. Smyth was a qualified nurse, the Council had three rooms fitted up for maternity and other cases. The Council decided to purchase the residence and thirty acres of land for £3,000, but owing to the difficulty of borrowing the money at a reasonable rate of interest two residents of the district purchased the property and leased it to the Council at a rental calculated at 6% on the amount paid out. This arrangement was to hold good until the Council could see its way clear to purchase. The property was well suited for the purposes of a doctor's residence and maternity hospital, and the price agreed upon was considered extremely reasonable. Of the thirty acres of land, the doctor had the use of about six acres, the balance being let for grazing.

A deputation from the Wairewa County Council waited on the Finance Committee of the North Canterbury Hospital Board in support of their application for a grant of £400 towards the expenditure incurred by the Council under a guarantee to Dr. Smyth, and in connection with the establishment and maintenance of the doctor's residence and maternity ward.

1921.

The amount earned by the doctor fell far short of expectations in 1921. At this stage alterations were made in the Counties' Act whereby the doctors' agreements were transferred to Hospital Boards.

Owing to the break in the arrangement and the unsatisfactory financial position, Dr. Smyth resigned. The Board made application to the Department of Health to nominate a doctor for Little River, and in October, 1921, Dr. J. Greenwood of Kumara, was appointed.

1922.

Again a deputation from the Council waited on the Board's Finance Committee and proposed that the present doctor's residence at Little River be maintained as a Maternity Hospital, and if necessary, a doctor's house built on the same site. The Committee visited Little River in January, 1922, and the house belonging to the County Council was purchased for the use of the medical practitioner located in the district. Dr. S. G. Trail who had recently come over from Samoa arranged to take Dr. Greenwood's practice with the Board's approval. The Board agreed and offered Dr. Trail a subsidy of £300 for two years.

1923.

Application was made by the Wairewa County for the provision of maternity accommodation. At a special meeting held by the Board in August, 1923 attended by representatives of the County, the Chairman of the Board said he was prepared to bring the question of the provision of two or three rooms for maternity or casualty patients before the Board at an early date, provided the County Council supplied information concerning the average number of births and the likely number of persons who would use the hospital, if such was established.

Little River Hospital. continued.1924.

In June, 1924, the question of the erection of a Cottage Hospital was considered, when it was suggested that the Board prepare plans for a four-bed hospital, two for maternity and two for emergency cases. Members of the Board visited Little River to determine a site and decided to place the institution about two chains behind the doctor's house on rising ground facing towards the north-east.

1925.

Plans for the Hospital were received from the architects, Collins and Harman and approved. These were sent to the County Council for perusal, and application was made in November to the Minister for the erection and equipment of a hospital and maternity home to be established at a cost of £5,250. This figure did not meet with the approval of the Department. Reduced plans were forwarded to Wellington in January, 1925, the cost estimated at £4,100. This proposal was held in abeyance for a considerable time and in November, 1925, the Director-General regretted that he could not accede to the Board's wishes, nor could he recommend the Minister to approve expenditure during the financial stringency. He was of opinion that one institution should serve both Lincoln and Little River. Plans were cut down to the smallest dimensions with accommodation for two patients and a staff of two, but the Department reminded the Board that it had agreed to appoint a district nurse, the Board to pay £75 and the nurse to collect all fees.

The County Council resolved that an area of land to be occupied by the new Maternity Hospital be transferred immediately. Survey was made by Hastings, Bridge and Irkinson. The plans having been approved, tenders were called for the erection of the hospital, the estimate being £2,000 and the lowest tender was £2,350. H. Pearce's tender was the lowest for Chatham Islands, Cheviot, Darfield and Little River Hospitals. He was unable to take up the four contracts and arrangements were made for him to take up the work at Little River for £2,100.

1927.

In April, 1927, the opening ceremony was performed by Mrs. Thompson, wife of the Board Member representing the Wairewa district. Sir Heaton Rhodes, M.P., Mr. G. Armstrong of Akaroa and others took part.

The Matron notified the Board of the first child born in the institution and the customary silver mug was presented to the parents of Lillian Olive Giddens, born on the 8th April, 1927.

The road making and tree planting were soon carried out. The macrocarpas were used for fencing; pinus insignis, ornamental trees as well as native shrubs and fruit trees were supplied.

In September it was necessary to remind the Medical Officer that attention had been drawn to the fact that the Department could not agree to the admission of medical cases to the Little River Hospital. There was no provision made for admission for the treatment of pre-natal cases.

The Wairewa County made application to the Board in 1928 for a Casualty Ward to be attached to the new Maternity Hospital. Councillors cited recent cases that merited this requisition, and regard it as an urgent necessity for the welfare of the local residents. This matter had been brought before the Director-General some months previously.

Little River Hospital. contd.

He had then declined to consider such a proposal. The Council was asked, therefore, to give definite instances showing that the addition was essential.

1930.

By 1930 the grounds and surroundings were well established and in excellent condition.

The work in connection with drainage and water supply was put in hand. The County Clerk made light of the difficulties regarding the water supply and referred to the "storm in a teacup" when it was reported that, instead of getting water, mud and worms were coming through the pipe. Owing to the failure of the water supply, a maternity patient who had been admitted had to be returned to her home for confinement. The Board decided to have tanks erected and alterations made to the water supply after consultation with the County Council.

1935.

In April, 1935, the question was raised as to the little use being made of the Hospital. The number of patients for the year numbered 23 and the births totalled 17. If the hospital was closed, there would be no medical practitioner in Little River. All patients would, therefore, be compelled to go to Akaroa, Lincoln or Christchurch.

The establishment of all country hospitals was due principally to the need for maternity service in each district. Originally such service had been supplied by a midwife or nurse, but at this stage few local women would undertake confinements. The Director-General pointed out that as Little River was about thirty-six miles from Christchurch and twenty from Akaroa, with good transport both by rail and road, and as some of the patients were drawn from the Akaroa side of the Hill, the closing of Little River would not place any hardship on the residents.

Owing to Dr. Trail's illness and subsequent resignation, there was no resident Medical Officer for some months and the County Council made an urgent appeal for filling the vacancy.

The position was made known throughout New Zealand, but a medical man seeking employment was very hard to find. The Board provided a subsidy with a view to making the practice worth the while of a well qualified practitioner.

1936.

In September, 1936, Dr. L. B. Burnett, who for a number of years was practising at Oxford, was appointed to the Little River practice.

As recently as June, 1940, the question of closing the Hospital was again brought before the Board. On the County Council's recommendation, the matter was held over for another year.

KAIAPOI MATERNITY HOSPITAL.

That the North Canterbury Hospital Board be requested to supply a Maternity Home for Kaiapoi and the district, was the resolution of the Kaiapoi Borough Council in 1929, and subsequently Councillors were deputed to wait on the Board. The Board approved a grant of £50 towards the continuance of the existing Maternity Hospital on the understanding that any indigent patient should be taken in as an offset against that amount. In 1928, the grant was increased to £100 with the approval of the Government, but, as certain improvements were absolutely necessary, and the Medical Officer definitely refused to carry out the Department's reasonable requirements, the Minister signified that he was unable to allow the licence to continue.

After the Home was closed, application was again made to the Board to consider the question of a nursing home so necessary to the district which was largely an industrial one. After considerable agitation and delay, the Kaiapoi Maternity Hospital was once again a going concern, and the North Canterbury Hospital Board provided a grant of £150 towards its maintenance.

The grant of £150 was apart from the medical subsidy for which the Board was responsible, and it was preferable to pay these amounts rather than attempt to institute a new hospital as suggested in 1935.

At the expiry of the lease in 1938, it was considered impossible to carry on the hospital. Members of the Borough Council waited on the Board to discuss matters which were placed before the Director-General. Two recommendations were made by the Government in 1939 - to lease the premises and subsidise a nurse to take charge, or buy the premises and the Board put their own staff in control. Dr. M. H. Aiken made an offer to the Board to sell the building, furniture, and effects for £1,100. This was accepted. Plans were drawn up for necessary alterations and additions, which cost was duly approved. The hospital was officially opened on 30th November, 1939.



Kaiapoi Hospital.

Mr. R. Meredith, M.H.R., Wellington, received a letter from the Minister in Charge of Hospital and Charitable Institutions in December, 1897, stating that a request for the establishment of a Cottage Hospital at Kaikoura seemed to be reasonable and just. The distance, together with the impediments in the way of travel to the Main Hospital at Christchurch gave reason for the local demand. He promised that if the residents showed their desire to establish and assist to maintain a hospital, the Government would subsidize all voluntary contributions to the extent of 2½/- in the £. The matter would have to be laid before the Hospital and Charitable Aid Board for the district for approval and possible assistance. The County Clerk brought the proposition before the Hospital Board for favourable consideration, drawing attention to the irregular running of the steamer-service and the impossibility of sending patients overland. Early in the next year the Hospital Board resolved that if it was decided to establish a Hospital or Casualty Ward as a "separate institution", the County Council could then apply to the Board for maintenance; voluntary donations which might be made, subject to Government subsidy, or by a special grant.

1898.

A public meeting was called for in May, 1898, to ascertain the feelings of the district, and also to ascertain the likely amount which would be subscribed. There is nothing to show in the records that any further action took place.

Two small Nursing Homes or Hospitals were in existence in Kaikoura, but only for a few years. One took in hospital and maternity cases, and the other, situated on the Beach Road, attended to maternity cases only. The local doctors took exception to the unregistered home and a Court case followed. The guilty party was fined on "farthing".

1910.

A communication was received from Kaikoura asking for "an investigation on the spot" before a decision was made regarding any scheme for the establishment of a small hospital there. As information was very meagre, the Board appointed a deputation consisting of the two local members, the Chairman of the Hospital Committee and the Chairman of the Board to visit, collect information, and report fully in writing before any further steps were taken.

A public meeting was held in the Court House at Kaikoura on the 22nd August. During the meeting it transpired that two small funds were in existence, held by trustees, for the purpose of erecting a cottage hospital. This money, amounting to over £47, was available together with a vote of £100 from the County Council, which had been outstanding for a considerable period. A vote of £250 had appeared on the estimates of the Dominion as a Government "grant in aid" for some sessions past. The deputation to the meeting was gratified to find that the general Government, in handing over to the County Council a fine area of ground on the cliffs, overlooking the sea, had stipulated that the land was for the purposes of a recreation reserve and a Cottage Hospital.

Looking to the increasing population of the town and vicinity, the difficulty of easy and rapid transit, and the isolated character of the district, the visiting

Kaikoura Hospital, contd.

Board members felt assured that the establishment of a hospital would be a sound policy, especially as the Board could count on a substantial measure of local support.

It was the opinion of the deputation that a sketch plan carrying ten beds should be designed, and communicated to the residents, the whole number of beds not to be installed at once, because if the outer shell of the hospital was sufficiently spacious, costly enlargements could be avoided. A local committee was formed at the meeting. The two medical men in Kaikoura were anxious for the immediate establishment of the institution, as accidents were frequent and surgically treated under difficulties. Men injured in bush or sawmills were being received into hotels for want of better accommodation.

1911.

Messrs. Palmer and Davison, who represented the County on the Board, brought the matter forward in January, and the Board agreed that a hospital for Kaikoura should be proceeded with as early as possible. The site approved for the Cottage Hospital was considered to be one of the finest in New Zealand. The Kaikoura people had collected, with subsidy, nearly \$1,000 and were anxious to see the work finished. In June, the Board accepted the tender of Mr. W. Alexander, the price being \$1,320.

In 1910, the Board applied to the Council as Trustees of the Kaikoura Recreation Reserve - Takehanga - for the conveyance to the Board of a portion of the land. It was generally understood that the Hospitals' Department was opposed to a too limited area being used for hospital purposes, so that if the Council could convey to the Board an even larger area than was originally intended, there could be no doubt that such a step would be considered by the Government authorities. It transpired in 1912 that the Kaikoura Hospital Site Act provided that no more than two acres should be transferred. The Kaikoura Domains Board therefore, agreed to allow the Board to occupy the extra quarter contained in the portion of the domain on which the hospital was built.

1912.

A committee visited Kaikoura on 28th February to confer with the local doctors and members of the committee of subscribers as to the best means of conducting the hospital. Three members of the body of subscribers were to be associated with the district member of the Board, and constitute a committee for the purpose of laying out the hospital grounds, and ordering such other necessary work as the Board might from time to time authorise. A grounds committee was appointed and consisted of Messrs. B. A. Haude, Jas. Boyd and the Rev. W. McAra. Two hundred and twenty ornamental trees were planted and 106 of these survived, and of the 160 shelter trees only 67 remained in 1913. A contract was entered into for two years for a man to maintain the upkeep of the grounds.

A medical officer was appointed and authorised to admit such applicants residing within the area of the Board's district - excepting maternity or chronic cases - as in his judgment might require or be likely to benefit by hospital treatment. No patient was to remain for a longer period than two calendar months without reference to the Board, and any case which in the Medical Officer's opinion required special treatment, had to be referred to the Christchurch Hospital.

Kaikoura Hospital, contd.

One bed in each ward for male and female patients was at all times to be available for the reception of persons seeking admission who were unable to pay the hospital fees. Applicants were required to sign the prescribed forms showing their condition and circumstances, and signifying their consent to abide by the regulations made by the North Canterbury Hospital and Charitable Aid Board.

The remuneration of the Medical Officer was based on the following scale of payments by patients, viz.:-

- (a) For any absolutely destitute patient, or for any patient who is proved to be unable to pay the Board more than 3/- per day - no remuneration.
- (b) For each patient who paid the Board 6/- per day, the Medical Officer to be paid at 1/6 per day, as the patients' payments are collected; but if less than 6/- per day was recovered, the 1/6 was reducible in similar proportion.
- (c) For each patient who paid the Board 9/- per day, and also (if he or she desired) provided special nursing at his or her own charges, the medical officer might make and recover his own professional charges from such patient.

The Medical Officer in addition to the above, was to be paid at the rate of twenty guineas per annum for attending at their own homes whenever occasion required, such sick recipients of charitable aid residing within five miles of the Post Office, Kaikoura, as might not be deemed to be subjects for treatment in the Hospital.

The above scale was to be in force for twelve months, and then be subject to revision if necessary.

In June, 1912, the Chairman stated that in accordance with the Board's wish, he and the Secretary, had attended the opening of the Hospital at Kaikoura on the 3rd inst. He found everything satisfactory and had authorized some small items to complete the equipment.

An operating table had been presented to the Board for the Kaikoura Hospital and the Committee had been enabled to purchase an assortment of valuable surgical instruments.

The Crown Lands Department surveyed the site and it was discovered that there was an excess within the Hospital grounds fence, approximately $\frac{1}{2}$ acre at the extreme seaward end of the "paddock", and on it was located a septic tank. It was pointed out that if this portion was severed, it would be very disadvantageous to the Hospital. The Domains Board offered to grant the Hospital Board twenty-one years lease of the extra area at an annual rental of 1/-. The seal of the Board was affixed to the lease of 1 rood, 11 perches, of the Kaikoura Domain to the Board, on the 24th December, 1913.

Kaikoura Hospital, contd.1913.

In October, 1913, the Medical Officer did not consider the agreement existing with regard to fees as satisfactory, and after conferring with the doctor and giving the matter full consideration, the Committee recommended that the system of paying the doctor a percentage of fees collected be terminated and he be paid a salary at the rate of £50 per annum for Hospital work and £20 for Charitable Aid work. The doctor was quite willing to accept these terms.

There had been great dissatisfaction regarding the medical men, and several changes had taken place within a comparatively short time. In order to induce a doctor to settle in the district, the Board, in 1917, decided to guarantee the sum of £700 per annum.

Mr. Thos. Harrison brought forward a strong demand from within the Kaikoura County in 1913 for a maternity or lying-in ward to be attached to the Kaikoura Hospital. He estimated the cost to be about £600. There were no certificated midwives in the County, and those who did act in the district in that capacity did what they could for the patients, but accommodation was very limited.

1915.

In August, 1915, the arrangement which had been made for providing a room for maternity cases met with the general disapproval of the district and the Medical Officer and Matron of the Institution. It was then suggested to the Kaikoura County that, if the Board would provide a ward of two or three beds with a sunroom in connection with the main building, that body would make a grant of £ for £ up to £250 and this met with the approval of the Department.

1916.

A special committee visited Kaikoura in May, 1916, and met the Matron, the Medical Officer and Mr. Andrew, the local representative on the Board, for the purpose of hearing their views. It was decided to instruct the Architect to prepare plans for a two-bed ward and a one-bed ward, a nurse's bedroom, sunroom and other necessary accommodation to be erected on the north-east side of the hospital and connected by a covered-way accommodation for isolation cases to contain two rooms and nurses' and duty rooms.

Tenders were received in December and that of Messrs. W. Cook & Company for the erection of the Maternity Block was accepted at £4,237. The work then proceeded satisfactorily and the Ward was officially opened on the 10th November, 1917.

A plan for the Isolation ward was submitted in 1918, showing accommodation for four patients. Mr. Calvert's tender of £1,587.15.0. was accepted and he also undertook considerable extensions to the kitchen, store, X-ray and Nurses' Home. The ground was raised and levelled, and the driveway to the Isolation Block was completed. This work was carried out by the County Council and undertaken free of cost to the Board.

The full appreciation of the Board was conveyed to the County Council for its very generous action on all occasions when anything was required in connection with the local Hospital.

Kaikoura Hospital, contd.1920.

A valuable block of $4\frac{1}{2}$ acres of freehold land fronting the Hospital buildings was purchased in 1920 for the sum of £1,000. The prospective use for the area was to keep an open view and use it for garden, recreation and grazing purposes. The land was about to be sold privately for building allotments. The local Hospital representative, Mr. S. Andrew, brought the matter of purchase before local residents and so generous was the response that the necessary sum was soon raised by public subscription and with the Government subsidy, the Board was able to complete the purchase. This property commands a magnificent view of mountain, plain and sea and is a valuable addition to the Board's property.

The County Council asked if the income arising from the William Cook legacy, which was set aside in 1920, could be allocated to beautifying and improving a special section of the gardens and grounds of the hospital. The Board had marked improvements largely owing to the fact that the income from the legacy was available and that it would be difficult to set aside one portion upon which the money should be expended.

A report on a visit of inspection in 1930 states that "the hospital from the point of view of surroundings, outlook and gardens, occupied indeed a favourable position. The garden was in excellent order and stocked with vegetables, flowers and fruit, and the lawns and paths were well kept."

1937.

Considerable renovations and additions were necessary in 1937 on account of the demands of the institution through being in the centre of the Railway Construction Works, and in 1938 additions to the Nurses' Home and laundry, also extra accommodation for the out-patients department, were carried out. Improvements were made to the cooking facilities and water heating system. Even so, the Director-General, in 1939, drew attention to the inadequate buildings and the cramped condition of the hospital generally. Following upon several suggestions made by him, a large capital programme was drawn up, and in February, 1941, the building of the Nurses' Home and alterations to the Matron's quarters were commenced. The X-ray plant was replaced at a cost of £150.

1941.

Kaikoura Hospital.

OXFORD HOSPITAL.1908.

The first record filed in connection with the Oxford Hospital indicates that the Oxford Road Board recognised the need for some form of public hospital service in the district as far back as 1908. In that year the Road Board suggested to the North Canterbury Hospital Board that some part of the levy paid by the local authority in the form of hospital rates, be used to subsidise a bed at the local private hospital. The resident medical practitioner was willing to give his services gratuitously. No funds were available for such a purpose that year, but when the estimates were being framed for the following year, the advisability of establishing a cottage hospital was to receive favourable consideration. There the matter seemed to have rested until 1917, when in August a meeting was held to consider the question of taking the necessary steps for Oxford to be proclaimed a Hospital and Charitable Aid district. It was decided that a Maternity Home should be established and that the Hospital Board be requested to make a grant for £1,000, which had been placed on the estimates for the purpose of establishing Maternity Homes in country districts. The Oxford County approached the Malvern County Council suggesting that the latter contribute £400, but the money was not forthcoming. The Malvern County pointed out that owing to the intervening Waimakariri river, there was no community of interest between the districts. The Hospital Board wrote to the Minister of Hospitals, regarding the plan for the proposed hospital. The Oxford County Council intimated that it was prepared to guarantee £1,000 and requested the Board to secure the land.

1917.1918.

In May, 1918, an offer of part of the rural section 1890, Oxford, was received from W. H. Alford at £30 an acre plus the cost of surveying. Other offers were received, but this site was chosen as the most suitable and was favourably recommended by the District Health Officer.

In June, 1918, the Minister consented to the erection of a hospital, and tenders were called for, but when submitted, they were much higher than the estimate. The Minister considered that £4,713 was too much to spend on a hospital for nine patients. The local authorities were informed that in view of the cost of the proposed building, plans must be re-considered or alternative building operations held over till times were normal. It was one of the many painful features of a war; this disruption in the programme of social service, and hospital service to a community was by no means the least of them.

The Oxford County, however, was determined to pursue the matter to a successful conclusion. It intimated to the Hospital Board the willingness of the County to raise by loan a sum sufficient with subsidy thereon to provide two-thirds of the cost of the erection of a local institution. The Board presented the case to the Department, with the result that in December, 1919, the promise of subsidy was received, and plans of the building were proceeded with and within three months the building was completed.

1920.

On 30th March, 1920, Mrs. R. F. Henderson, whose husband was Chairman of the Oxford County Council, performed the opening ceremony.

Reports relating to the hospital deal with such mundane, but important matters as drainage and the septic tank. There did not appear to be undue trouble with either as in the case of some of the other country hospitals. An early report mentions the planting of the grounds, and macrocarpas for fencing. Pines and orchard trees have proved to be a fruitful source of supply for the institution.

Oxford Hospital, contd.1921.

In 1921, when the Department made enquiries into the insufficient use that was being made of some of the hospitals, the Board pointed out that a certain amount of prejudice existed in the Oxford district against a public institution. There were still a number of people who preferred to go to a private hospital and there were two established in the district. It was obvious that, in spite of the fact that it would have been wiser if some of the patients had elected to receive treatment at the local hospital, they avoided the public institution. The Board expressed its disappointment to the Oxford County Council that more use had not been made of the hospital. So that greater service might be given, patients were transferred from the Christchurch Hospital until the beds were required by the local people. This arrangement met with the Council's approval.

1931.

The subsequent history of the hospital reveals no matter of major importance. Several events of local interest are recorded and from time to time substantial gifts were presented to the hospital in the way of furnishings and produce by the residents. The people of the district should be congratulated for the interest that had been evinced in the needs of the district and the help that had been forthcoming.

In 1931, with the approval of the Board, an Advisory Committee was elected at a meeting of householders and decided to hold an annual meeting each year to receive the Committee's report and elect a new committee. Such action naturally stimulated the interest of the local residents.

1937.

The Oxford school children were encouraged to take an active interest in their hospital and to plant trees in the adjacent vacant sections. In 1937, the Headmaster of the District High School applied for over one thousand pines and macrocarpas and a further consignment was sent in 1938 consisting of two hundred trees or more.

Alterations to the buildings were carried out in 1937 providing for a new nursery and addition to the men's ward. The opening of the nursery provided an opportunity for the ladies' decorative committee to arrange a pleasant function. This committee indeed gave valuable service to the hospital.

RANGIORA HOSPITAL.

1921.

In 1921 representatives from the Rangiora Borough and adjacent Counties met the members of the Hospital Board at Rangiora to ask whether the Board would be disposed to control a Maternity Home as part of the Board's activities. The registered birth-rate for the year 1920 was 189, and of this number, seventy confinements were treated at the Home in question.

It was obvious and desirable that the Board should take some action to provide accommodation for maternity cases in the district. Whilst agreeing with the conclusion reached at the meeting, an opinion was expressed that the district should provide a sum by voluntary contributions towards the cost of erection. It was eventually resolved that the residents would guarantee to collect £500. Under the circumstances the Chairman felt justified in promising that the Board would start a temporary Maternity Home to take up the work relinquished by Nurse Currie owing to her state of health. The question of a new building would in due course be referred to the Board. Nurse Currie was asked to manage the temporary Home, provided that after it was started, leave of absence would be granted to her.

The Committee was loath to take immediate action, but from the representations made, it was evident that great inconvenience would be caused to expectant mothers if there was no Home. A dwelling in King Street, North, was rented for one year at £2.10.0. per week as a temporary measure and suitable furniture was purchased from Nurse Currie. Accommodation was thus provided for nine patients. The Home in Rangiora would serve the Counties of Kowhai, Amberley, Eyre and the Rangiora Borough. The Board's action in providing maternity facilities was fully endorsed by the Department of Health, which gladly recognised the energetic way in which the Board endeavoured to cope with the question of bettering maternity facilities.

The Home was available to the three medical men in the district, who were at liberty to send in their patients. It was run on the same lines as a private Maternity Institution with no paid medical officer. The doctors made a charge for their fees where the patients were able to pay. There were a few indigent persons in Rangiora and their needs were attended to by the Matron, and in such cases the doctor thought fit to make no charge.

1922.

In August, Miss Currie was unable to carry on the duties of Matron, and up to November various changes were made, as matters in connection with administration and nursing were unsatisfactory. An extension of tenancy for a further nine or twelve months was arranged, but this accommodation was proving wholly inadequate for the requirements of the district. With a view to pressing on with the matter of the Rangiora Maternity Hospital, the Board invited representatives of the various Local Bodies to meet at Rangiora to place proposals before them and submit plans for approval.

Rangiora Hospital, contd.

The estimate for building in timber according to plan was £5,500 and in concrete £6,000 to £6,500. The total figures allowed for lighting, fencing, draining and other necessities. The plans were approved and the Board decided to build a Maternity Hospital in concrete. It was determined to purchase about $3\frac{1}{2}$ acres of ground fronting Ashley Street at a cost of £100 per acre, and approximately $2\frac{1}{2}$ acres abutting upon the Ashley River at £300. The latter area would provide for the drainage being carried through to the river and also ample space for the erection of a general hospital should one be required in the future. J. Waller agreed to sell to the Board $3\frac{1}{2}$ acres with a frontage of $3\frac{1}{2}$ chains on Ashley Street at £100 per acre, but he accepted no responsibility for fences. The Rangiora Borough Council forwarded voluntary contributions amounting to £150 in aid of the building fund, and this amount included £52 from the Ashley Lodge No. 28.

1923. The Director, Division of Nursing, notified that the Board's application for recognition of the Maternity Hospital as a training school for midwives had been accepted. The Registrar of Midwives recommended that qualified nurses only should be accepted as pupils, and that Miss Bascand take part in lecturing and the practical instruction required of the Matron. Dr. T. A. Will undertook to organise the necessary series of lectures for students in conjunction with the other medical men in the district. Tenders were received for the building of the hospital and that of G. S. Ayers was accepted at £6,214.
1924. The front entrance and fencing were completed in 1924 and much planting was undertaken. The opening ceremony of the new hospital took place on 15th July.

In the early narration of events it was pointed out by the architects that the location of a site was a difficult one. The soil was quite unsuited for septic tank purposes and the Board considered the question of acquiring a site towards the river, preferably on shingle to ensure good drainage. In 1924 the Public Health Authorities directed the drainage towards the main road, thereby altering the instruction contained in the architect's specifications. Such actions were decidedly irritating, especially when the Department concerned was consulted at the time of purchasing the site, when reasons were fully explained as to the requirements. However, the Board asked for an assurance that there would be nothing detrimental to the health of the patients or staff in carrying out the alteration. The septic tank was placed directly in the drive of the institution and within a few yards of the building.

1925. The Hospital was gazetted as a training school for maternity nurses, with a maximum number of five to be trained as maternity nurses in a period of twelve months. In the event of this number being exceeded, the recognition of the hospital as a training school would be cancelled.

1927. A request was made to the Board by the three doctors concerned to discontinue rating the Maternity Home as a training school. They maintained that 90% of the work concerned their private patients, who objected to being used as subjects for demonstrating to the trainees. The Board protested to the Nurses and Midwives' Registration Board on the sudden and brief notice of alterations in the regulations which forced the closing of the Hospital as a training school, and asked that the new regulations

Rangiora Hospital, contd.

be suspended, but as the trainees had been placed elsewhere to complete their training, the request was withdrawn.

1930.

The hospital was described after an official visit of inspection as one of the gems of the Board's country institutions - "the paternal consideration given to it by Mr. Frederick Horrell is manifested in the general orderliness of all its surroundings. The garden, shrubs, trees, fruit and vegetables are everything that could be desired." The buildings were in excellent condition and no repairs were required. A small cottage had been built for the accommodation of a night-nurse.

1932.

By way of economy, it was agreed to let a portion of the land at a rental of 30/- per week and to bring the vegetable garden in with the leased land, leaving the flower garden and main drive for a man to attend weekly. Hitherto the upkeep of the garden had been costly to maintain.

1934.

A large proportion of patients were shunning the country districts and seeking admission in Christchurch Maternity Hospitals at St. Helens, Essex and Private homes. This was probably owing to relatives living in the city or due to the fact that the fees were less. The maintenance in small institutions was costly and unavoidably so. The staffing of country hospitals was heavy in proportion to the number of patients, whilst the average fees collected amounted to approximately a quarter of the cost per occupied bed. The Board decided that in future every nurse in charge of a country hospital was to be a fully qualified nurse with maternity certificate.

1938.

The Nurses and Midwives' Registration Board authorised the commencement of a training school at Rangiora with five trainees, but it was not possible to accommodate that number. Unless the Board could take at least four trainees, it was unlikely that approval would be given for the training school to function. The Board did not see fit to make any alteration in its building programme, so the matter dropped.

A deputation of Rangiora residents waited on the Board and suggested a Hospital Ward and theatre to be made available for the treatment of medical and surgical cases. Instructions were given for the preparation of plans and these were submitted for the Board's consideration. In order to meet urgent requirements, permission was given for the local doctors to admit selected medical patients that would in no way endanger the maternity cases, which would have preference at all times.

In October a sub-committee discussed with the doctors in Rangiora the question of extensions to the Hospital. There was every need for more accommodation to enable accident and medical and surgical emergency cases to be dealt with, as pointed out by the doctors concerned. Their views were entirely upheld by the Rangiora Borough Council and the Eyre County Council.

Rangiora Hospital. contd.1932.

An informal meeting was held in Rangiora in February, and further stress was brought to bear regarding the local needs. Preliminary plans were made by the architects, Collins and West covering the suggestions made by the Director-General of Health. The plans were approved and Messrs. Keir and Thompson's tender for a building in concrete was accepted. On December 24th, 1932, the Chairman of the Board and Chairman of the Hospital Committee met the local doctors and representatives of the various Counties interested when the extensions to the hospital were officially opened. Opportunity was taken to unveil the name plate which was erected to perpetuate the memory of Dr. Will.



Rangiora Hospital.



Grounds.