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comp.

THE NORTH CANTERBURY HOSPITAL BOARD

FRAGMENTS OF HISTORY

HOSPITALS - TUBERCULOSIS AND BENEVOLENT

INSTITUTIONS AND MISCELLANEOUS

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COMPILERS NOTE

In completing this work the compiler gratefully acknowledges the courtesy and valued help of men and women who have shown a kindly interest, and also to the nurses who graciously allowed the loan of old photographs.

That some facts and figures have evidently been lost to posterity is indicated in the work of an investigator of some years back.

The fields of research are limited and the early records of the institutions of the province are scanty and scattered.

It is hoped that the inedited fragments that have been collected will prove useful in acquainting readers with some interesting items concerning the ramifications of the hospitals and institutions of Canterbury.

Any shortcomings in the compilation of this work may be attributed to the writer's difficulty in consolidating the records of the various governing bodies.

W.R. Norris

The North Canterbury
Hospital Board Office
24th February, 1942.

To ascertain who were first prompted by the thought to establish a hospital for the early Canterbury Pilgrims, one has to go back to a period antecedent to their arrival in the Colony. In 1837 when the young Queen Victoria ascended the throne, an Association was founded in England for the colonisation of the country. A member of it was Edward Gibbon Wakefield whose efforts to establish a sound system of colonisation was beginning to bear fruit. Twelve years afterwards the responsible officer for the choice of the original site of the settlement was sent out with despatches to the Governor and the Bishop of New Zealand and to undertake survey work. For a time he was resident in Lyttelton and on the first town plan of that port was marked a site for a hospital. The Canterbury Association whose affairs were managed in London designed the settlement.

In 1850, the Association's Agent arrived and established a small hospital in Lyttelton, the first in the new province. Reference here to the Canterbury Association would be out of place but for the fact that from it emanated the first idea of providing hospital facilities for the pilgrims about to voyage to the Antipodes. Four years after their arrival, the Association presented to the Canterbury Provincial Council, as a site for a hospital, a block of land where now stands the old Provincial Council Chambers and Government Buildings. For a number of reasons, the land was unsuitable for a hospital. The Council then provided five acres in Hagley Park and in 1859 passed an Act authorising the building of a hospital on that site.

The Canterbury Association was thus to some extent identified with hospital affairs long before the earliest Christchurch Hospital Board came into being. The Archbishop of Canterbury was President, and the members numbered fifty-two including a Committee of Management. Readers of these notes may be interested in the Association's personnel:-

- | | |
|------------------------------|-----------------------------------|
| The Archbishop of Dublin | Right Hon. Sidney Herbert, M.P. |
| The Duke of Buccleuch | * Hon. Sir Edward Cust, K.C.H. |
| The Marquis of Cholmondeley | The Dean of Canterbury |
| The Earl of Ellesmere | * G. B. Adderley, Esq., M.P. |
| The Earl of Harwood | W. H. Pole Carew, Esq., M.P. |
| The Earl of Lincoln, M.P. | * Hon. R. Cavendish |
| Viscount Mansfield, M.P. | * Hon. F. Charteris, M.P. |
| The Bishop of London | * Thos. Somers Coombs, Esq., M.P. |
| The Bishop of Worcester | * Rev. E. Coleridge |
| The Bishop of Exeter | * Wm. Forayth, Esq. |
| The Bishop of Ripon | * Rev. G. R. Gleig |
| The Bishop of St. David's | * J. R. Godley, Esq. |
| * The Bishop of Oxford | * Edward Halswell, Esq. |
| Bishop Coleridge | Ven. Archdeacon Hare |
| Lord Ashburton | * Rev. E. Hawkins |
| Lord Lyttelton | Rev. Dr. Hinds |
| Viscount Alford, M.P. | Rev. Dr. Hook |
| * Lord Courtenay, M.P. | * John Hutt, Esq. |
| Lord Ashley, M.P. | * G. K. Richards, Esq. |
| Lord A. Hervey, M.P. | * J. Hinson, Esq. M.P. |
| Lord J. Manners | A. Stafford, Esq. M.P. |
| * Sir Walter Parghur, Bart. | Hon. J. Talbot |
| Sir W. Heathcote, Bart. M.P. | Rev. C. M. Yorlesse |
| Sir W. Jones, Bart. | Rev. R. C. Trench |
| Sir Willoughby Jones, Bart. | * E. Jerningham Wakefield, Esq. |
| Right Hon. H. Goulburn, M.P. | Ven. Archdeacon Wilberforce. |

* Formed the Committee of Management.

 With reference to the genesis of hospitals, it is believed that the first hospitals were Druidic and were founded in Ulster about 300 B.C.

The Christian spirit which led men to care for the poor and sick was introduced by St. Augustin in A.D. 596, but the caring was rather for the souls than the bodies.

The first authentic Saxon hospital was at St. Albans in 794. Henry 1st founded St. Bartholomew at Oxford and later in 1123 the Prior of St. Bartholomew in London founded the hospital on the site in Smithfield where it still stands. This is said to be the oldest Hospital with an unbroken record.

It has been difficult for historians to trace the foundation of St. Thomas' Hospital, but it is authentic that in ¹²⁰⁷~~1220~~ there were two hospital foundations united and dedicated to Thomas à Becket and in 1228 the direct fore-runner of the present St. Thomas' Hospital was founded.

During the Middle Ages, the hospitals were under Monastic rule. Kings used to lodge in the hospitals when travelling about the country and sent old retainers to end their days in them, and thereby the sick were really crowded out. The Monks that controlled them spent the revenues in purchasing relics of saints.

At the Reformation the hospitals were found to be as corrupt as the Monastries on which they depended and Henry VIII suppressed them both alike. After this, there were practically no hospitals.

Henry VIII's reign saw the foundation of the Royal College of Physicians. In 1538 a petition was presented to the King asking him to hand both the St. Thomas' & Bartholomew Hospitals back to the public. The ancient hospitals of St. Thomas and St. Bartholomew having been practically suppressed. The citizens promising so to conduct them as not to encourage vagrancy.

Finally some of the confiscated property of the religious orders were set aside to found five new hospitals and these were the St. Bartholomew and St. Thomas, which were practically refounded at that time, and his successor Edward VI carried out the responsibilities later. Hardly any other hospitals were built. Very little movement was made in the erection of hospitals.

In the 18th century an outcry called attention to the deficiency. The principal public view appeared to be to relieve the needy and set them to work rather than to care for the sick and most of the old hospitals had been put to other use.

In the early years of the 18th century the Guy's Hospital was founded by Thomas Guy, a bookseller and publisher in London, who left over £200,000 to found and endow a new hospital, and Guy's Hospital has been in close co-operation with St. Thomas' ever since.

Hospitals proper had many vicissitudes until they got into the 19th century when by degrees public attention was drawn to them, and as a matter of gradual evolution, the British Hospitals are as they are today, but it was well on in the 19th century before any really serious attention was called to them.

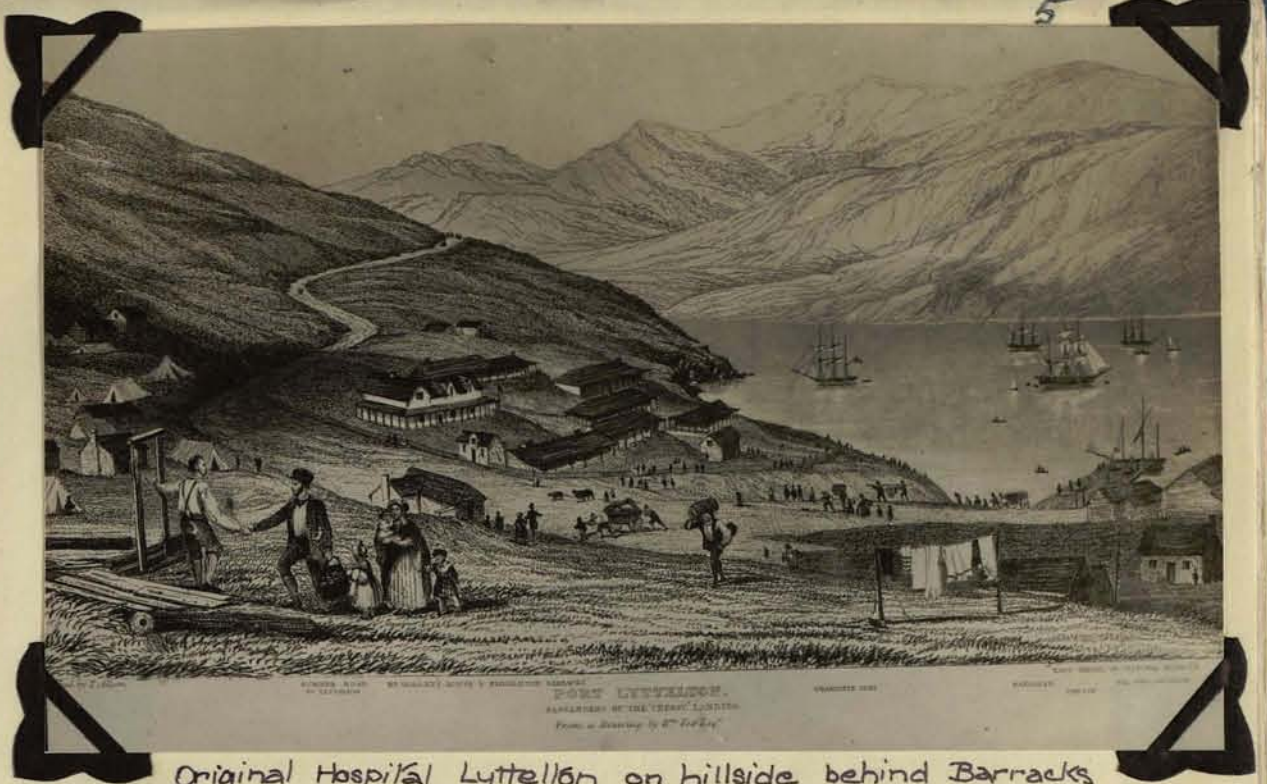
Infirmaries came under the Boards of Guardians, otherwise the Poor-Law Authorities.

The report of the Poor Law Commission of 1832-34, hardly mentions the sick poor, only assuming that they shall receive outdoor relief, but this condition has now been altered and many local and county hospitals have been established throughout Great Britain.

Under the present condition of the Law, the County and Borough Councils are responsible for the care of insane and fever cases.

It was not until 1929 that the Local Government Act abolished the Poor Law and transferred all the duties and property of the Boards of Guardians to the Local County and Borough Councils with the duty of dealing with public health matters and the old Poor Law Infirmaries became Municipal Hospitals.

Of course the whole thing has been a matter of gradual progression until today Great Britain is almost in the forefront with its hospital establishments. But we in New Zealand have had an advantage over Great Britain inasmuch as we have had a compulsory Hospital System since 1885 whereby the cost of maintaining these institutions and equipping them and keeping them so as to maintain a certain level of efficiency, has fallen upon the public shoulders and no person in New Zealand has had occasion yet to complain of the burden which this system has been to them.



Original Hospital Lyttelton on hillside behind Barracks
below Lyttelton-Sumner Road.



quay site.



Dampiers Bay.

LYTTELTON HOSPITAL.

1849.

In 1849, a year prior to the settlement of the Canterbury Province, Captain Thomas, an expert Surveyor from England and the responsible officer for the choice of the original site of settlement, applied to the New Zealand Company's Agent in Wellington (Mr. W. Fox), for a Medical Officer to be appointed at Port Cooper the reason being that a doctor was required to attend men working on the roads at the Port. (The name of the port was later changed to Lyttelton).

1850.

In April, 1850 (seven months before the arrival of the "first four ships" in the harbour) Mr. J. R. Godley, the Canterbury Association's Agent, secured the lease of a house belonging to the Rev. O. Mathias for the purpose of a hospital in Lyttelton. The site for the Hospital reserved on the town plan of 1851 was Section 29, at the junction of Coleridge and London Streets, but it was not considered a good one, so was offered for public sale in November, 1855. Dr. Donald was appointed Provincial Surgeon and Medical Officer at the Hospital at a salary of £150 per annum. Mrs. Snelling, the matron, was replaced in 1853 by Mrs. Anne Roberts.

1854.

In 1854 complaints were made that the hospital building was not weather-proof in roof or walls. Mrs. Roberts threatened to resign owing to this and to the fact that she had no private room and had six patients to attend to. She was an efficient nurse and Dr. Donald pointed out the difficulty of finding anyone to replace her. When the lease of the building was nearing expiry, he recommended the building of a new hospital or the acquisition of a more suitable place. Arrangements were made with Mr. Henry Sewell for the old Custom House building, on which repairs had been effected and additions made by Mr. Nutton, at a cost of £119.14.0. To this the patients from the leaky old hospital were removed in August, 1854.

As there was no Mental Asylum, patients of unsound mind were placed in the older hospital, and whilst they were housed there, considerable damage was done. The Provincial Government was called upon to pay for the damage to Mr. C. E. Dampier, who was agent for the Rev. O. Mathias. Failing to have the lunatics placed in the Auckland Asylum, they were ultimately lodged in the Lyttelton Gaol.

Dr. Donald drew attention to the drawbacks of the existing reserved section. The site was not isolated enough, being buried in a gully and was not near good water, and generally inferior to the site of the existing hospital. In November alterations and repairs costing £127 were made to the hospital.

1856.

Mrs. Roberts resigned, and Mrs. Harriet Simpson took up duties from 1856 till 1862. She maintained three orphans as well as her own daughter till she married Captain Preece. Mrs. Louisa Cahagan took up duties, but resigned the next year owing to her husband's behaviour, and Mrs. Edmiston from Auckland was appointed.

During Mrs. Simpson's term the hospital narrowly escaped fire by the destruction of Tribe's store. Repairs to the hospital were made by Messrs. Salt and Nutton!

Lyttelton Hospital, contd.1861.

In 1861 Dr. Donald was gasetted as Resident Magistrate of Lyttelton, also visiting Justice, Inspector of Cattle and Inspector of Immigrants, Church Property Trustee and Coroner.

1862.

In 1862/63 a return of lunatics - Lyttelton Hospital - shows the causes, or the supposed causes, of lunacy; in the cases of nine males as "apparently from drink"; two, from solitude on out-stations; three, injury to head; one, unknown or undetermined; and the cases of five females were classed under the last heading.

1863.

Three acres of land, part of rural section 247, fronting the Governors Bay Road, was purchased in 1852. The Lyttelton Town Board was constituted in 1862, and decided to build a new hospital, voting £200 for that purpose. Arrangements were made with Joseph Blaymires for the purchase of sections 212 and 213 on Brittain Terrace and the conveyance thereof to the Superintendent of Canterbury - Crown grant dated 5th July, 1856. The land - 3 acres, 9 perches - was purchased in 1863 for £964.17.6 being at the rate of £300 per acre, plus six months' interest. Plans were submitted by the Provincial Architects, Mountfort and Luck, and forwarded with a description of the site to the Lyttelton Municipal Council (W. Godfrey, clerk). The new building, costing £1,793.19.6. was completed in December, 1863. The designer was C. H. Iggleden, Surveyor to the Lyttelton Corporation, and England Bros. were the Contractors. The Provincial Government voted £920 towards the land, and £1,000 towards the building, later another £500 and again £291. Dr. Donald was instructed to sell the old hospital for whatever it would realise. It was eventually sold for £32 provided no time was lost in removal. Most of the wood for the new buildings came from Tasmania and some from the bush at French Farm, Banks Peninsula. The staff consisted of Matron (Mrs. Edmiston) £75, Head Nurse (Mrs. Trounce) £40, Under Nurse £30, Cook £30, General Servant £25. I. A. Rouse was appointed Dispenser at £100 per annum, and had to find all medicines required.

1864.

Additions to the institution became necessary in 1864. The Resident Engineer and Surveyor at Lyttelton, Mr. Iggleden, submitted plans and specifications for a fever ward, kitchen, and "dead" house, estimated at £1,140. These were rejected by the Government and a more modest scheme was submitted, representing an outlay of £360, but this was likewise vetoed. A further pruning was made and specifications estimated at less than £500 were accepted and advertised.

Dr. Donald reported that in February, 1865, there were twenty-four males and two females (patients) in hospital, also that he had authorised a pint of beer daily to each nurse! The monthly average number in hospital was twenty. The causes of death in 1866 were given as malignant disease of pharynx, hypertrophy of heart, chronic disease of rectum, haematemesis (aneurism). In 1867 - accident, laceration of kidney, fracture of femur, libra, pelvis, malar bone and phthisis.

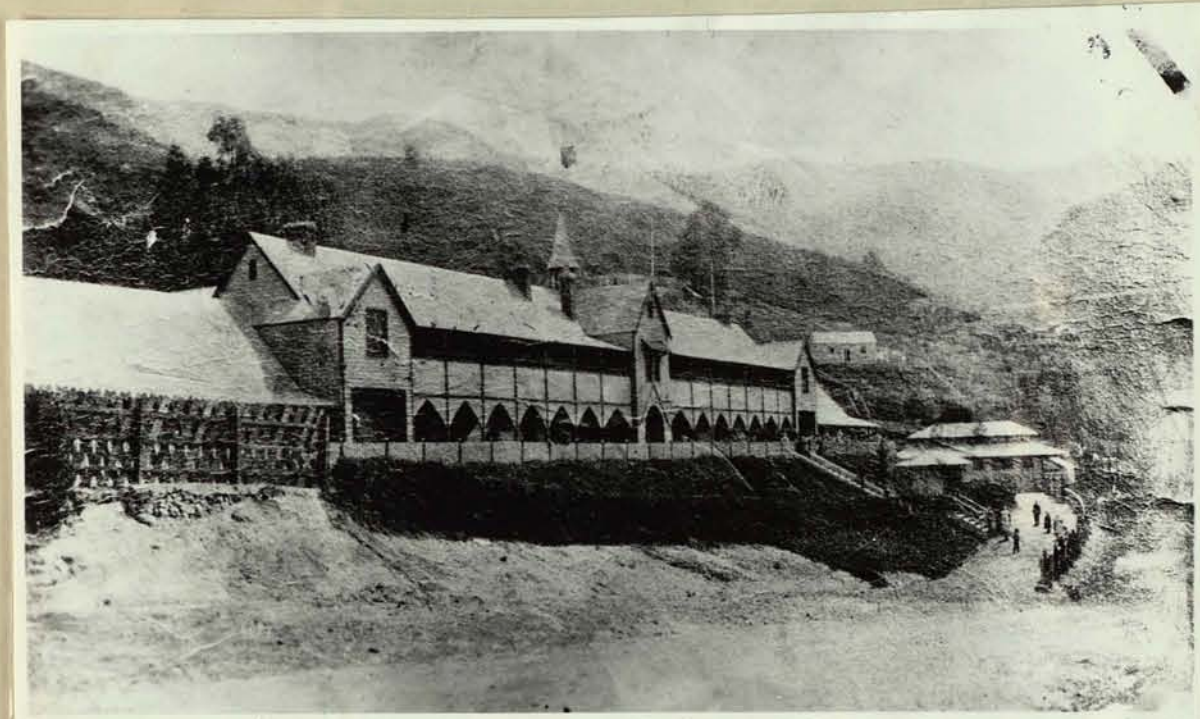
Lyttelton Hospital, contd.1866.

The Lyttelton Town Board made strenuous efforts to obtain control of the Hospital and petitioned the Superintendent of Canterbury, but the proposal was vetoed by the Provincial Government. Mrs. Trounce accepted the position of Matron, but was disappointed when a reduced salary was paid in July, 1868. The staff was unaware of any likely reduction being made by the Provincial Government, and unanimously objected. The Matron then resigned and Mrs. Scanlon was appointed. Acting on the instructions of the Superintendent of Canterbury, Dr. Donald served notice on all the staff that their engagements would terminate on 30th November.

1870.

Further alterations were made to the hospital buildings in order that they could be handed over for the purpose of an orphanage. Mrs. Scanlon was re-engaged till 30th June, 1870. Two patients were nearly cured and there were two incurables. The names of the last patients in the hospital were Thomas Pesti and Henry Donett. J. E. March, Secretary to the Immigration Department, made arrangements with Hawkins, Nation Contractor at Christchurch Hospital, to supply rations to Pesti and Donett, who were transferred to the Immigration Barracks. An inventory of furniture, stores and equipment etc. was made by Mr. March, and most of the material was selected by Dr. Burrell Parkerson, Jnr. for the Christchurch Hospital, while the remainder went to the Immigration Barracks. The hospital closed on 30th June, 1870.

An Accident Ward was completed and ready for use on 24th October, 1870, and from that time it was known as the Lyttelton Casualty Ward. The old hospital became known as the Canterbury Orphanage Asylum from August, 1870. (See Orphanage file.) The name was changed from the Canterbury Orphanage to the Waltham Orphanage till 1940, when it was again changed to the Children's Home, Waltham.



- | | |
|---|------------|
| 1 | STAFF |
| 2 | BOYS |
| 3 | GIRLS |
| 4 | PRAYROOM |
| 5 | SCHOOLROOM |
| 6 | LAUNDRY |

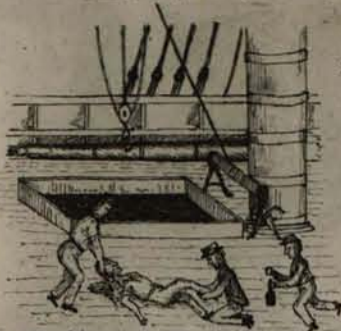
wide flight of steps at
Entrance with lych-gate.
(or covered gateway)

see Wallāin Ophauge.

Canterbury Ophauge, 1853, Lyttelton.

HUMANITY, (in LYTTTELTON TIMES.)

"And the Hospital at Lyttelton may be closed." *the Lyttelton Times, 19th Feb 1868.*



Thomas Bobstay, A.B., having been knocked by a bale of wool down the hatchway of the ship "SIREN", Capt TULIP, and sustained sundry contusions, dislocations and fractures thereby.



Is with all possible dispatch conveyed ashore, to be placed in the Christchurch Hospital; that in Lyttelton having been closed, in accordance with the suggestion above.



On arriving at the Lyttelton Railway Station, the 10 a.m. train having just started, a slight delay of three hours occurs before he can be forwarded to



the Station at Christchurch, where the above easy and commodious vehicle is chartered for his removal to the Hospital.



But owing to the increase in sickness consequent upon the 19th overflow of the Waimakariri River, not a bed is vacant.

FINIS.

HUMANITY.

"And the Hospital at Lyttelton may be closed".

1. Thomas Bobstay, A.B., having been knocked by a bale of wool down the hatchway of the ship "Siren", Captain Tulip, and sustained sundry contusions, dislocations and fractures thereby
2. is with all possible dispatch conveyed ashore, to be placed in the Christchurch Hospital; that in Lyttelton having been closed in accordance with the suggestion above.
3. Arriving at the Lyttelton Railway Station, the 10 a.m. train having just started, a slight delay of three hours occurs before he can be forwarded to
4. the Station at Christchurch, where the above easy and commodious vehicle is chartered for his removal to the Hospital,
5. but owing to the increase in sickness consequent upon the 19th overflow of the Waimakariri River, not a bed is vacant.

FINIS.

("Lyttelton Times", 19th February, 1868.)

11

CANTERBURY ORPHANAGE - LYTTELTON.

1869.

The Executive Council of the Provincial Government decided in 1869 to fit the hospital at Lyttelton to receive orphans and to remove the orphans placed by it in the Orphan Asylum at Addington. Reports from Synod show that this was done in 1871 and the Addington institution closed owing to the smallness of numbers. The institution founded at Lyttelton became known as the Canterbury Orphanage. Munificent contributions were made to the Orphan Asylum by the workmen of the Lyttelton and Christchurch Railway Construction Service.

1870.

Arrangements were made with Chief Gaoler Reston to send forty-eight hard labour prisoners to work on the Lyttelton Orphanage in 1870. The Provincial Council Secretary, through the Police Commissioner, Mr. Shearman, notified that the hospital at Lyttelton was vacated and the buildings were under police care till Mr. Girard took possession to keep out strangers. Mr. Girard reported that the institution had been carried on under the supervision of the Master and Matron, Mr. and Mrs. Smart at £1 per week, 2 nurses, 1 undermaster, and a cook. Great difficulty was experienced in procuring suitable people as nurses as they had no discipline, were tired, and unable to instruct young children. School was held in the dining hall. In 1868 there were 49 boys and 25 girls; 1869, 57 boys and 27 girls; 1870, 54 boys and 32 girls; 1871, 54 boys and 45 girls; and in 1872 there were 51 boys and 36 girls. By 1875 the number of inmates had risen to the maximum of 120, and the institution was managed at the annual cost of £2,500. In the gazette for 1870, the financial statement for the quarter ending 30th September shows no statement of salaries paid, but £420 under voted expenditure, while one quarter in December, 1879, shows £120 in salaries. The Orphanage was purely a public institution and very satisfactorily conducted by Mr. Peter Fox who was in charge from about 1877-79. The boys, as soon as they were old enough, were apprenticed to various trades, and the girls were sent out to situations as domestic servants.

1877.

1879.

In 1879 a monthly report from the Master of the Orphanage was presented and read to the Hospital and Charitable Aid Board and the Board resolved that the medical officer should give a quarterly report on the general health of the children. There were 64 boys and 39 girls making a total of 103 in the institution. There was an outbreak of diphtheria at this time, the probable cause being the dampness of the building, and the flooring of the dormitory had to be renewed. The Minister of Immigration placed Quail Island at the disposal of the committee for the children whilst a careful inspection was made of the Orphanage buildings and drainage.

A report from the Inspector of Schools on the Lyttelton Orphanage was read and the Hospital Committee was of opinion that the report should be adopted:-

"That the infant boys and girls be formed into one class and taught on the kindergarten method; that the older scholars be taught the theory and notation of music, and that singing of the infant classes should be chiefly by ear; that the classes which passed the third standard should be taught elementary science relating to such common things as suitable clothing, health, cleanliness, and the use of the lever gage and other mechanical powers, also linear and free-hand drawing."

Canterbury Orphanage - Lyttelton.

The committee concurred with the opinions expressed by the Matron that the older girls who were carefully trained to do domestic duties should not be placed out until after the winter, their services being required to look after the younger children.

Mr. William Rolleston, Minister of Lands, who personally inspected the orphan asylum, was unwilling to sanction increased expenditure until the institution was placed under the management of a more efficient Master and Matron. Mr. and Mrs. Baxter were appointed in 1881.

1880.

In October, 1880, the Colonial Secretary requested that all correspondence connected with the Lyttelton Orphanage should be addressed to the Secretary of the Education Board.

Application was made to the Education Department with a view to ascertaining if the Canterbury Orphanage was entitled to a grant for additional purposes from funds voted for that purpose. It was suggested that application be made to the Auckland Education Board to recommend a certified teacher and to give the services of their Chief Inspector. It was desirable that the schoolmaster should be able to teach singing and that a fife and drum band be organised. This would certainly prove a source of attraction. As the Education Department was entrusted with the general supervision of the Orphanages, the whole question was brought under their notice.

1882.

On the motion of the Mayor of Sydenham (a member of the Board) it was resolved that the Orphanage Committee make enquiries in 1882 into the probability of procuring a training ship connected with the Orphanage, and further attention was drawn to the favourable expressions and promises made by the Premier and also by the Minister of Public Works of the Grey Administration to the effect that the training ship was a necessary adjunct to that and kindred institutions in Canterbury, and the Government would do its best to secure one without delay. The Board was of opinion that the annual cost of maintaining and instructing boys on board the training ship would not exceed their present maintenance. The Board was fully aware that the Government was much occupied in matters affecting the wellbeing of the Colony, and suggested that a petition be made to the Admiralty praying that a training ship be granted to the Colonial Government stationed at the Port of Lyttelton. An offer was made by Mr. C. W. Turner to place the brig "Derwent" at the disposal of the Lyttelton Naval Brigade for the Orphanage. A letter was read from the Government stating that they considered that the Orphanage was not in such a condition as to require or be much benefited by the acquisition of a training ship, therefore, the Board could not see its way to accept Mr. Turner's offer. The Board pointed out the unsuitability of the structure used as an Orphanage at Lyttelton. The ground for recreation purposes was hardly bigger than some to be found within the walls of the public gaols. Whatever view the Government took of the application, provision would have to be made to remove the children to a more desirable place.

Canterbury Orphanage - Lyttelton.

Mr. Restall (Inspector of Schools) reported on the Orphanage in February, 1882: The Master, Mr. J. C. Sopp acted as Steward, Accountant, etc.; Assistant at the boys' school, Mr. Catterick; Mistress of the girls' school, Miss L. Kissell. There were forty-two children presented for examination in standards. Classification of results:

	Standards	III	II	I	Total
Passed		8	17	16	41
Failed		-	1	-	1
					<u>42</u>

Infants in the school below Standard I - 35.

The Department of Justice asked His Excellency the Governor to grant a prisoner who was working at the Orphanage a remission of three months off his sentence of two years for his conduct on the occasion of a child being burnt and losing her life through falling into the fire.

1883.

When Mr. and Mrs. Sopp resigned in June, 1883, the position of Master and Matron was advertised at the salary of £200 and £75 respectively. Mrs. and Mrs. T. H. Ritchie were then appointed. Mr. and Mrs. James Fox followed them in 1883 and were later transferred to the Old Men's Home at Ashburton as Master and Matron.

As the Government had no fund for repairs to the Orphanage, the Board again applied in March, 1883, for the change of site and to obtain if possible a grant of fifty acres for the purpose.

The Education Department informed the Board that on and after the 1st January, 1883, the Lyttelton Orphanage would cease to be an industrial school unless brought under the new Industrial Schools' Act. With a view to classifying the children of the Burnham Industrial School, the Board recommended that the Government be requested to place the institution under the control of the Board, and for the purpose of economising and such classification, the Government also be requested to bring the Lyttelton Orphanage under the provisions of the Industrial Schools Act so that the children of the non-committal or neglected class at Burnham may be graded into the Lyttelton Orphanage.

It was decided in September, 1883, that the Board should take steps to secure an endowment of land for the Lyttelton Orphanage, and for the building of a benevolent institution for the province of Canterbury, and that a deputation consisting of the Chairman, H. Thomson, The Hon. N. C. J. Stevens, Mr. Montgomery, and the Mayors of Christchurch and Sydenham, be appointed to wait on the Hon. W. Rolleston, Minister of Lands, requesting him to withdraw from sale until the next meeting of Parliament the Police Reserve at Sheffield then advertised. Several applications had been made for a change of site of the Orphanage to somewhere in the country, and the Board was of opinion that the Lyttelton site would be very suitable for the Old Men's Home. The Home at Ashburton was a source of continual expense in patching and had never been intended

Canterbury Orphanage - Lyttelton, contd.

to be occupied for such a purpose and the site at Russell's Flat was considered too cold a climate.

1884.

Mr. James Gunning, Inspector of Schools, reported in April, 1884, that according to the class lists, the school connected with the Orphanage had acquitted itself very creditably; the result of 100% should prove pleasing to the Board. The questions set were the same as those given to town schools, and the same tests were applied. The lower school was considered to be in a more satisfactory condition than the Canterbury schools as well as the standards being up to the average of the state schools. The children were bright and happy. All that was wanted to make the institution a home was more ground. Arrangements made by the Master regarding a band master were approved, but he was requested not to incur any expenditure without permission being first obtained.

THE NORTH CANTERBURY AND ASHBURTON HOSPITAL
AND CHARITABLE AID BOARD.

1885.

The newly formed Board held its first meeting at the Orphanage on the 2nd December, 1885. The institution was inspected and the Secretary was instructed to obtain all possible information as to the working of kindred institutions and prepare a draft set of rules and regulations. The Master was requested to prepare a return of all children giving as much information as possible, an inventory, and a return of all moneys received and expended from the date of his taking office till the present time, also arrears due for maintenance of each child.

The Master attended a meeting regarding a recreation fund. There was an amount still due for band instruments of £131. It was decided to allow the boys' band to go out at a fee of £5.5.0. The Board, on behalf of the children and their band, accepted the invitation of the Caledonian Society to play at the Lancaster Park Sports.

In 1879, William Lucas left a large estate comprising various properties. Amongst the beneficiaries under the will was the Orphan Asylum in the Provincial District of Canterbury. The Ashburton and North Canterbury United Charitable Aid Board being the owners of the Asylum situated in Lyttelton automatically became the beneficiaries in respect of the residue of the estate.

Intimation was received from the Crown Lands office in 1885 to the effect that R.S. 27095 was found to contain two acres, 1 rood, 24 perches in excess of that purchased and requesting payment of £4.16.0. before the 31st December. As this land was a portion of the estate left by the late Mr. Lucas for the Orphanage, it was resolved to pay the amount.

It was decided that application be made to the Board of Education for accommodation of orphanage children in the Borough schools. Since the committee came into office in November, 1885, it had endeavoured to become acquainted with the general working of the institution in which there were 103 inmates, namely - 71 boys and 32 girls (of whom a large number had either one or both parents living) besides a considerable number who have been placed in service or

Canterbury Orphanage - Lyttelton, contd.

apprenticed to various trades. The question of the education of the Orphanage children was considered and it was concluded that these children were equally entitled to the benefits to be derived from the course of education given to children at the Borough schools. Besides the superior education thus obtained, the fact that the children mixed with others of the same age would be of service to them by tending to prevent a feeling that they were in an isolated position and of a different class, a feeling which might have a tendency to prejudice their future. In the meantime the Master (Mr. Ritchie) was authorised to engage a pupil teacher to fill a vacancy on the teaching staff.

A petition was circulated to have the Orphanage formed into a separate institution. The petitioners proposed to contribute \$100, the minimum amount required by the Act and there was no provision in the Act compelling even that sum to be contributed after the first year. It was considered advisable that the Board should endeavour to obtain a statutory enactment giving it more power over the children placed in the institution. In July, 1886, advice was received from the Premier's office that the Orphanage could not be incorporated as a separate institution under the existing Act. The Secretary of the Board, with the approval of the Colonial Secretary, was made manager of the Orphanage for the purpose of Section 4 of the Hospitals and Charitable Aid Act. Owing to the sudden death of Dr. H. McDonald, the Board lost the services of its medical officer; Dr. T. O. Guthrie undertook to fill the position.

An amended schedule of the Governess's duties was laid before the committee, and at the same time it was agreed that the Master should be held responsible (especially) for Standard IV and upwards. The Education Board notified that the Inspector of Schools would examine the children at an early date. The Union Company made an offer to take a lad who was anxious to go to sea. Two more boys were discharged from the Orphanage and joined the "Rimutaka" as assistant stewards, and another boy was engaged as bugler and assistant steward on the "Kaikoura". Several children who were boarded out in November, 1887, were admitted into the Orphanage. The Chairman of the Orphanage Committee (H. H. Halder) was appointed to execute indentures on behalf of the children who were apprenticed out and to act as trustee on their behalf.

A resolution was passed in April, 1886, that the Government be asked to allow the Board to have access to all papers, minute books and documents in connection with the Lyttelton Orphanage and all other institutions under the control of the Board. Later the Board asked for temporary use of old minute books for reference. Until a reasonable period had elapsed under the new management, the cost per head could not be determined, but it was considered to be approximately 10/- per week. A letter was received

Canterbury Orphanage - Lyttelton, contd.

from Mr. J. C. Sopp asking the Board's assistance in securing documents and books relating to the past management of the Orphanage. It was decided that the Government again be asked to allow the Board to have access to all papers in connection with the Lyttelton Orphanage.

1886.

A requisition was made to the Government in 1886 to convey all sites and buildings under the control of the Board. An insurance against fire for £3,000 was divided amongst various insurance companies. The annual cost of the institution was about £2,500. In March, 1886, Mr. and Mrs. Brownlee, late of Burnham Industrial School were appointed Master and Matron, temporarily.

1889.

Through the courtesy of the Board of Education, Mr. L. B. Wood made an examination of the school work of the children in 1888. The Board did not recommend sending the children out of the institution and asked that the teaching might be carried on within the Orphanage by arrangement with the Education Board in 1889. The Board was desirous that the Education Board should be induced to provide the teaching staff at the Lyttelton Orphanage. The solution of the difficulty was to make the Orphanage a public school under the Education Act, in which case the duty of providing teachers, furniture and appliances would fall on the Education Board. In January, 1890, owing to the alterations in the system of management, the school teaching staff was dispensed with and the children sent to the public schools. Arrangements were made for placing out several of the bigger boys at service. At this stage Mr. and Mrs. A. C. Newton were appointed to the joint position of Master and Matron.

1890.

A satisfactory report was received from the Orphanage Lady Visitors' Association in 1890. Apparently the boys generally were anxious to enter the Navy, and it was suggested that it would be a great advantage and a relief to the institution if a training ship could be started in which the boys might be trained. Two of the boys joined the Royal Navy aboard the H.M.S. "Opal."

The Board was unanimous in recommending that the boarded-out system should be applied to the greater number of the inmates of the institution, and that carefully selected "foster parents" residing in the country districts in healthy surroundings should be selected. Such a plan enabled the Board to effect reductions in the maintenance of the institution where only a limited number would be kept in residence. Applications were invited from persons willing to undertake the custody of children, so that a limited number might be retained in residence at the Orphanage. There were twenty-nine boys and sixteen girls in residence. After a selection of homes was made, the number resident was reduced almost to the minimum.

1894.

In March, 1894, the Board had to face a difficult problem with so large a building as the Orphanage, seeing that the boarded-out system had been adopted for the majority of its inmates. In recognising that the cost of maintenance was beyond all proportion, and before closing such an institution, the Board had to guard against the risk of jeopardising the endowments. It was hoped that the place might be adopted by the Government for a school for deaf and dumb children who require to be kept together

Canterbury Orphanage - Lyttelton, contd.

in an institution rather than the orphans who are better separated and boarded in rural homes. An exchange of Crown Lands other than at Lyttelton was another suggestion. In endeavouring to reduce the expenditure, notice was given to the Master and Matron to terminate their engagement and offers were to be invited for the maintenance of not less than six children on the premises at per head per week. Rooms and furniture would be provided free of rent. Further consideration was given to the matter, and Mr. and Mrs. Newton were re-appointed in 1895, resigning after ten years' service in 1900. The Board placed the Orphanage under offer to the Government on any reasonable condition with regard to price or exchange of site, but the Government was not disposed to help the Board with regard to utilising the premises.

1902.

It was agreed that Mrs. Carpenter should take up her residence at the Orphanage and that a housekeeper should be engaged to take care of the premises under Mrs. Carpenter's direction. In October, 1902, it was recommended that the Matron of the Orphanage be relieved of her other duties as the Board's Inspecting Officer, in order that her whole attention be devoted to the affairs of the institution. (Mrs. Carpenter was also Charitable Aid Inspector.)

In 1902 the Board's attention was drawn to the dangerous cliff on the boundary of the Orphanage premises which threatened to cause serious damage unless preventative means were taken. An arrangement was made with the Lyttelton Borough Council in January, 1903, to share the expense of a retaining wall on the boundary cliff above which is a public road. The question of liability appeared to be somewhat complicated.

1904.

In 1904 the Government was again approached with a view to making some reasonable exchange, and whilst negotiations were being made, the building was totally destroyed by fire. Temporary arrangements were made for housing the children on the property of Mr. Joyce in Lyttelton. It was decided that the site of the Orphanage should be retained by the Board and the area was subdivided into building sections. At this stage it was proposed that a portion of the Twigger land should be acquired for Orphanage purposes rather than build a new Orphanage at Lyttelton, or on a site on the Ferry Road in which Mrs. Lucas had an interest during her lifetime, and which would ultimately come into the Board's possession. However, in March, 1905, Mrs. Spender's property in Austin Street was offered to the Board at \$1,200 and was accepted. Owing to the change of locality, the name of the Orphanage was then altered to "Waltham Orphanage."

See Waltham Orphanage
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LYTTELTON CASUALTY WARD.

1870.

An accident ward was completed and brought into use in 1870, when the Lyttelton Hospital "Emergency Ward" ceased to exist. The accident ward was later known as the Lyttelton Casualty Ward, with A. B. Savage as caretaker. His successor was James Scott. The population of Lyttelton in 1871 was 2,551.

1874.

The accident ward was made available to all patients through the strenuous endeavours of James Callender, administrator of charitable aid. Previously, many patients were allowed even in their suffering to await transport to Christchurch. A petition for the establishment of a hospital was presented to the Provincial Government signed by the Mayor and Councillors and numerous residents of Lyttelton, stating that in a seaport town, owing to the large amount of shipping, accidents occurred more frequently than in an inland town and were usually of such a nature as to require prompt and immediate surgical and medical care and treatment.

1875.

The Casualty Ward, which was situated on an eminence near the tunnel-mouth overlooking the railway, was opened in 1875, when the Provincial Government was on the eve of extinction.

1879.

The Casualty Ward was, with the other charitable institutions, under the control of the Hospital and Charitable Aid Board of the Provincial District of Canterbury. There is a record of a Board Meeting held at the Christchurch Hospital on the 2nd July when H. Thomson (Chairman), the Mayor of Lyttelton, the Mayor of Christchurch, the Mayor of Sydenham, W. Montgomery, J. E. Brown, Dr. Turnbull and J. E. March (Secretary to the Board) were present. The receipts for the half year ending 31st December, 1879, were £21 and expenditure £72; the number of patients admitted from the 1st July to 31st December was six.

1882.

There were no patients in the Casualty Ward in November, and the caretaker resigned owing to ill health. The Mayor of Lyttelton brought under the notice of the Board that a statement had appeared in the newspapers in February, 1883, to the effect that the Casualty Ward was supposed to be closed. The Board then informed the Charitable Aid Medical Officer in Lyttelton and the officer-in-charge of the Police that the ward was open for urgent cases and had not been closed.

The Railway Engineer's Department asked for the Board's permission in December to remove the Casualty Ward and other buildings under the control of the Board on the Railway land at Lyttelton to another site on the tunnel reserve near the Union Bank. The Board resolved to comply with the request on the condition that it was put to no expense and that the building would be left in good order and condition.

1883.

For the year ending 30th June, 1883, the receipts were £11 and expenditure £49 (the expenditure for the previous year was £77), the number of patients admitted during the year was seven.

Lyttelton Casualty Ward, contd.1886.

Dr. J. O. Guthrie was asked by the Hospital Board to regard the Casualty Ward especially for the reception of casualties, while any cases more fitted for treatment, in a medical ward should be forwarded to the Christchurch Hospital. Rules for the caretakers were drawn up, and Mr. and Mrs. George Johnston were appointed.

1892.

The Lyttelton Borough Council considered that the Casualty Ward should be kept in a thoroughly efficient state to meet the growing requirements, and to this end the Council pointed out the necessity for enlarging the operating room in July, 1892. The Casualty Ward consisted of two rooms, two beds in each, kitchen and bedroom for the resident attendant who received £39 per annum together with fuel and lighting. A letter was written to the Police stating that the Board would meet any charges for telephone or other message that might be incurred by the Police at Lyttelton in notifying the Christchurch Hospital authorities of any accident at Lyttelton requiring hospital treatment. The ward was frequently used for other than severe injuries, and the Board decided that no cases, except accident cases of such a nature that removal to Christchurch would be dangerous, should be admitted. The surgeon attended without fee from the Board, but was permitted to charge a patient, who also paid the Board 4/- per day whilst an inmate. The total cost of maintenance was approximately £100 per annum. A return from the Casualty Ward showed that a patient, not a casualty, had been admitted in direct opposition to the Board's resolution. The caretaker was requested to explain the reason for such a case being admitted. As arrangements in connection with the Casualty Ward were unsatisfactory, the Board was recommended to take the whole matter into consideration and give the requisite notice to dispense with the services of the caretaker. The Committee conferred with Dr. J. O. Guthrie, and a much more satisfactory arrangement than that previously existing was arrived at, putting the Ward on a better footing. It was placed under the immediate direction of two local medical men subject to the control and supervision of the Hospital Board. Members of the Board inspected the Ward, and the first expenditure was incurred by the Board in 1893.

1902.

It was reported that two cases - cirrhosis of the liver and cancer of the breast - had been admitted in 1901 by orders of Drs. Upham and Fairman. The Board resolved that the doctors be again communicated with protesting against the Casualty Ward being used for such cases. A return in 1902 showed that there had been another admission of a woman suffering from cancer. The Hospital Committee took exception to the practice of the doctors ordering patients other than accident cases into the Casualty Ward, and imperative instructions were given to the attendant to refuse admission of such cases. The Secretary was instructed to prepare a draft arrangement for casualties only to be treated. Dr. Fairman interviewed the Committee with regard to the new arrangements for carrying on the working of the Ward. It was decided to pay the doctor at the rate of £50 per annum. The caretaker received a free house, firing and lighting, but no victuals. Dr. Upham wrote to the Board regarding the admission of paupers to the Ward and was reminded that the Ward was for the treatment of severe shipping accidents only.

Lyttelton Casualty Ward, contd.

The Committee considered that arrangements might be made to transfer casualties to the Christchurch Hospital and then to close the Casualty Ward. It had become quite a hospital in itself and the Lyttelton doctors sent their patients there. Costs were rising steadily each year, and patients were treated who should have been sent to the hospital in Christchurch. It was decided that the House Surgeon from the Hospital should visit the Casualty Ward at intervals, especially to ascertain the nature of cases in the Ward. The Chairman pointed out that the land was not vested in the Board, the building being erected on railway reserve; consequently there was no tenure. The District Railway Engineer was communicated with as to the likelihood of the ground being required for railway purposes in the near future. As the Department had reserved the site for the Stationmaster's house, it was, therefore, not desirable for the Board to carry out any extensive repairs to their building. T. H. Davey, M.H.R. drew attention to the inadequate equipment of the Ward and suggested that very necessary improvements should be carried out.

1904.

The Board proposed closing the Ward, and the Town Clerk, Lyttelton, asked for careful consideration to be given to the claims of the Shipping and Railway employees. The Council emphasised the fact that in continuing the use of the Ward it was not for the townspeople of Lyttelton, but for the large number of men who were engaged in highly dangerous callings at the port. Many men were non-residents of Lyttelton and in the event of accidents it was necessary to have a suitable place for the reception of these cases.

1905.

Dr. Fairman resigned in 1904 and Dr. J. H. Howell was appointed. The Board decided that the Casualty Ward and the services of the staff be dispensed with at the expiration of three months from May, 1905. A public meeting was held in Lyttelton in August, 1905, when strong reasons were advanced for its continuance. Monetary assistance was offered towards maintenance, and the hope was expressed that the Board might yet recognise that S.S.D. were trivial matters compared with the alleviation of suffering and the preservation of human life.

An appeal was made to the various Shipping Companies and others for a contribution towards the cost of maintenance. The wharf labourers contributed \$15, annual grants were promised from the Railwaymen's Union and the Union Steamship Company. The Trades and Labour Council, the Lyttelton Stevedores' Union, and the Lyttelton Council, all urged the necessity of the Board assuming management of the Casualty Ward.

1908.

The Mayor of Lyttelton stated in May, 1908, that the Casualty Ward was required for accidents to be attended to until the patients could be transferred to the Christchurch Hospital. It was suggested that a properly equipped railway car would not be of any use if an accident occurred during the night after the last train had left.

Members of the committee visited the Casualty Ward together with the Mayor of Lyttelton, Mr. Radcliffe (who

Lyttelton Casualty Ward, contd.

had been instrumental in managing the ward since the Board surrendered control in 1905), and Drs. Newell, Upham and Guthrie, to make an inspection of the buildings and surroundings. The Railway Department was asked to ascertain whether the Government would be prepared to grant a fixed tenure of the land on which the building stood, with a view to the Board improving the same and rendering it more suitable for the reception of casualties occurring in connection with the work of the port. The committee recommended a grant of £50 as a subsidy until the question could be re-opened. The Railways Department notified that a lease at a yearly rental of £1 had been prepared. It was decided to accept the lease and take over on the 30th September, 1908. The committee recommended that the Casualty Ward be maintained, and a committee be appointed annually by the Board to manage the institution. It was also decided to grant a sum not exceeding £200 for making improvements to the building.

1909.

In January, 1909, the deeds in connection with the Casualty Ward were received for execution, and were authorised to be signed by the Chairman on the Board's behalf.

1912.

Dr. Newell accepted the appointment of surgeon and was requested to report monthly to the Board. In 1912 he expressed his willingness to work the Ward with Mrs. Johnson as caretaker, on the understanding that a nurse from Christchurch Hospital would attend if required in the case of accidents. It soon became necessary to replace the caretaker with one holding a nurse's qualifications, and Sister Gooding was appointed to replace Mrs. Johnson.

The Minister of Railways notified that, in the case of accidents occurring in Lyttelton, every assistance would be given by the Department to facilitate the transport of any patient to the Christchurch Hospital.

1919.

The borough being in need of improved hospital accommodation, the Council advocated the equipment of a new hospital comprising a Maternity Hospital and a Casualty Ward (the old one had ceased to meet the requirements of the district). It also suggested that provision should be made for taking in the children of maternity patients who could not otherwise be provided for during the mothers' confinements.

As it was anticipated that the St. Helen's Hospital in Christchurch would soon be rebuilt, the establishment of a separate institution in Lyttelton would, according to the Minister of Public Health, be obviated. A deputation waited on the Minister, and suggested that a two-bed maternity ward be provided and put in charge of a nurse midwife from St. Helen's, who would be paid by the Department.

By so supplementing the provision for maternity cases in Lyttelton, emergency cases should be dealt with only, and where possible, every use be made of St. Helen's Hospital in Christchurch. The services of the district nurse under the Public Health Department proved very satisfactory, and the Department asked if the Board was prepared to take her over and control her duties. As

Lyttelton Casualty Ward. contd.

Sister Gooding, who was in charge of the ward, was a registered midwife (London Obstetric Society's certificate) and had done district work in England, this was unnecessary. Nurse Boyd ceased to be a Department officer in 1922, and worked as a private nurse in Lyttelton.

By extending a portion of the Casualty Ward by twelve feet, accommodation was made for three or four maternity cases, and an extra bathroom was added. This met the needs of the poorer people whose houses in many cases were unsuitable for maternity purposes.

The number of births notified in Lyttelton in 1921 was 102. In twelve instances, notifications were lodged in Christchurch or elsewhere, making a total of 114 registrations.

Owing to the lack of accommodation, it was not possible to house a night nurse at the Casualty Ward, and to avoid daily visits from Christchurch, Nurse Boyd was engaged to work in conjunction with Sister Gooding; at the same time she could continue her district work. There was a steadily increasing demand for admissions and the ward was more of a cottage hospital than a casualty ward.

1927.

In 1927, plans were drawn up for alterations to a house to be used for the purpose of a maternity hospital, and also for a new building. It was decided to build in 1931 on the old hospital and orphanage site belonging to the Board on Brittan Terrace. The Casualty Ward was reinstated and known as the Casualty Dressing Station.



Lyttelton Casualty Ward.



Lyttelton Maternity Hospital.

LYTTELTON MATERNITY HOSPITAL.1919.

In 1919 the Lyttelton Borough Council drew the North Canterbury Hospital Board's attention to the necessity for a new hospital comprising a casualty ward and maternity hospital. At that time it was expected that extensions should be made to the St. Helen's Hospital scheme. Up till 1927 nothing eventuated, alternative plans were prepared by the Board for a new hospital, or alterations to an existing building.

1928.

In December, 1928 it was proposed to erect a hospital on part of the section occupied by a Mrs. Heeney. (This property belonged to the Board in the form of a trust with the Canterbury Orphanage). The Borough Council expressed its willingness to form a suitable entrance from Cressy Terrace free of cost to the Board when the new hospital was completed.

1929.

In 1929 plans were approved with the recommendation that the building be erected in brick. A great deal of consideration had been given to the accommodation required, and the plan provided for the minimum. Owing to a high bank on the northerly side shutting out the sun in winter, rooms on the first floor were considered to be more suited for patients. However, the authorities in Wellington came to the conclusion that the proposals contained in the Board's application were somewhat ambitious and that it would be better to reconsider the scheme for Lyttelton, still anticipating a large St. Helen's Hospital in Christchurch. The Board asked that reconsideration be given to its application, especially as there was serious objection by many women, to entering the old institution, a dwelling of a very old type in the vicinity of stable yards, and containing the most antiquated equipment. A Departmental Officer was sent from Wellington to confer with the Board's architect so that the best results could be obtained. After three years of deliberate efforts on the part of the Board to secure a satisfactory site, it was disappointing and confusing to say the least, that these were frustrated. The Board had endeavoured to obtain some other site but each one was either occupied by a building or the cost was too high. It was anticipated that at least 70 to 80 patients would use the institution for maternity purposes and that the accommodation provided was not by any means too great. The Committee would not recommend the Board to alter the plans without better reason being advanced from the Health Department.

1930.

In June, 1930, the plans were reviewed by the officials in Wellington, and application was made to the Minister to allow the work to proceed as soon as the raising of the necessary funds had the approval of the Loans' Board. In October, 1930, the consent of the Minister to the erection of a Maternity Hospital was given, and the tender of P. E. Muagrove was accepted for £3,500.

1931.

Nurse Boyd's services as district nurse in Lyttelton were terminated by the Board when the Maternity Hospital opened on 10th November, 1931. Sister Gooding was transferred from the Casualty Ward and resigned in 1934 when Miss E. Houston was appointed Matron.

LYTTELTON CASUALTY DRESSING STATION.

1931.

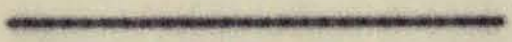
With the erection of the new Maternity Hospital in 1931 on Brittan Terrace, the use of the Casualty Ward on Norwich Quay as a combined casualty and maternity ward was superseded. The Harbour Board, Railway authorities and the Wharf Labourers' Union, were approached to see if there was any inclination towards assisting the Hospital Board in finding a suitable position nearer the wharves for a dressing station, but they each disclaimed having any available space or section suitable.

As the Hospital Board had no intention of leaving Lyttelton without suitable provision for accident cases, it endeavoured to secure a section near the Union Bank and the tunnel-mouth belonging to the Defence Department, also a site in London Street, but to no profit. The waterside workers, with the Amalgamated Society of Railway Servants, Lyttelton Ship Tally Clerks' Union, Lyttelton Branch of the Carpenters' Union, Engineers' Union, Harbour Board employees' Union, Foreman Stevedores and Permanent Hands' Union, and the Seamen's Union, entered a protest against the Casualty Ward being removed from Norwich Quay.

The Casualty Ward on the Railway reserve site continued as an institution, but was known as the Casualty Dressing Station. Mr. and Mrs. Richardson were placed in charge as caretakers in 1931, and the only emolument was the free use of the building, until the Board recognised the great improvements which had taken place. In consideration of this, free firing and lighting were granted. Mrs. Richardson carried on after her husband's death, and in recognition of her service the Board grants her a bonus from time to time.

1937.

In 1937, the Railway Department recommended a twenty-one years' lease with a conditional right of renewal of the whole or part area. It was anticipated that the whole area would be required by the Board, as the mortuary is included on the same property, though controlled by the Borough Council. The renewal of the lease was completed in August, 1938.



CHRISTCHURCH HOSPITAL.



Entrance Galin & Porten Lodge -
Christchurch Hospital.

Copia from a faded photo by W. R. L. M. O. S.

1846. The first hospitals in New Zealand dated from 1846. They were all in the North Island and maintained out of General Government revenue. During the first 12 years from then, no real hospital, so far as Canterbury was concerned, existed.

1858. In December, 1858, eight years after the arrival of the first pilgrims in Lyttelton, the Provincial Council of Canterbury passed an Act authorising the building of a hospital in Christchurch. One of the provisions of the Act empowered the Superintendent of the Province (William Sefton Moorhouse) to sell certain reserves for the purpose of providing funds. This Act was disallowed by the General Government in Auckland.

1859. On 6th August, 1859, a strong petition was sent to the Superintendent praying that a hospital be established in Christchurch. Christchurch Public Hospital Bill (notice of introduction, 1st October, 1859) passed its first reading on 6th October; second reading 7th October; committed to Select Committee 11th and 13th October; third reading 20th October; assented to by the Superintendent on the 4th November.

John Ollivier, Provincial Secretary, introduced a Bill into the Council proposing to take 5 acres of Hagley Park for a site for a public hospital. This raised a spirited protest locally, but the measure was carried by a margin of one vote, and the worst spot which could probably have been found, enveloped in river fog for so many nights during winter, was selected for the treatment of bronchial and other troubles incidental to the functions of a public hospital.

1860. A letter dated 9th July, 1860, signed by W. S. Moorhouse, H. B. Gresson and C. C. Bowen reads as follows:-

"The want of a hospital for Christchurch has long been much felt, and a Bill has just been passed by the Provincial Council for selling certain lands, the proceeds of which, are to be applied to the building of a hospital, but a considerable time must elapse before the necessary funds can be obtained, and a proper building completed, and in the meantime there are constantly recurring cases of illness or accident which require not only regular medical assistance but also a comfortable house, nourishing food, and good nursing - requisites that frequently cannot be obtained by patients of whom many have not been in the country long enough to have enabled them to attain a competence or even moderate comfort. It is believed that the want of a hospital has been much felt by stock owners, who live for the most part at a distance from medical advice and who are obliged in cases of illness or accident occurring to their servants, to send them to Christchurch for advice, to some public house or lodging, where they cannot have the quiet or constant care and attendance which a hospital would supply. It is proposed to rent a building in Christchurch or its neighbourhood to be used as a hospital until a permanent one shall be completed and it is hoped that the Stockowners, as well as the inhabitants of Christchurch, will contribute liberally to the support of so useful an institution, but before incurring the heavy expense which the establishment and maintenance of a hospital would involve, it is necessary to ascertain what income may be relied upon. Should the amount of

Christchurch Hospital. contd.

"contributions promised appear to justify the undertaking, a public meeting will be summoned for the purpose of forming a Committee and arranging other necessary details."

1861.

luck The Provincial Government voted £1,500 for the erection of a hospital in Christchurch. Mountfort and Luck, the Provincial Architects, estimated the cost of the buildings to be £1,756. Plans and specifications were submitted and approved by the Provincial Government, and in 1861, J. Fergusson's tender for £1,747 was accepted. The first building was a barn-like, two-storied erection, situated near the site of the present Nurses' old Home.

1862.

The Christchurch Hospital situated on the Riccarton Road, was opened on 1st June, 1862, with Dr. Burrell Parkerson as Surgeon, and Dr. Silas Stedman as Physician, at salaries of £300 per annum each. Horatio Bunting and his wife were appointed Master and Matron, J. Dalgleish, Dispenser, a married couple to do odd work and a cook. Mrs. Bunting continued to act as Matron until Mrs. Harvey succeeded her. At that time the Dispenser resigned and W. R. Cooke was appointed in his place.

Patients admitted to the Hospital from May, 1862 to July, 1863 numbered 214. The amount due for maintenance was £1,108:8:0½d. and the amount received was £97:0:10d.

A report on the water supply for the Hospital was made in 1862, and the drainage was completed at a cost of £145. A gang of relief workers was put on to improve the evil-smelling stream entering the River Avon when the drain was improved at a cost of £60.

1863.

Dr. Stedman was given sole charge in 1863 at a salary of £900 per annum.

1864.

Minor additions were made to out-buildings and £889 was spent on improvements. The erection of two fever wards was advocated and in 1864 the resident doctor's house was completed. £545 was spent on additions, including drainage and doctor's quarters. Alterations to the Dispensary, Board Room, Chapel and operating rooms were made.

The census taken in 1864 showed a population of 32,276 for Canterbury - 18,931 males and 13,345 females.

Messrs In 1864 an election of the Board of Governors took place under the Superintendent of Canterbury, Samuel Bealey. A Board of Management consisted of the Ven. Archdeacon of Akaroa, Rev. H. Jacobs, Justice Gresson, Robert Wilkin, George Gould, C. O. Torlesse, Barker, Bishop, Bowen and F. Thompson.

The management of the Hospital during its early period was not running smoothly, and the Provincial Government in July, 1864, placed the control in the charge of a committee consisting of the Superintendent of Canterbury, the Provincial Secretary, Judge Gresson and Messrs. Sewell and Ollivier, and the Governors of the hospital resigned. In October the Hospital and Charitable Aid Bill was introduced and the Government handed over the management to the public, glad to be rid of an expensive institution. Dr. Burrell Parkerson retired and Dr. H. H. Prins was appointed Resident Surgeon; Dr. Stedman consulting physician. Mrs. Harvey resigned and Mrs. Cooke, wife of the Dispenser was appointed to the position.

Christchurch Hospital. Contd.

1865.

The following report to the Provincial Secretary, Ed. Jolly was from the Resident Surgeon (Session XXIV No. 78):-

"I have the honour to forward the Annual Report for the year ending October 31st, 1865 and take this opportunity of adding a few observations on the cases treated at the Christchurch Hospital:-

"Taking into consideration that the cases admitted into Hospital are of all ages and every variety of diseases, many of which are incurable and brought as a last resort, the success of the Hospital treatment has been very satisfactory, specially in cases of fever and surgical operations. Ninety-four cases of fever have been admitted and only five deaths occurred; a great many of these cases were brought in a very advanced stage of disease. The surgical operations were 33 in number, of which 3 died, one after the amputation of the hip-joint, one after the operation of tracheotomy, the other being a child aged 5 years, after amputation of the thigh for diseased joint. These three were unfavourable cases but were operated on in order to give the unfortunate sufferers the last and only remaining chance of saving their lives. About 40 accident cases were admitted into Hospital; chloroform had been administered to 33 persons (men, women and children) without a single accident or deleterious effect arising during or after the administration. Although the Hospital is not adapted for the admission of lying-in cases, we were obliged to admit 15 cases, chiefly of single women and perfectly destitute persons. There has been one case of instrumental labour, and one of puerperal mania, both fortunately recovered. 212 out-door patients were treated and only one (a delicate child) to my knowledge died. 302 people were vaccinated during the year, the proceeds from this source amounting to £22:15:00. I must remark here that the patients who now seek admission are chiefly charity cases and the receipts from them will hardly amount to those of the preceding year. May I close with respectfully suggesting, if the Government contemplates making any extensions to the present Hospital, that a new building be erected on the Pavilion plan, which is not only favourable to this country, but will be added to as the colony progresses and the population increases."

Dr. H. Prins was given the control of the Hospital at a salary of £650 per annum. Dr. L. Powell became resident surgeon in November, 1866, Dr. W. E. Phillips in November, 1868, resigning in May, 1869, and Dr. Burrell Parkerson, Jnr. took his place at a salary of £200 p.a.

RULES OF THE CHRISTCHURCH HOSPITAL. 1865.

1. The Hospital shall be under the management of the Resident Surgeon, subject to the authority and approval of the Provincial Secretary.
2. The Resident Surgeon shall have charge of both medical and surgical cases. Reference to be made to the consulting physician when considered by the Resident Surgeon to be requisite.
3. The Resident Surgeon shall be responsible to the Provincial Government for the proper management of all stores, and for all monies received and disbursed in connection with the hospital.

Christchurch Hospital, contd.

4. The Resident Surgeon shall have the power of appointing such persons as he may deem fitting to fill subordinate situations as may from time to time become vacant, and also of discharging such as may be unfit. He shall report officially to the Provincial Secretary any such appointment or discharge, stating his reasons for same.
5. The Resident Surgeon shall forward a full monthly report in accordance with the prescribed form, to the Provincial Secretary for inspection and approval.
6. The Resident Surgeon shall give six months notice to the Provincial Secretary of his intention to resign office.
7. The Dispenser shall walk the hospital every morning and evening with the Resident Surgeon; dispense all medicines, take note of the diet and extras ordered, and also keep such books as shall be entrusted to him by the Resident Surgeon.
8. The Dispenser shall receive, weigh and measure all stores forwarded to the hospital, before they are conveyed to the store room.
9. The Dispenser shall assist the Resident Surgeon in keeping order and regularity among patients and servants, and shall report to him any instance of neglect or insubordination which may occur.
10. The Matron shall have charge of the household furniture, linen, etc. and keep an account of the same, and shall serve out the stores daily (Sundays excepted) as ordered by the Resident Surgeon. She shall visit the wards at least twice per day, and see that the different wards, linen etc. are clean and in good order. She shall also assist in keeping order and regularity among servants and patients, and report to the Resident Surgeon instances of neglect or disobedience.
11. The Porter shall act as messenger and general servant, obey the orders of the Resident Surgeon, Dispenser, and Matron; attend at operations and assist the nurses at the different wards when called upon to do so. On visiting days (Tuesday, Thursday and Sunday) from two till four p.m. he shall attend at the principal entrance to the hospital. He shall lock all doors in the evening and open them in the morning, at such hours as shall be prescribed by the Resident Surgeon, and shall on no account unlock the doors except for the admission of urgent cases, or with the permission of the Resident Surgeon. The porter shall when not otherwise employed, attend to the hospital grounds and gardens.
12. The nurses must all be able to read and write. They shall have their respective wards cleaned by 9.30 a.m., shall administer all medicines, diet and wines ordered by the Resident Surgeon, treat the sick with kindness and attention, see that all patients are in bed after the doors are locked; put the lights out on retiring to rest; and report to the Resident Surgeon any irregularity or disobedience among the patients.
13. The Cook shall keep the kitchen and cooking utensils clean and in good order. She shall have the meals ready at stated hours; viz. 8 a.m. breakfast; 12.30 m.d. dinner; and tea at 5 p.m. The Cook shall report to the Resident Surgeon, Dispenser or Matron whenever provisions are not of good quality.

Christchurch Hospital, contd.

14. No subordinate officer or servant shall leave the premises without obtaining permission from the Resident Surgeon.
15. The Dispenser, Matron, Nurses and other servants shall give one month's notice to the resident surgeon of their intention to resign their situations.
16. Patients shall be admitted into the hospital by the Resident Surgeon only.
17. All patients admitted to the hospital shall be accountable for the expense incurred on their behalf. The charge will be made by the Resident Surgeon according to the position and circumstances of the person. In all cases, of alleged poverty, the Resident Surgeon shall determine what remission, if any, shall be made.
18. No patient shall be allowed to go beyond the hospital grounds without permission from the Resident Surgeon on pain of expulsion.
19. Any money or other valuable property in the possession of a patient will at the request of the patient, be taken charge of otherwise no responsibility will be incurred by the Authorities.
20. No spirituous liquors or provisions of any kind, shall be introduced into the hospital, or supplied to any of the patients without the permission of the Resident Surgeon.

N.B. The law will be strictly enforced against any person breaking this bye-law, and any servant of the hospital who is privy to the infringement of this rule will be immediately dismissed.
21. All visitors shall enter their names in a book to be kept for the purpose.
22. Out-patients shall attend twice a week (Tuesday and Friday) from 10 to 11 a.m. with an order from the Provincial Secretary. Such orders will be given only in charitable cases.
23. All patients and servants connected with the hospital shall conduct themselves with sobriety, cleanliness and honesty, both out of and within doors. They shall not use profane language, play at any game of chance, nor smoke or chew tobacco within doors. They shall obey the viva voce instructions of the Resident Surgeon, and if guilty of insubordination shall be subject to immediate dismissal.
24. The Provincial Government will recognise no accounts that are not in accordance with the dietary scales, unless ordered by the Resident Surgeon, such order to be vouched for in writing and annexed to the Bill, when forwarded to the Provincial Secretary's Office.

Christchurch Hospital, Contd.

1866. Extract from Provincial Government papers - Session 27-30, Vol. 1867/68.

CAUSES OF DEATH.

<u>1866.</u>	<u>M.</u>	<u>F.</u>	<u>1867.</u>	<u>M.</u>	<u>F.</u>
Fever	2	2	Heart Disease	4	
Gangrene of Lungs	1		Fever	5	2
Gunshot Wound	1		Phthisis	3	
Enteritis	1		Compression of brain	1	
Phthisis	2	1	Laryngitis	2	
Gangrene of Feet		1	Crushed leg	1	
Chronic laryn- gitis.	1		Gangrene of Abdom- inal tumour.		1
Heart Disease	1		Mesentric Disease		1
Gangrene	1		Cancer of Womb		1
Jaundice	1		Cirrhosis of Liver.	1	
Hip Joint Disease	1		Endocarditis	1	
			Pneumonia	1	
			Pneumonia Hottia	1	

1867. In 1867 additions were made to the Hospital. D. Reese secured this contract at £860. For a period of twelve months in 1866-67 the Hospital had a monthly average of 37 males and 13 females, or 50 patients.

Dr. L. Powell, Resident Surgeon, wrote to the Provincial Government and stressed the need for a bath-room for the Hospital, and suggested that one be erected immediately in the kitchen yards.

The Staff consisted of:

House Surgeon	£250	4 Night Nurses totalling	£40
Visiting Surgeon	£100	Cook	£40
Visiting Physician	£100	Laundry Maid	£10
Dispenser	£150	Housemaid	£25
Matron	£ 50	Porter	£50
4 Nurses totalling	£170	Boy	£18/-

Total Salaries paid - £1,033:5:0d.

Expenditure.

Diets Etc.	£1,000	Crockery etc.	£100
Wine & Spirits	250	Surgical Materials	100
Ale for Nurses	30	Undertaker	120
Fuel	150	Consultation Fees	105
Drugs	150		

Total expenditure - £2,005.

Christchurch Hospital, contd.1869.

By 1st January, 1869, the hospital accommodation was taxed to the limit, and three or four patients had to be removed to the Immigration Barracks. Approval was given for the building of a padded room, and an additional wing was built to accommodate twenty patients. The hospital, with six wards, had accommodation for 67 patients, who were attended to by four day nurses and two night nurses. Patients were expected to pay £1/-/- per week each. The number admitted during the year were 198 males and 83 females - 254 were discharged and 27 died. The cost of each bed was reckoned at £47/-/- per annum. The out-patients numbered 1,071, and the expenditure for the year was £2,702:5:0d. Dr. Burrell Parkerson, Jnr. reported that spirituous liquors at a cost of £300:8:6d. had been consumed during the year.

1870.

Extract from Government papers - Session XXXIV, No. 9, 16th April, 1870, Medical Staff, Christchurch Hospital:-

"Coincidentally with abolition of the Lyttelton Hospital, the introduction of machinery, in the various branches of industry, the extension of the railway, and the increase of population, it has been found necessary from time to time to enlarge considerably the accommodation afforded by the Christchurch Hospital. At present it numbers 67 beds, and there is every prospect of further additions being found necessary."

The medical and surgical staff consisted of one visiting physician, one oculist, one visiting and one resident surgeon. This, in the opinion of the committee, was insufficient. It was recommended that two visiting physicians, two visiting surgeons, an oculist and pathologist and a resident surgeon be appointed. Such an enlargement of the staff would have the further advantage of affording to the profession generally more opportunities for the practical study of medical and surgical science.

1871.

Extract from the Christchurch Hospital Annual Report, November, 1871 - Session XXXVI - No. 35:-

"The working of the hospital during the year was considered satisfactory. The number of accidents had been considerably less, partly owing to the better protection of the flax machinery, as there were more cases from that source than any other. Fever had been very prevalent. Sixty cases were received into the hospital and only four deaths occurred. The out-patient department had much increased, over a thousand cases having been attended during the year - admissions, 214 males, 85 females; deaths, 17 males, 8 females. The first consignment of drugs was received from Home, and proved so satisfactory that an earnest recommendation to the Government for regular supplies was made. The hospital was lighted with gas - a most decided advantage, with forty-two lights. There was much less danger of fire. The interior had been thoroughly whitewashed. The fever wards were the oldest part of the building and it was proposed to apply to the Government for a grant to supplement the legacy of £100 - later increased to £250 from the lat Mr. Maunsell to build a new fever ward."

Dr. B. Parkerson, Jnr. pressed the need for a new fever ward in 1872. Contracts were entered into for two new wards (4 and 5) known as the Maunsell and Rolleston wards. There were twenty-four beds in each, attached with a covered way.



original Hospital - Christchurch
1862.



Christchurch Hospital - 1872.

Christchurch Hospital. contd.1872.

The old Heathcote Road Board office on the corner of Ensors and Ferry Roads was taken into service as a fever hospital during an epidemic when smallpox broke out in July, 1872. B. W. Mountfort, Provincial Architect, furnished plans and specifications for the erection of a temporary hospital. The estimate came to £366.10.0. In October, Dr. Parkerson complained of having as many as forty-seven out-patients in one day in the hospital dispensary, and as few made any attempt to pay for service. He requested that the Charitable Aid Officer should sift out the able-to-pay from those who required free treatment. The accommodation of patients about that time was limited to approximately 60 to 70 patients and remained as such for some time.

1873.

Dr. B. Parkerson, Jnr. - Session XL - No. 2 - 1873:-

"Little change has taken place in the Christchurch Hospital. I had hoped before this to have had two new wards in working order, but I fear some time must elapse before that takes place. At the rate immigrants are arriving, it is absolutely necessary that they should be completed as soon as possible. The present building has on one or two occasions lately been filled to over-crowding. The number of patients treated this year in the hospital shows a large increase on former years, the admittances for the twelve months being 276 males, 115 females, making a total of 391 patients. The out-patients department has also increased the number receiving advice and medicine during the year. The number of patients treated when the new wing is finished may be double the present figure. The newly appointed day nurse is of great benefit to the comfort and well-being of the patients as there are many things to be done. There is one thing to which I beg very strongly to call the attention of the Government, namely the necessity for having a public morgue and jury-room attached. A public hospital is not a proper place for dead bodies brought by the Police, and the present dead-house at the hospital is so small and inconvenient that if the present system is continued it must be rebuilt. Coroner's inquests are now held in our operating room, which is most inconvenient. I should suggest a proper morgue and room be attached to the new Police Department, and the present dead-house with some alterations would be large enough for hospital cases. I would also urge on the Government our great want at present of a good laundry. A great loss of time and labour is the present experience by the distance all clothes have to be carried. I would also advise that the internal fittings should at once be sent from England, that no unnecessary delay may take place from that cause."

In 1873, Mr. and Mrs. Cooke resigned and were succeeded by Mr. and Mrs. Fridgeon in the offices of dispenser and matron. The architects, Harman and Stevens forwarded to the Provincial Government the sum of £222.7.3d. - a legacy from the estate of C. F. Maunsell towards the erection of one of the new wards with a request that it be named the "Maunsell" Ward (Ward IV). The lying-in ward (1874-76) was in charge of Nisno and Lewis at a salary of £50 each per annum.

1875.

In 1875 Dr. Guthrie resigned as House Surgeon and Dr. Robinson was appointed. The question of control of the hospital brought variance.

Christchurch Hospital, contd.

1876.

In July, 1876, Dr. Robinson resigned, Dr. J. S. Hayes of Kaiapoi accepting the position. The question of control still loomed and Dr. Hayes relinquished office on 5th December, 1876, when Dr. Guthrie took over temporarily until March, 1877.

In 1876 the Provincial Government called for tenders and approved the addition of Ward 3, costing £5,350. This Ward was situated near the present Wards 12 and 13 and was removed in 1880.

At the close of the Canterbury Provincial Government regime in December, 1876, the Hospital had 115 beds, and when the new ward was completed, 28 additional beds were provided. Besides the medical and surgical wards there was a special ward for the diseases of women. Six beds in the hospital were kept for ophthalmic cases.

The following was the dietary scale:-

Full Diet. No. 1.

Meat (beef or mutton) $\frac{1}{2}$ lb. cooked free of bone, or 12 oz. with bone, bread 12 oz., potatoes $\frac{1}{2}$ lb. Vegetables supplied on three days per week, bread or rice puddings on alternate days. Other items:- tea $\frac{1}{2}$ oz., sugar 1 oz., butter 10 oz., milk $\frac{1}{2}$ pint, salt, pepper, mustard. Meat is boiled or roasted on alternate days.

Broth Diet. No. 2.

Vegetable broth $1\frac{1}{2}$ pints, if made from mince meat $\frac{1}{2}$ lb., bread 12 oz., tea $\frac{1}{2}$ oz., sugar 1 oz., butter 1 oz., milk 1 pint, porridge or gruel.

Milk Diet. No. 3.

Oatmeal for porridge or gruel 3 oz., if arrowroot $1\frac{1}{2}$ oz., if sago 3 oz., sugar 1 oz., bread $\frac{1}{2}$ lb., butter $\frac{1}{2}$ oz., milk $1\frac{1}{2}$ pints.

Items:-

Mutton chops, fish, milk, eggs, beef tea, when made from 1 lb steak or gravy beef free from fat to 1 pint of water; mutton tea, cocoa, beer, wine, spirits, lemonade, soda water.

Children under ten years of age received half diet.

THE MEDICAL SCHOOL.

1854. The founders of the Canterbury Province did not overlook the necessity for and the importance of providing for the care of the sick, for the treatment of disease and for the training of medical men. As early as 1854, the Canterbury Association presented to the Provincial Government as a hospital site the area now occupied by the Provincial Council Chambers and the old Government buildings. Five years later the inadequacy of this area was realised and the Council provided instead five acres in Hagley Park.

1858. But the Association further contemplated the establishment of a medical school in connection with Christ's College and it was to be attached to the hospital; for in 1858 it instructed its Agent in New Zealand on the initial steps it deemed advisable to take.

1875. During the earlier years of the Hospital's existence the project was more or less forgotten, but in 1875 the Provincial Government placed the sum of £300 on the estimates as a grant towards the establishment of a medical school as an adjunct to the hospital. That this scheme was well supported by the local practitioners is shown by lists drawn up by them of lectures and of lecturers and demonstrators. It may have been the inauguration of the medical course in the University of Otago at the beginning of that year which gave an impetus to further action in Christchurch. An interview was arranged between the Board of Governors of Canterbury College and a committee of the Hospital staff. This committee had reported that, as the College had no intention of introducing instruction in medicine, the Hospital staff wished to have the assistance of the Professor of Chemistry and the Lecturer in Biology to conduct courses suitable for medical students, for it had itself no funds available for such instruction. At a meeting on 6th August, 1875, the committee adopted a resolution referring the proposal for a Medical School to the College committee.

1876. But no other action is disclosed by the minutes of the Board until 29th February, 1876, when a letter was received from Dr. H. H. Prins, Chairman of the Hospital Staff, covering the report of a Commission set up by the Provincial Council to enquire into the matter of establishing a medical school. The Provincial Council on the eve of extinction set aside £300 as a grant for a Medical School.

Stressing the lack of such advantages as those offered by Universities, Technical Schools and similar institutions, the report suggested that a Medical School, besides providing a sound education in medicine would raise the tone and extend the usefulness of the teachers and lecturers, who for the most part would be the leading physicians and surgeons then in practice. In his letter, Dr. Prins indicated the need of land endowments, finance and management, making it clear the transfer to Canterbury College would meet the wishes of the Hospital staff, provided that any grants of land or money made to the proposed school would be allocated to a Medical Faculty in the College.

The School was established by proclamation in the Provincial Government Gazette, 15th September, 1876, but after the scheme had been drawn up in greater detail between the Council of School and the Board, it was found that no ordinance had been passed, the proclamation having been the outcome of consultations between the Superintendent of the Province and the Medical Staff of the Hospital.

The Medical School. contd.

1877.

However, a special committee of the Board of Governors recommended incorporation of the School, and in July, 1877, a resolution was adopted to that effect, and a Council was set up consisting of five members of the Board with five members of the Faculty, Dr. Turnbull being the first Dean; while in the following December a reserve of 5,000 acres was set aside as an endowment for the School.

There still remained the difficulty arising from lack of official recognition of the Faculty by the Hospital. The matter was referred to the Premier in Wellington, Sir George Grey, who assured the staff that he would bring legislation before Parliament to meet the situation and to set aside further reserves to provide the necessary finance. This was never done, for shortly afterwards the Premier was succeeded in office by Sir John Hall, and subsequently the Colonial Secretary informed the Council that the Government had no funds and also that no tenants could be found for the reserve of 5,000 acres.

Thus the attempt to establish a School of Medicine in Christchurch was productive of no result, for the ideal of the Association in connection with Christ's College has never been realised; and though the annual report of the Canterbury College Council shows that it still has a "Medical School Reserves Account," this does not suggest that it cherishes, for the present at least, any hope that a second Medical School will come into being. The income available is used as a contribution to the cost of the tuition of medical students in their intermediate year at the College.

1940



Original wards 1 and 2 - Ward 1 used for Tuberculosis cases.
 Ward 2 later out-Patient Dispensary
 Left hand portion - Porters.



Residents Staff Quarters.

Christchurch Hospital. contd.1876.

Exclusive of several private hospitals maintained by various medical men, there were two hospitals in Canterbury in 1875, one at Christchurch and one at Timaru with a Casualty Ward at Lyttelton. The annual vote of the Council for maintenance of the Christchurch Hospital was approximately £5,000. New and extensive fever wards had been built, containing excellent accommodation and capable of being isolated from the rest of the building. Patients were supposed to pay £1 per week for the first six weeks and 10/- per week afterwards, whilst in the hospital, but the institution was kept as much as possible for those who could not afford to pay for medical advice, and who were admitted gratis. The hospital at Timaru was of a smaller class maintained by the Government at approximately £1,200. There were 28 hospitals in the Colony in 1878 with provision for 768 males and 278 females. Through the year, 3,300 males were admitted and 1,000 females, and during the same period 380 deaths occurred - 305 males and 75 females. The total number of out-patients for the year was 17,000.

Undoubtedly the period 1876 to 1885 was one of confusion in administration. Conferences were held and most efforts defeated regarding the establishment of hospital districts, till in 1885 the Hospital and Charitable Institutions Bill was introduced and became law.

The Superintendent in 1876 requested Drs. Guthrie, Hedwill and Powell to take rotation as Acting House Surgeon until a permanent appointment could be made. The position was advertised in other centres, and it was hoped that a Doctor would be available from Wellington. The average number of patients at Christchurch Hospital was 70 at the cost of £110 per patient per annum.

1877.

On the 4th January, 1877, a new system of local self government entered upon the first stage of its existence. The representatives of the people were in most cases to know as much of the Counties Act as the Act knew about them. There was a haze of discussion in which loans, endowments, great works or small works struggled to reach the light.

Mr. William Rolleston, Chairman of the Selwyn County Council stated that there was one very important point in the Act with regard to the maintenance of Hospitals and Charitable Institutions. There was no doubt that many parts of the Act were defective and in which mistakes had been made by the legislature of the previous session. With regard to funds taken from the Counties, there was apparent conflict in the Act regarding the charge of Hospitals and Charitable Aid for the next six months. (Financial Arrangement Act.) As the law stood, it seemed that the charitable aid question would depend on the land fund.

1878.

Dr. Turnbull, Chairman of the Medical Board, tried to ascertain the status of the Hospital and Charitable Aid Board - the Government had determined whether the members were appointed as individuals or as representatives of Local Bodies.

Christchurch Hospital, contd.

1879.

In 1879 the Hospital and Charitable Aid Board consisted of Henry Thomson, Chairman, the Mayors of Christchurch and Sydenham (and later Lyttelton), W. Montgomery, J. E. Brown, and Dr. Turnbull. Maurice A. Chilton had resigned and Mr. Pridgeon (Dispenser) acted as House Surgeon. J. E. March was Secretary; Mr. Souter, Collector of hospital accounts which were not paid to the Steward on the patients' discharge, but collected on a 15% basis; R. T. Bell, House Steward, L. A. Hawkes, Assistant Dispenser and Librarian. The Board resolved to take into consideration the appointment of a qualified Resident Surgeon at £500 per annum. The total number of patients in hospital was 74.

The receipts for the quarter ending 30th September, 1879, were as follows:-

Christchurch Hospital.	£95.10. 6
Hospital Cottage, Akaroa.	51. 4. 0
Orphanage, Lyttelton.	51.10. 0
Casualty Ward "	1. 1. 0
Charitable Aid Refund	2. 0. 0
	<hr/>
	£201. 5. 6
	<hr/>

A letter was forwarded to the Colonial Secretary showing the number of medical practitioners connected with the Hospital, and for that reason, there was delay in the appointment of a permanent medical officer as requested by the Government. No minutes had been kept by the Hospital Staff of their proceedings.

The Colonial Secretary forwarded for the information of the Hospital and Charitable Aid Board, a copy of the letter from certain members of the Medical Profession. The Board considered it unnecessary to waste any more time in reply to specious statements made by members of the late Hospital Staff, and relied on the Government to sustain the Board in its voluntary and arduous duties.

Instructions were received from Wellington by the Mayor of Christchurch for the Hospital and Charitable Aid Board under the Provincial District of Canterbury to undertake the administration of hospital and charitable aid for Christchurch and environs, a Committee to consist of the Mayors of Christchurch and Sydenham, the Chairman of the Selwyn County Council and Messrs. Montgomery and Brown.

The Government forwarded a copy of the Hospital and Charitable Aid Bill and asked for any recommendation which the Board might suggest.

Mr. and Mrs. Pridgeon, Dispenser and Matron, resigned, and the Board placed on record the valuable services rendered by the former during the long period he held office both in the position of Acting House Surgeon and Dispenser in the hospital. L. A. Hawkes was appointed in his place as Dispenser. Applicants were invited for a House Surgeon at £250 per annum with apartment and attendance and Dr. W. R. Davies was appointed.

The Secretary of the Destitute Patients' Relief Fund, Mr. Bell, asked for two members of the Board to be appointed to co-operate in managing the fund. The Mayor of Christchurch and the Chairman were nominated.



1888-90.



1881

Christchurch Hospital, contd.1880.

Applications were invited for the services of a Matron who had to be a trained hospital nurse. Miss A. M. Emmond was appointed in 1880, and resigned in 1881. Nurses were paid at the rate of £10 per annum for the first six months. The House Surgeon was allowed to permit probationers to act as nurses outside the hospital, upon the Medical Attendant of the person requiring the services agreeing to pay the Hospital Board 30/- per week. It was ordered that in the future all stimulants to patients should cease and only be given as medicine on the order of the House Surgeon. The subject of granting an allowance for nurses and laundry women was referred to the Hospital Committee. It was recommended that day and night nurses and their assistants as well as the dresser and laundry maids be allowed one pint of beer daily, or 4 oz. of brandy in lieu thereof at the discretion of the House Surgeon. In 1880, two night nurses who resided outside the hospital received notice that a resident permanent nurse would be appointed, and so were given notice that their services would not be required further.

CHRISTCHURCH HOSPITAL STAFF, AUGUST, 1880.

House Surgeon	p.a.	£250	Day Nurses (3 females)		
House Steward	"	200		p.a.	£135
Secretary	"	100	Night Nurses	"	45
Dispenser	"	120	Cleaners		
Matron	"	60	(3 females @ £30)	p.a.	90
Dresser	"	100	Cook		80
Gatekeeper	"	30	Kitchen Boy	"	18
Porter	"	52	Housemaid	"	50
Night Nurses			Laundress	"	40
(2 males @ £45 ea.)		90	" asst.	"	35

The Colonial Secretary intimated that a reduction of 10% per annum was to be made from all salaries and wages of persons employed by or under the direction of the Hospital and Charitable Aid Board. (About this time a serious depression raged throughout the Colony.)

1881.

The question of providing accommodation for infectious cases was brought up, and the Hospital Committee conferred with the Hospital Staff as to the accommodation required. It was decided that the limit of residence for the patients in the Hospital be one month, and that a certificate by the attending surgeon or physician be given, such certificate to be renewed from time to time. Several applications for relief which were made to the Hospital Board were referred to the Charitable Aid Committee.

The Government was requested to furnish a return of the amount contributed from each local body towards the cost of the hospital, the Orphanage, the Ashburton Home, and Charitable Aid expenditure, since the formation of the Board.

The Board's attention was drawn to the very low salary (£60) per annum paid to the matron, which was also subject to the 10% reduction. A low salary was possibly named with the intention of increasing it in the event of the duties being efficiently performed. The committee reported that the matron gave entire satisfaction and her salary was increased to £80.

Permission was asked to replace the trees on the ground adjoining the Acclimatisation Society, almost two acres in extent, to form an orchard, which would not only

Christchurch Hospital. contd.

be a source of pleasure, but one of profit to the institution by the sale of surplus products.

The House Surgeon was informed that the Board could not entertain any change in the interior management of the hospital pending the passing of the Hospital and Charitable Aid Bill then before Parliament. Letters were read from the Hon. E. Richardson, Messrs. Stevens, Andrews and Fisher, M.H.R., regarding the establishment of a benevolent institution.

The Colonial Secretary notified the appointment of the Hon. E. C. J. Stevens as an additional member of the Hospital and Charitable Aid Board in consequence of the strong representation made to the Government with regard to increasing the number of members.

The matron of the hospital resigned on the 14th November, 1881, and the House Surgeon, Dr. A. F. J. Nickle, also resigned at that time, Dr. R. M. Robinson being appointed to fill his place. Amended duties of the matron were considered and application was made to the Colonial Secretary for the salary to be raised to £100 per annum. Applications for the office of matron were read, but as not one of the candidates possessed the requisite qualifications, the matter was referred to a special meeting. The Hospital Committee recommended that an attendance book be kept for the staff to sign daily.

The following is a return of all moneys paid to the Public Account since the Board took office:-

<u>Christchurch Hospital.</u>	<u>Akaroa Hospital.</u>	<u>Casualty Ward.</u>			
1879. £675. 2. 11	1879. £35. 14. 8	1879. £63. 13. 3			
1880. 507. 18. 7	1880. 109. 14. 0	1880. 42. 0. 0			
1881. 558. 1. 8	1881. 47. 14. 0	1881. 37. 8. 6			
<u>£1,741. 3. 2</u>	<u>£193. 2. 8</u>	<u>£143. 1. 9</u>			
<u>Canterbury Orphanage.</u>	<u>Ashburton Home.</u>	<u>Charitable Aid.</u>	<u>TOTAL.</u>		
1879. £331. 12. 0.	1880. £10. 12. 0.	1879. £40. 17. 5			
1880. 258. 18. 7.		1880. 12. 14. 0			
1881. 194. 11. 2		1881. 22. 7. 2			
<u>£785. 1. 9</u>	<u>£10. 12. 0.</u>	<u>£75. 18. 7</u>	<u>£2948. 19. 4.</u>		

Mr. H. Thomson expressed his desire to resign from the office of Chairman. He had held the position since the Board was formed, a period of 3½ years. It was the unanimous wish of the Board that he should retain the office.

The Honorary staff impressed upon the Board the absolute necessity of erecting a contagious ward. It was suggested that a conference be sought with the Board of Health on the subject.

An application was made for admission to the Hospital for instruction in nursing. In the opinion of the staff, it was undesirable that any person should be admitted to the Hospital for the purpose of receiving instruction in nursing, there being no trained person to impart the necessary instruction.

Christchurch Hospital, contd.

The expenditure for the three years of the Christchurch Hospital was:-

1879	£5,307. 7. 3
1880	4,693. 9. 2
1881	4,730. 1. 11

1882. In 1882, the resignation of the Dispenser, Mr. Hawkes was received, and Mr. Hobden was elected.

The Hospital had no proper, organised Medical Staff, but a system of electing an Honorary Staff was under consideration in 1883.

1883. In March, 1883, the Christchurch District Local Board of Health brought under notice the desirability, for health purposes, of the erection of a building for the reception of infectious diseases and suggested that with the likely extension of hospital grounds, this would be regarded as a matter of urgency. The Acclimatisation Society was agreeable to the extension being made in the direction of the grounds under its control and to transfer a portion of the same to the Hospital Board. As the Government was in possession of the whole circumstances connected with the matters of the hospital kitchen and drainage, the Board considered that both works should be put into hand immediately. As the Hospital Board had taken no steps to have the drainage nuisance abated, the Drainage Board had no alternative but to prosecute the Board. The Colonial Secretary authorised the immediate purchase of a kitchen range but could not sanction further expenditure until the result of the action taken by the Drainage Board was known.

1884. In April, 1884, the Government was asked that the vote of £1,000 allocated for the Christchurch Hospital should not be allowed to lapse. The Colonial Secretary, Hon. Mr. Dick, was asked to meet the Board to discuss the question of improvements. As the present arrangements had existed for eight years, it seemed to have assumed a permanent character. The Minister had not undertaken anything in the matter of hospitals, and the Board was in the powerless position of a mere recommending body. There was no Act in existence defining their powers. It was resolved that the Board recommend the Government to carry out the drainage of the hospital as advised by the Government officer.

1885. In 1885, an attempt to reduce a somewhat chaotic state of affairs to some semblance of order, and uniformity took shape in the Hospitals Act which provided for the constitution of special hospital districts and boards.

The Hospitals and Charitable Aid Institution Act, 1885, provided that the administration of hospitals should be placed under one Board and of charitable aid under another. The former became the North Canterbury Hospital Board.

Several points in connection with the administration of the Hospital and Charitable Institutions Act, 1885, were emphasised by the Premier. The Boards of united districts were only "for the purposes of the contribution for and distribution of charitable aid" and the Minister thought it probable that the Boards need only meet once or twice a year to arrange for the obtaining and allocation of the funds.

Christchurch Hospital, contd.NORTH CANTERBURY HOSPITAL BOARD.

1885.

In October, 1885, the first election of members took place.

The contributing Counties and Boroughs were:-

Amuri County	Akaroa Borough
Akaroa "	Christchurch "
Ashley "	Kaipoi "
Cheviot "	Lyttelton "
Kaikoura "	Rangiora "
Selwyn "	St. Albans "
	Sydenham "

The members representing the different districts were:-

R. Beetham	C. Louisson
F. Bromley	J. Macfarlane
A. Chalmers	R. Moore
R. Coop	H. H. Halder
J. Forrester	R. Westerra
T. Harrison	W. White
A. Ivory	W. D. Wood
H. P. Lance	H. Toomer
W. Vincent.	

The first meeting of the North Canterbury Hospital Board was held in the City Council Chambers, Tuesday, 5th November, 1885.

There were present:-

W. Vincent	A. Chalmers
R. Beetham	W. White
R. Westerra	J. Forrester
F. Jones	F. Bromley
R. Moore	H. V. Halder
H. W. Toomer.	

Absent:- C. Louisson and A. Ivory.

Mr. Vincent was appointed to preside by the Governor under Section 9 until a chairman was elected. At a further meeting on 17th November, T. Beetham was elected chairman. He suggested that steps should be taken to draw up regulations for the guidance of the institutions under the control of the Board. J. E. March was appointed Secretary and Treasurer pro tem. A Finance and By-law committee was appointed and also a House Committee.

Harper & Company (Solicitors) informed the Board that a legacy of £1,000 less duty was left by the late Edward Constable Maxwell and was now payable to the hospital. The Board recommended a ward for children, to be called the "Maxwell" ward. Mr. Maxwell died at Tunbridge Wells, England, in 1884 and also left £2,000 to such charitable institutions in the Provincial District of Canterbury "in such proportions as the Executors, in their absolute uncontrolled and unfettered discretion, should think fit."

Holmes and Loughrey were appointed Solicitors to the Board, and the Standing Orders were drawn up and printed.

Christchurch Hospital, contd.

The following were appointed the Hospital Staff:-

Doctors Anderson (Hon. Ophthalmic Surgeon),
Frankish and Townend (Hon. Physicians),
Stewart and Guthrie (Surgeons), Bakewell,
Synes and Westerra.
Miss Paton, Matron.
H. J. Hobden, Dispenser.
William Miller was appointed Secretary and
House Steward.

1886.

Allowing £ for £ subsidy from the Government,
£3,400.9.5. was required to be contributed from the
local authorities as follows:-

COUNTIES.

Anari		£124. 2. 7
Akaroa		183. 14. 10
Byreton Road Board	£74. 14. 1	
Byreton W. " "	33. 1. 4	
Ashley " "	54. 13. 9	
Cust " "	29. 1. 5	
Kowhai " "	95. 19. 0	
Amberley Town " "	5. 15. 0	
Waipara Road " "	193. 14. 9	
Oxford " "	81. 19. 0	
Mandeville " "}	103. 9. 11	
Rangiora " "}		672. 8. 3
Cheviot County		75. 7. 8
Kaikoura " "		53. 0. 0
Selwyn " "		1,307. 2. 4
		<u>£2,445. 15. 8</u>

BOROUGHES.

Akaroa	£11. 2. 6
Christchurch	624. 7. 1
Kaiapoi	17. 19. 9
Lyttelton	73. 16. 0
Rangiora	26. 10. 4
St. Albans	97. 3. 9
Sydenham	133. 14. 4
	<u>£984. 13. 9</u>

<u>TOTAL:</u> Contributions from Counties	£2,445. 15. 8
" " " " " " " " " " " "	984. 13. 9
	<u>£3,400. 9. 5</u>

Certain material improvements took place in the management of the Hospital. In 1886, Dr. Westerra was appointed Resident Medical Officer and was responsible for initiating that each nurse was given an annual holiday of fourteen days, and they were also provided with uniforms. The wardmen were given a blue serge jacket embellished with a Maltese cross in red.

Christchurch Hospital, contd.

The Board found it necessary to consider the question of building an operating theatre with a light from the roof. As the heating of the operating theatre was to be effected by means of a system of hot-water pipes, it was considered to be a most opportune time for introducing the same, for heating and ventilating Ward 6 (Men's Surgical), and supplying hot water for baths. The previous method of heating consisted of two unsightly detached fireplaces, which were quite inadequate to perform the purpose for which they were intended.

As the finances would not permit of building a new ward, it was decided to effect alterations to the old portion formerly used as a convalescent ward, so that it would contain two children's wards, one ophthalmic, one observation, and two convalescent wards, together with the necessary offices, giving a total of thirty-six beds. There was the urgent necessity of erecting a new kitchen, and connected with the laundry, a drying closet.

1887.

The Government voted £1,000 towards building a new fever ward, which consisted of two small wards of four and five beds each. The children's and convalescent wards and the corridor connecting the two portions of the hospital were completed and proved to be of great advantage. The success attending the heating of No. 6 ward by means of a hot-water system, prompted the carrying out of a like system for numbers 4 and 5. These three main wards left nothing to be desired, being cheerful and well ventilated. There were 146 beds available in the Hospital.

1888.

A proposition was made to the Board that it should assume the management of the Rhodes Convalescent Home. The representative of the Rhodes family conferred with a sub-committee appointed by the Board and stated that the building and lease-hold might be vested in the Board on condition of its being supported thereby. The Board could not see its way to take over the management. Action was subsequently taken by the petitioners to have the Home incorporated as a separate institution to which the Board, acting in the interests of the ratepayers, objected. An enquiry was held by Commissioners according to the Act, resulting in their decision being given in favour of the Board.

The question of admitting into the hospital for medical treatment, persons suffering from the effects of drink, occupied much attention. Copies of all correspondence relating to this matter, between the Minister of Justice and the Board together with that received from seventeen other Boards, were printed and distributed among the two Houses of Legislature for the purpose of showing that the ordinary hospitals were not the proper places for the treatment of such cases.

1890.

The completion of the original scheme for heating the wards, steam for laundry and drying room, and for kitchen purposes, was carried out, and hot water supplied for all purposes through the circulating system.

In consequence of the inconvenience and limited space afforded for the work attached to the Secretary's duties, the Board decided to make alterations, and a room was converted into an office and board-room in the half-timbered building now used by the Splint Department.

Christchurch Hospital, contd.

The fever ward was furnished and in temporary use. Various improvements were carried out by ventilating wards 1 and 2 and corridors; by connecting all the wards with the House Surgeon's quarters by means of speaking tubes, and erecting chimneys for the out-door patients' department and side rooms of wards.

1891.

The inauguration of new by-laws and the admission of probationers as training nurses came into force in 1891, also the system of lectures to the staff by the House Surgeon and Matron. Examinations were held by the Honorary Staff. The first year's examination in nursing gave very satisfactory results. A grant of £50 was made for the Matron to provide material for nurses' uniforms as a distinctive dress while on duty. The out-door uniforms were provided in 1893. Following the practice in vogue in the principal hospitals in England and Australia, the nurses were distinguished by the terms:- Sisters, Nurses and Probationers, according to their various ranks of service and efficiency. Dr. Macgregor, Inspector of Hospitals alluded to the necessity of the nursing staff being composed of an educated and refined class, especially in the case of those in charge or head nurses.

1892.

Dr. Murray Aynsley pointed out that the pressure on the hospital accommodation was becoming excessive. The average age of the population was increasing, therefore, the diseases of old age were becoming more numerous, year by year. Arrangements in other centres of benevolent asylums and infirmaries existed; in Christchurch there was no such provision. He suggested four ways of remedying the affairs:-

- (1) Building new wards.
- (2) Building a convalescent home.
- (3) Building an infirmary or obtaining the use of Addington Gaol.
- (4) Obtaining the co-operation of various religious bodies, so that members of such could be trained as district nurses, and in this manner poor patients could be nursed in their own homes.

It had been urged that inebriate and senile patients should be sent to the hospital, but there was no accommodation for the extra staff which would be required for such cases.

1894.

The first practical step towards the erection of a Nurses' Home was taken by obtaining subscriptions. A meeting of subscribers, the Honorary Medical Staff, and members of the Board, took place with regard to choosing a site. Of the two sites selected in the hospital grounds, the lower was admirable, but there were legal difficulties to be overcome, therefore, it was decided to utilise the ground near the junction of Lincoln and Riccarton Roads. The Christchurch Domains Board approved of the proposed site subject to the design of the building being submitted. Plans of the building were finally approved, and on the 19th April, the foundation stone was laid with all due ceremony by Mr. R. H. Rhodes. The building, which was completed in 1895, was considered to be the most substantial and commodious Nurses' Home in the Colony.

Groups



Sister Griffiths - Ward IV.



First Nurses' Home.



Interior of Nurses' Home.

1895.

Nurses K. Turner, Collins, Gausman, Thorpe, Wellsman, Beck — Hiatt, Adams.

Christchurch Hospital, contd.HYMAN MARKS WARDS.1894.

An application was made to the Executive Council for a special grant for building a new wing to the hospital. Representatives of the Board proceeded to Wellington, and although they made a strong case, it was unsuccessful. The Government intimated that a Bill would be introduced to enable the Board to levy on local bodies for building purposes. It voted £1,500 towards assisting the Board in its objective.

1895.

Mr. Hyman Marks died in 1895 and left a large portion of his means to the poor and needy of Christchurch. Amongst the bequests was £5,000 for the establishment of a ward at the Public Hospital to be named "Hyman Marks Ward". The Board was then able to take the first steps towards the addition of the new wing to the hospital by obtaining the conditional grant of £1,500 by the Government. The trustees resolved to make a further gift of £500 provided that the Government subsidised the amount. The gift was also given to enable employment to be given to a considerable number of men during the winter months and with a view to removing the deadlock concerning the building of the ward. Messrs. Strouts and Ballentyne were the architects, and a tender was accepted for £7489.

Difficulties were found with the location - trial holes were sunk, and at the bottom of trenches it was found that there existed a wooded swamp, and at several places on the sand knoll unconsolidated ground was found probably caused by roots of forest trees. A supplementary estimate of £575 was furnished for the foundations. The architect asked for a publicity report and the District Engineer was instructed accordingly.

1896.

The foundation stone was laid on the 10th September, 1896, but considerable delay was caused in the work attending the erection of the Hyman Marks Wards. They were formally opened by His Excellency the Governor the Earl of Ranfurly on the 10th November, 1897. The Countess of Ranfurly presented two pictures for decorating the ward, and an order was given on the Art Gallery for more pictures. Mr. Stephen Powell, at the request of the Duke and Duchess of Cornwall and York, handed the Board their autographed portraits in 1901.

1897.1898.

An inspection was made in 1898 by Dr. McGregor, Inspector-General, who, after examining the plaster work, stated that it was impossible to use the wards for hospital work. The defective plaster work was reinstated. Reports on the plaster work were made by Messrs. Collins and Harman, J. C. Maddison and J. Whitelaw (architects) and forwarded to Wellington. The question of the plastering of the wards was settled by Arbitration. They were completed in April, 1900, - the large ward on the ground floor was used as a men's surgical ward, the small ward as an ophthalmic ward; the top ward though labelled "children's ward" was used as a surgical ward for women.

Christchurch HospitalHyman Marks Wards, contd.

Soon after the erection of the Hyman Marks Wards the Board recognized that a balcony on the west side of the upper floor and forming a verandah for the lower floor would be of great benefit to patients. On the receipt of the Dwyer bequest in 1907 the proposal was carried out.

A fire occurred in the roof of the Hyman Marks Wards in January, 1908; all patients were removed without injury. The cost of reinstating the wards was £2673.

1894.

Vast improvements were carried out in the hospital kitchen arrangements, and many minor requirements, bringing the institution up to a good working standard. The eight-hour system of nursing was working satisfactorily, and the benefit was fully realized both by the nurses and the patients.

Reports show that the hospital compared favourably with the other large hospitals with the exception of patients' fees - different conditions existed - Wellington had special private wards, from three to five guineas per week, which were seldom vacant.

1895.

Various religious denominations and Friendly Societies in the North Canterbury district were asked to co-operate in dedicating annually a "Hospital Sunday"; that the offerings of the people be taken up on that day and paid to the Hospital Board to be set apart from the general fund and expended in assisting all necessitous hospital patients and in the payment of all fees and charges incurred while inmates, and all funeral expenses in case of death.

Dr. J. H. Murray-Aynsley again drew the Board's attention to the inadequate accommodation with no provision for meeting any serious epidemic.

Drs. Campbell and Palmer offered to act as Honorary Medical Officers to a Gynaecological Department, but as the offer was not recommended by the Honorary Staff, the Board did not give its consent to the proposal.

1896.

The title of House Steward was disassociated from the position of Secretary and Treasurer, and many staff changes took place about this time. Mr. C. E. Hilson, Honorary Masseur, resigned his position, Nurse Maude resigned from the Matronship (see District Nursing and Sanatorium files), and Miss Eileen Johnston was appointed Matron and Housekeeper (the position of Housekeeper having terminated). Dr. R. A. Fox took Dr. P. C. Fenwick's place as Assistant Medical Officer, and in May Dr. Walter Fox was appointed House Surgeon. Dr. Crosby was his assistant. The by-laws were amended and revised and came into operation.

Church services were discontinued in the wards, and it was decided that all religious services be conducted in the Board room on alternate Sundays.



Four Canterbury Nurses officially appointed -
South African War!

A. Hiatt, G. Littlecott, E. Peter, G. H. Webster.



Matron Ewart

1903.

Nurses Beck, Cruden, Joyce —
— — Nichols Matron Ewart, Rule, Clarke -



outdoor Uniform.
Sister E. Wiggins



Indoor Uniform.
Sister S. Killo.

Christchurch Hospital, contd.1898.

Miss Johnstone resigned and Miss Payne was appointed Matron, resigning in July. Miss Mary Swart took her place and held the position till 1908. Dr. Walter Fox resigned in June, 1899, as House Surgeon, and was appointed to the Honorary Staff. Dr. T. L. Crooke filled the vacancy.

The Board resolved that should the staff deem pasteurised milk necessary for use in hospital, they were empowered to order it. Tenders were called for pasteurised and ordinary milk.

1899.

An additional wing was attached to the boiler house, and £2,147 allocated for the boiler power and electricity. Two more wards for females and one for children were available. The ophthalmic and fever wards were also ready for use.

The Board expressed its thanks to Dr. Hedwill for the trouble taken by him in obtaining the X-ray apparatus and for the interest shown by him in hospital matters. Between £30 and £40 was expended on apparatus for a Bacteriological Laboratory. A part of the dispensary was reserved for the purpose of research work.

1901.

Dr. T. Leslie Crooke, House Surgeon, stated that the Out-patient Department had increased during the past year. He drew the Board's attention to persons suffering from the effects of drink being committed by the Justices of the Peace for hospital treatment. Dr. Crooke explained the difficulty and danger in coping with such cases where only female nurses were available, and suggested that a detached ward with a padded room be provided. The Doctor was authorised in the meantime to appoint a male attendant if necessary. At the same time, the question of the chronic and incurable cases was brought up. There were twenty-six such cases in hospital and six consumptives. The most suitable provision would be by the erection of a special ward. This resolution was forwarded to the Minister, but the matter was held over. (A deputation waited on the Minister in 1905 with the object of endeavouring to induce the Government to establish an institution.)

1902.

A contract was entered into for the laundry building, new machinery and hot water appliances were added. A tender was accepted for the operating theatre on condition that the work was completed within seven months of signing the contract.

1903.

Dr. Crooke reported that the female medical ward was constantly crowded owing to the difficulty in finding homes for the chronic cases. There were homes for old men, but none for women, and it was impossible and unnecessary to keep such cases in hospital. A home for incurables was urgently needed as the cases taxed the hospital accommodation severely.

1904.

Scarlet Fever cases were transferred from Ward 3 to the Bottle Lake Hospital. The ward formerly consisted of four small wards, two were put into use as an extra female ward, giving nine more beds; the other two being reserved for diphtheria and erysipelas cases.

Christchurch Hospital, contd.1905.

A conference regarding chronic cases was held in January, when the Board decided that the formation of an Incurable Ward would be quite inadequate to accommodate all chronic cases, and suggested that the Government should erect central homes for the care of chronic and incurable diseases. The Government passed the sum of £2,000 for wards for special cases at Auckland, Wellington, Christchurch and Dunedin - £500 each.

1906.

A deputation from the Christchurch Odontological Society waited on the Board and offered to provide dental attention free to patients who could show that they were not in a position to pay the fees of an ordinary dentist. Although the Honorary Visiting Staff agreed to a properly equipped dental department, there were no facilities for carrying out the work, so the matter could not be considered.

The Public Trustee notified the Board that the sum of £1,000 was available from the late Henry Stark Drummond for founding and supporting an Inebriates' Home, and until such home was established, the interest accruing to be paid to the Hospital Board.

1907.

Mr. F. A. Hornibrook, who was a skilled Masseur, was appointed in an honorary capacity and continued to act till 1913.

Soon after the erection of the Hyman Marks Ward it was found that a balcony on the west side of the upper floor forming a verandah would be of great service enabling patients to benefit from outdoor surroundings and fresh atmosphere. The Dwyer bequest was devoted for this purpose. In 1908 the Ward was closed for many months owing to a fire which did much damage.

The long felt want of a reservoir to supply water to the hospital was accomplished. Hitherto the system had been a pump direct from the artesian well. With the reservoir 2,500 gallons could be conserved and all anxiety as to a short supply of water was removed.

The Honorary Staff advised the appointment of a Pathologist and Bacteriologist, as any specimens requiring analysis had to be sent to Dunedin. Dr. Louisson had made a study of this particular branch, and was appointed to the Honorary Visiting Staff. The old operating room was adapted for this work.

1908.

In 1907 the Hospital and Charitable Institutions Act, 1885, was amended to enable Boards to raise funds through the contributory authorities for the purchase of land and for the erection of buildings. In 1908 the Charitable Aid Board took advantage of the provision of the Amendment to erect infirmary wards at "Tuarangi", Ashburton, and at the Queen's Jubilee Memorial Home, Woolston. The Hospital Board determined to provide through the Rates, the women's surgical ward at the hospital, thus making a second floor to the children's ward for which money had been subscribed by the residents of Canterbury. With these exceptions, no moneys had been raised through the rates for the purpose of buildings since the 1885 Act was in operation.

1909.

The Ladies' Committee for the children's ward, handed the Board a cheque for £3,070 as a donation towards the building fund. A site was chosen on the westside of the Hyman Marks ward and it was necessary to remove part of the isolation ward (known as Ward 3) to carry out the design of the new building. The foundations had given much trouble because of



Matron Ewart and Dr. Crooke.



Miss Thurston and Dr. F.L. Scott
1909-11

Nurses Kaubie, Molisaux, Bennett Green Taylor -
Sargisson Huergerford MinThurston W.F.L. Scott.
Hickey Bulkley Rose Gould Lebold McKay Stilliard.

Christchurch Hospital, contd.

bad ground which had been encountered thus causing extra cost of upwards of £2,500.

1909.

The annexes at Woolston and Ashburton were not yet opened and difficulties of chronic cases existed. (Ward 3 occupied by women and children was to be used as an isolation ward). There were a number of homeless and incurable consumptives and it was hoped a sanatorium would be opened, or that special accommodation would be provided for such cases.

The Cheviot Doctor's subsidy fund asked for a grant of £50. The Chairman of the Hospital Board moved that a subsidy of £50 per year be granted to each of such persons as the Board may approve who will establish and maintain a Nursing Home or Hospital under the management of a qualified nurse in country districts having a scattered population outside 30 miles from the Christchurch Hospital. George Harper (Solicitor), advised that the Board could not grant a subsidy to Nursing Homes or Hospitals, nor had it any power to grant subsidies towards the maintenance of medical men in country districts.

In 1909 a fresh Act came into force consolidating and amending the 1885 Act. Under the 1909 Amendment, Charitable Aid Boards were abolished and the double function was placed upon the Hospital Board of maintaining hospitals and charitable aid relief.

The authorisation for the hospital system contained in the Act divided the Dominion into 45 Hospital Districts and set up an Hospital and Charitable Aid Board for each. The hospitals carried out the duties according to the policy outlined by the Department of Health.

1909 was the last year during which the North Canterbury Hospital Board had the services of its Secretary, Mr. Miller who had held office for 24 years. The Board placed on record its very high appreciation of his long and faithful services. Mr. T. C. Morris who had been for many years connected with the Ashburton and North Canterbury United Charitable Aid Board, was appointed Secretary and Treasurer to the new Board.

A vote of thanks was passed to the retiring members:- John Ingram (Chairman), Dunlop, Gapes, Morris, Horsley and Storry.

1910.

The final meeting of the Hospital Board was closed on 30th March, 1910 when the Administrative Body was re-constituted the North Canterbury Hospital and Charitable Aid Board.

Christchurch Hospital, contd.NORTH CANTERBURY HOSPITAL AND CHARITABLEAID BOARD.

1910.

When the new Board took office on 1st April, 1910, the Institutions administered were the Christchurch Hospital, Akaroa Hospital, Lyttelton Casualty Ward, Infectious Diseases Hospital, Burwood, Tuarangi Home, Ashburton, the Female Refuge (Essex Street), the Queen's Jubilee Memorial Home (Queen Victoria), the Orphanage, Waltham, Armagh Street Depot, the Samaritan Home (previously managed by Trustees), and the Consumptive Sanatorium, Cashmere.

The administration headquarters, pending suitable office accommodation at the Christchurch Hospital were temporarily centred at the Charitable Aid Office, Armagh Street (now in use as the Tuberculosis Dispensary.)

A special meeting was held to consider a letter from the Inspector-General of Hospitals regarding the constitution of the new Hospital and Charitable Aid Board. For the efficient working of the institutions under its control, twenty members, as suggested, was decided upon.

The statutory first meeting of the North Canterbury Hospital and Charitable Aid Board constituted under the provisions of the Act of 1909, was held at the Charitable Aid Office, Armagh Street, Christchurch, on the 1st April, 1910, at 11 a.m. The members elected were:-

Principal authority for conducting the election: Christchurch City Council	Messrs. C. Allison H. B. Sorenson W. W. Tanner Rev. W. L. Gless Mesdames Cunningham Enson Wilson
Counties of Selwyn, Waimairi and Tawera.	Messrs. T. Boag J. D. Hall J. Henderson D. McMillan W. P. Spencer J. Wolfe.
Waipara County, the Road and Town Boards in Ashley County and the Boroughs of Rangiora and Kaiapoi.	Messrs. G. F. Clothier F. Horrell R. Moore.
Counties of Akaroa, Mt. Herbert and Wairera and the Borough of Akaroa.	Mr. J. M. Murray
County of Amuri	Mr. J. H. Davison
Counties of Cheviot and Kaikoura.	Mr. E. O. Palmer.
Boroughs of Lyttelton, Sumner, Woolston and New Brighton.	Mr. C. Cook.

Mr. F. Horrell was appointed Chairman.

Christchurch Hospital. contd.

A temporary Executive Committee proceeded to consider the formation of a Standing Committee of the Board. Five committees, each composed of seven members of the Board with the Chairman ex officio, were formed, and a quorum of four was decided upon. The committees were:-

- (1) Hospital
- (2) Sanatorium, Bottle Lake, Akaroa Hospital and Lyttelton Casualty Ward.
- (3) Charitable Aid with Armagh Street Depot and Samaritan Home.
- (4) Institutions - Tuarangi, Queen's Jubilee Memorial Home, Female Refuge and Orphanage.
- (5) Finance, Estates and By-Laws.

The number of members on the Hospital Committee totalled eleven with the Chairman ex officio in order that the Chairman of the Honorary Staff might be added. Advantage was taken of the services of the Honorary Staff in an administrative as well as a professional capacity.

In the first year of office the general expenditure was heavy - £17,942 was the capital outlay, and £39,741 for maintenance. The receipts from local authorities amounted to £20,948, from Government subsidy £23,965, and from other sources £8,611. The fees from hospital patients were increased by upwards of £500. The total cost of the new wards amounted to £18,000, a large extra amount was required principally for foundations. It was anticipated that two hundred beds would be available, and should meet requirements for a few years. The number of out-patients totalled 12,695 (1909), many were considered to be "well-to-do".

One of the first problems which confronted the Board was the question as to who was entitled to hospital treatment, and it was a perennial question for many years. A suggestion was then made of "State" hospitals and the nationalisation of the medical profession was forecast.

A comprehensive scheme was advocated for hospital rebuilding including additions to the Nurses' Home. The employment of outside nurses who could not be accommodated was increasingly expensive and with the opening of the new women's ward and contemplated establishment of a ward for consumptive patients the nursing staff would be largely increased. With the new additions accommodation was provided for seventy-four nurses. The Hospital House was fitted up to accommodate twenty nurses pending completion of the extensions. A number of probationers were taken on and most of the hired nurses were dispensed with. There was also a large scheme for the rebuilding of the hospital involving an up-to-date administrative department, and gradually replacing wards 4, 5 and 6 by two-storied pavilions similar to the wards under construction. It seemed a particularly favourable time that rebuilding might well take the form of a memorial to the late King Edward VII. The Board had no funds to carry the proposals into effect.

In July, 1910, Dr. Crooke resigned and Dr. P. S. Foster was appointed House Surgeon till 1911. Owing to ill health, Mrs. Crooke resigned from the building committee of the children's and women's wards. She was largely

Christchurch Hospital, contd.

interested in the establishment of the children's ward, particularly in choosing the tiles depicting wellknown and colourful nursery rhymes.

1911.

Dr. F. L. Scott was appointed Medical Superintendent in June, 1911. (Dr. Pentreath had acted as locum tenens for three months.) With the remuneration offered the Medical Superintendent, the Board included a free house with fuel and lighting provided. Miss M. Thurston had been matron since 1908; she also undertook the duties of matron of the Sanatorium as well as those of the Christchurch Hospital.

Improvements were made to the engine house and plant; the hospital heating system was converted to atmospheric steam heating; and an extension to the Nurses' Home was commenced. Shelters were provided in the hospital grounds for long standing cases; the building of the Isolation Block was slow in progress, it was eventually connected with the main corridor by a brick covered-way. The workshops near the Isolation Block were pulled down and the quarters used by Mrs. Priestly (lupus case) were removed.

A portion of the administration block west of the laundry, and facing Riccarton Road, was proceeded with - the Secretary's office and main office, Board Room and store. The entrance was on the south-east corner through the present Clerk of Works' office and faced east. The general stores of both the Hospital and Charitable Aid Boards were placed in charge of one storekeeper.

The steel water tower was built to a height of approximately sixty feet with a capacity of 4,000 gallons. The formation of a subway under the extension of the main corridor for the removal of soiled dressings, garbage and laundry, also for the conduct of water and steam pipes and electric wires was carried out.

PATHOLOGICAL DEPARTMENT.

Part of the dispensary was reserved for research work in 1899, and approximately £40 was spent on apparatus. The old operating theatre was adapted for research work in 1907. Dr. Louisson, who arrived from England, was appointed to the Honorary Staff as Pathologist and Bacteriologist.

1912.

Dr. Chaptaloup (Dunedin) suggested to the Board that suitable rooms might be selected for a clinical pathologist at Christchurch Hospital, and that it ascertain whether any New Zealanders in England were qualified and available for the position. (Specimens were being sent to Dunedin for analysis.) The Board accepted the doctor's offer to report as to plans and duties.

Dr. A. B. Pearson, who was in England at the time, was communicated with and offered an appointment by the Board. The Department opened in 1912, and a five years engagement was entered into with Dr. Pearson on his arrival in New Zealand. Mr. Ross was appointed assistant in 1913, and Dr. Milligan in 1923, his status being that of Bio-chemist.

A new storey over the administration block of buildings gave double the space for the Laboratory which was transferred to the rooms vacated by the Dental Department. In 1927 the new rooms were devoted chiefly to the Bio-chemical Department.

Christchurch Hospital, contd.DENTAL DEPARTMENT.

Mr. F. M. Turrell was appointed honorary dental surgeon to the hospital in 1894, and Mr. A. L. Myers in 1901.

In 1906 a deputation from the Christchurch Odontological Society offered to provide dental attendance free to those who could show that they were not in a position to pay the fees of an ordinary dentist if the hospital would provide a well equipped dental ward and attendance of a probationer nurse. As there were no facilities for carrying out the work, the proposal was not entertained by the Board. Mr. H. G. Ell, M.H.B., drew attention in 1910 to the very great need for a free dental hospital in Christchurch as in Dunedin and Auckland.

1913.

On 3rd March, 1913, the Dental Department, primarily for the treatment of children, was opened. It consisted of two fully equipped rooms. Mr. J. L. Saunders was appointed Dental Surgeon, and an advisory committee consisted of twenty dental surgeons. (Mr. Saunders was appointed honorary Stomatologist in 1920.) The equipping of the rooms allotted to the Department was carried out under the direction of the Dental Advisory Committee. Two rooms were fitted with complete equipment for one operating chair. At the end of a month it was found necessary to ask the Board to install a second chair which was agreed to as with only one chair the services of the Honorary Staff would be of no avail.

A new scheme was introduced in 1921 - young women were to be trained, but the innovation did not meet with general favour. The Dental Association was opposed to the movement and the employment of women not qualified as dentists. The whole scheme under the Education Department was one of the welfare projects of the Government.

1926 showed a large increase in the number of patients treated. The unemployment which had been so prevalent had its effect financially on the Department. Besides the number of school children attending for treatment, the inmates of children's homes were also given care - St. Saviour's and Waltham Orphanages, St. Anne's and Fresh Air Homes. The training of dental students in mechanical work was undertaken. The Department moved into new quarters on the top floor above the Pathological Laboratory in 1927.

DISPENSARY.1914.

The original dispensary was situated in the old portion of the hospital next to Wards 1 and 2 which were demolished to make room for the old Nurses' Home in 1892. The dispensary was then moved to the half-timbered building adjoining the house surgeons' quarters, Board room, etc. In 1914 provision was made in the administration block for the dispensary as it now stands. The cellar was extended under the out-patient waiting room in 1925. Miss Laursen, who had been in the dispensary for a number of years, was promoted and given charge of the department in 1925.

From 1912 the dispensary has been controlled by women. This did not meet with the ideas of the N.Z. Pharmaceutical Society, and exception was taken in 1921 to women being employed in Hospital Dispensaries.

Christchurch Hospital. contd.

Through Mr. H. G. Ell, M.B.E., a gift was made by an anonymous donor to the Board. On passing the Hospital gates, he was impressed by the fact that many visitors and young women with babies in arms, were waiting in the cold to be admitted. An offer of £100 was made towards the cost of a suitable and presentable waiting room for visitors. This generous gift was gladly accepted by the Board.

1913.

In 1913, the Board had practically the largest Hospital and Charitable Aid district in New Zealand, but Wellington and Auckland had superior accommodation for hospital uses. It was considered that the hospital would have to be rebuilt within the next ten years; the most important matter being the erection of a ward for chronic cases. The Board adopted the site of Ward 4 for chronic cases as it was the only one available and the possibility of obtaining a portion of the Domain appeared to be somewhat remote.

The foundation stone of a new annex at the main entrance to the hospital on the Riccarton Road was laid. The building consisted of Porters' Lodge, the Superintendent's and Matron's offices, Visitors' waiting hall, and the Honorary Medical Staff's room; divided from this by the main hospital corridor was the large hall for out-patients, dispensary, X-Ray room and minor operating theatres and the staff dining room; the upper storey contained the junior surgeons' bedrooms.

The buildings which were used as offices in the half-timbered section were very dilapidated and most unsuitable for administration purposes.

CHOLMONDELEY HOME.1913.

Mr. Heber Cholmondeley offered the Hospital Board eleven acres of land at Governors Bay valued at approximately £2,000 for the purpose of a convalescent home for children, also £1,000 in cash. At his death the home would be endowed with at least £600 per annum; three acres of land would be set aside for the building, the eight remaining acres could be sold if advisable later, and the money held in trust. The institution was to be undenominational and to be regarded as an adjunct to the children's ward, Christchurch Hospital, the beds not required for children from the ward to be filled by children of those in poor circumstances.

The Board expressed its sense of gratitude and appreciation for the generous offer, but it was not disposed to go further with the matter unless Mr. Cholmondeley was prepared to secure to the Board the future income after his demise and made the necessary transfers to give effect to the premises made. Advice was received that his offer must stand or fall at the gift of the grant, the payment of £1,000, and his promise to endow the children's home with an annual income of not less than £500. The Board was unable to avail itself of Mr. Cholmondeley's offer.

Christchurch Hospital, contd.MASSAGE DEPARTMENT.

Recommendation was made by the Medical Superintendent regarding the appointment of a masseuse in 1912 as the honorary masseur was unable to devote enough time for the treatment of all the patients requiring massage. It was also necessary to enable nurses to be instructed in the art of massage. 1913. Miss Albrecht was appointed in 1913, and Miss Peterson in 1915. She obtained leave of absence to undertake work for the military authorities and was unable to resume her duties at hospital as she returned with the reinforcements in June, 1916. Miss Peterson's duties were undertaken by Mr. Sarelius. This, with the work required from him as honorary masseur, proved more than he could undertake. The Misses Burbury and Dixon were appointed to do Miss Peterson's work.

Miss G. M. Hilson, a qualified masseur, operated on three cases of nervous disease in the Christchurch Hospital in 1893, and in recognition of his services, the medical staff appointed him honorary masseur to the hospital. He resigned in 1895. Mr. F. A. Hornbrook was appointed honorary masseur in 1907, and did much valuable work. He resigned in 1913 owing to the amount of time which had to be devoted to massage treatment. The Board then considered that a stipendiary rather than an honorary position should be made. Mr. W. Sarelius was engaged, and resigned in 1917.

The Inspector-General asked the Board to institute a system of training in massage for nurses who had completed their term of training in hospital. On the resignation of Miss Burbury fourth year nurses were stationed in the department and supervised and taught by Miss D. Wilson who held a certificate from the Dunedin University.

The Physio-therapy was under military control when the Orthopaedic Unit was established in 1919, and later it was controlled by Dr. J. L. Will who was transferred from the Defence Department. There were six masseuses, and Sister S. L. Clark was in charge until 1925.

The benefits of the department were made widely known especially for cases of deformities and paralysis in children.

Owing to the number of infantile paralysis cases in hospital, it was found necessary to strengthen the staff of the Massage Department in 1925. Leave of absence was granted to Dr. J. L. Will to enable him to visit Australia for the purpose of investigating a new method of treatment of paralysis.

Miss J. Erwin was appointed sister-in-charge in 1926.

Christchurch Hospital, contd.HOSPITAL LADY VISITORS ASSOCIATION.

The Hospital Lady Visitors Association administered a fund for destitute hospital patients which was the interest derived from a sum of money left by the late Mr. Hyman Marks in the hands of trustees for the benefit of destitute patients in the Christchurch Hospital and to assist them temporarily when they leave. The fund was instituted many years ago for the purpose of bringing brightness into the lives of patients while in hospital and sending those needing a further rest and change of air to the Rhodes Convalescent Home, or otherwise helping in any suitable way to hasten their recovery to health.

CHRONIC WARDS.1913.

The Hospital Lady Visitors Association endeavoured to collect money in 1913 to erect a suitable building for incurable cases; the result being that a sum of £2175 was collected which, with a subsidy of 2½/- in the £, was yet insufficient to meet the cost of erecting and equipping the proposed building. The late Mrs. Townend had promised a donation of £1,000 to the chronic ward fund, but the principal beneficiary under the Will refused and ignored the proffered gift. He repudiated the amount and declined to give anything. This was ventilated at a meeting hoping that the public would rally round the Lady Visitors' Committee and make up the deficit.

CHALMERS WARDS.1915.

In April, 1915, Miss Jean Chalmers of "Holmwood", Ashburton, expressed her willingness to donate to the Board a sum of money up to £8,000 for the purpose of building and equipping, at the Christchurch Hospital, suitable accommodation for chronic cases, as a memorial to her uncles, the late John and Peter Chalmers of Ashburton. The sum offered by Miss Chalmers, with the Government subsidy of 2½/- in the £, being sufficient for the erection and equipment of the proposed building, the Board gladly accepted Miss Chalmers' generous offer, the Hospital Lady Visitors' Association agreeing to apply the money collected to the erection of some other hospital building that might be necessary in the near future. In making the offer, Miss Chalmers expressed a wish "that poor patients from the Ashburton Hospital and Charitable Aid district be given such special privileges as the Board has power to grant, in the way of reduction and remission of the usual charges made to patients".

The foundation stone was laid by Miss Chalmers on the 23rd February, 1916, and the Chalmers Wards were opened in 1917. Miss Chalmers consented to allow the wards or a portion thereof to be used for the accommodation of invalid soldiers on condition that the use of the ward revert to the purpose for which it was originally intended. The position was such that either the soldiers had to be removed from the general wards or many sufferers would have to be denied admission. The Chalmers three-storied building contained three main wards and a number of smaller rooms. Each of the main wards measured 730 x 2½ feet. Commodious verandahs and balconies 10 feet wide were a feature of the Chalmers building. A covered-way connected the wards with the main hospital building.

The transfer of military patients to civilian control took place in 1921. Chalmers Wards were re-opened for the reception of chronic cases.

Christchurch Hospital, contd.1916.

Many staff changes were made owing to doctors and nurses enlisting for war service. When Dr. Scott left for the Front, the Board was fortunate in obtaining the services of Dr. W. Fox who volunteered to forego his leisure and assume the duties of Medical Superintendent.

Dr. Fox was appointed House Surgeon in 1896, Honorary Physician in 1899, and Honorary Surgeon in 1900 in which capacity he served for several years. He was appointed to the Honorary Consulting Staff in 1910. His old post of Medical Superintendent, the offer of which during the Great War he so generously accepted, he held until 1936.

Miss M. Thurston, Lady Superintendent, was offered the position of matron at the New Zealand Military Hospital at Walton-on-Thames, and was granted leave of absence to enable her to accept the temporary position. Miss R. Muir undertook the position of acting Lady Superintendent, and "fulfilled the Board's highest expectations by the manner in which she carried out the many responsibilities of her position."

Difficulties arose in regard to the depletion of medical and nursing services at the hospital, and the Minister assured the Board that the organising of the services of the Dominion was under serious consideration. Though alterations were suggested it was deemed undesirable to make any change as so many people were absent on military duties.

With the outbreak of infantile paralysis in the Dominion in 1916, Miss Florence Beniloga, a trained nurse masseuse, and honorary secretary of the Australian Massage Association, offered to demonstrate methods and treatment of massage. This offer was accepted by the Minister of Health. The Government sent her to all parts of New Zealand, and paid expenses. The methods of Dr. Robert Jones of Liverpool as modified by Dr. Wm. McKensie of Melbourne were expounded. (A young man who was quite unable to help himself and had been in hospital and Tuarangi, was taken to Adelaide by Miss R. Muir for treatment in Nurse Bevilacqua's hospital.)

1917.

Had it not been for the War causing an enormous increase in expenditure, a commencement would have been made with the new and up-to-date building of three floors to replace the three old wards which were built in the early seventies, anticipating that many of the men returning from the War would need hospital treatment. It was also intended to set apart a ward for the treatment of diseases of the ear, eye and throat.

Heating and domestic water services throughout the hospital were carried out, and with a view to eliminating the costly means of obtaining water from the City Council high pressure supply, a shallow well was sunk in addition to the existing one. The coal storage plant was installed and the rooms insulated.

1918.

When the City Council morgue was destroyed by fire it was arranged that the Board should act jointly in the erection of a morgue capable of dealing with public cases and also for hospital purposes. The City Council contributed £1086 being one-third of the total cost of the building and equipment. The building was up-to-date with suitable provision for post-mortem examinations, a room for enquiries, and a small chapel.

Christchurch Hospital, contd.1918.

By the Charitable Institutions Amendment Act, 1910, Hospital Boards throughout the Dominion were made the local authorities for all matters relating to infectious diseases. The Board's Chief Inspector of Health (Mr. A. W. Nichol) stated that the year had been one of unprecedented activity owing to the large number of infectious cases.

Under the new Public Health Bill in 1920 the control of the Public Health inspectors terminated. Six inspectors were transferred from the Hospital Board to the Health Department.

INFLUENZA EPIDEMIC.1918.

1918 was a strenuous year culminating in the disastrous influenza epidemic at the end of the Great War. The world-wide sickness or plague resulted in much loss of life. The number of patients treated in the Christchurch Hospital and its auxiliary institutions totalled 4576 as compared with 4012 in 1917. The deaths recorded were 515, more than half that number were due to the epidemic. Chalmers Ward 3 was furnished at short notice, as were the Trotting Ground pavilions. The Royal Hotel was commandeered and used as an auxiliary hospital, and the streets closed from the Christchurch Hospital to Montreal Street. Warehouses were opened on the Sunday to select bedding etc. to cope with the equipping of the auxiliary hospitals.

To relieve the distress caused by the epidemic a system of pensions was instituted by the Government; final pensions were paid out in 1936.

The hospital statistics showed a large increase in numbers, and the amount of work accomplished in the special departments rose to such a degree that the staffs were hampered in carrying out their duties.

A Visiting Committee was set up in 1918 to give members an opportunity to become acquainted with the work in the various departments and report on details relating to necessary repairs and requirements.

ORTHOPAEDIC UNIT.1918.

The Defence Department applied to the Board in 1918 for accommodation for the Orthopaedic Unit. The Board abandoned the Chalmers block in 1919 and placed it at the disposal of the Defence authorities. Colonel Wylie who was in command of the unit which was formed in England, found that insufficient accommodation in Chalmers had been provided. Another block for one hundred and twenty patients was made ready by the Board. The surgical, medical and massage staff of the unit were the officers of the Chalmers Ward and that part of the hospital controlled by Colonel Wylie after the war.

Temporary accommodation was erected for workshops, baths and electro-therapeutic rooms; between Wards 4 and 5 a gymnasium was provided. The old residency was altered and brought into use, and the Government took over the Department and bore all expenses.

Christchurch Hospital, contd.

On the dissolution of the Orthopaedic Unit, the Board took over the whole of the equipment and carried on with a modified staff. The whole of the female massage staff was retained, also the medical officer engaged under contract by the Health Department, and the plaster worker.

A special arrangement was made to have splints and apparatus made by the Government Splint and Artificial Limb Department.

1919.

With the completion of the orthopaedic block two houses occupied by Miss Baker on Cambridge Terrace were leased to the Board for three years to house the extra number of nurses. Miss Baker was engaged as matron with two assistants. The meals and laundry work of the nurses occupying the houses were provided at the hospital. Part of the old military buildings was used for sleeping and dining room accommodation. Later a portion of the top floor of the administration block was given over to nurses.

The rapid expansion of the laundry work was due to military wards as well as new departments, and congestion occurred. An upper storey was added at a cost of £990. For the purpose of comparing the laundry machines and general handling of goods, the Board's Engineer visited the three largest laundries in Wellington. With the rearrangements adopted and the likely arrival of new machinery the Engineer felt confident that the methods here would compare favourably with those he had seen.

OPHTHALMIC DEPARTMENT.

1920.

As far back as 1870 there was a clinic for the eye, ear, nose and throat, and in 1883 Dr. John Wilkin was Ophthalmic Surgeon. Dr. Manning reorganised the department in 1887. It was separated in 1912 from the ear, nose and throat department when Dr. T. A. MacGibbon was appointed Aural Surgeon.

Owing to a difficulty in obtaining the services on the Honorary Staff of the Hospital of ophthalmic and aural surgeons, the Board had enquiries made in Great Britain, and as an inducement for surgeons to come out and set up practice, it was prepared to guarantee the earnings for the first year or two.

Dr. H. Wales of Auckland accepted the position of Honorary Ophthalmic Surgeon in 1920, and later the Board entered into an agreement for five years under a guarantee of earnings. A vote of thanks was passed to Dr. Manning for the very valuable service rendered to the Hospital since 1887.

RECEPTION of CHILDREN in HOSPITAL.

1921.

There were over thirty children in hospital whose ages ranged from three to twelve years. These were children suffering from the effects of infantile paralysis and were likely to be in hospital for some time. The Board's request to the Education Department for a teacher met with approval and a class was formed in September, 1921. A further arrangement was made in 1925, and necessary furniture and apparatus was supplied by the Education Board. In the meantime voluntary help was given to lead the children in amusements and recreation.

A special room was given for the thirty infantile paralysis cases and others from outside districts in 1937 in the upstairs portion of the temporary annex between the Chalmers block and Ward 4.

Christchurch Hospital, contd.

In view of the small number of children of school age in 1926 the teacher was withdrawn. The matter was again brought before the Education Department in 1937, and two teachers were engaged till 1939. The education of children in hospital was then given over to an employee of the Christchurch Hospital.

X-RAY DEPARTMENT.

The X-Ray Department was conducted by Dr. H. Inglis as Honorary Radiologist, and in spite of many disadvantages much good work was done. The Board supplanted the position of Honorary Radiologist by appointing Mr. T. P. Sewell in 1913 as electrical assistant. During the War he controlled the work of the department. The department was located in a side room off the old operating theatre. Dr. Leathan, an X-Ray specialist, visited the hospitals in the Dominion and reported on the general working of X-Ray departments.

1921.

It was decided to place a medical man in control, and Dr. William Bates, who arrived from England in 1919, was given semi-honorary care. Dr. R. H. Guthrie on his return from England where he had studied the up-to-date methods of Radiology, was given full time office in 1921. Arrangements were made to transfer the department to the building known as the gymnasium.

The medical profession throughout Ashburton, North and South Canterbury, Grey and Westland were circularised stating that the Board was prepared to make X-Ray examinations on behalf of medical practitioners. The Board took steps to extend the scope of the X-Ray Department and made it equal to similar departments of the kind in New Zealand with the latest electrical equipment.

Dr. Guthrie visited America in 1924 to study the latest developments in Radiology. An additional up-to-date X-Ray plant was installed in 1925 and a further modern unit in 1934.

OPERATING THEATRE.

Among the first necessary requirements of the Hospital Board in 1885 was an operating theatre with a light from the roof. A tender was accepted for £620. The theatre was on the main corridor facing north, and was later used as the Bacteriological Laboratory, Demonstration Room and Hospital Lady Visitors' Association's quarters.

1922.

The second operating theatre was built in 1902 and is now used by the Radium Department. An estimate of £5,600 was submitted in 1920 for new theatres and was approved by the Department. The lowest tender amounted to £13490; consequently the whole question was held over for further consideration. The Board proceeded with the plans provided, but the work was carried out by day labour. These theatres are situated between the main corridor and Riccarton Road to the west of the morgue, and when completed in 1922 were the latest of the kind in New Zealand, the lighting being a special feature. A new operating table was purchased in 1937 and alterations were made to the theatre block in 1938 to the extent of £413.

Nurses' Training School.



Nurse Pope

Christchurch Hospital, contd.ARTIFICIAL LIMB & SPLINT DEPARTMENT.1922.

The transfer of the Artificial Limb and Splint Department from the control of the Defence Department to the North Canterbury Hospital Board took place in January as a permanent addition to the hospital. The services of several members of the staff were retained and placed temporarily under the Board's chief Engineer. Later the department was controlled by the Medical Superintendent. The stock and tools were taken over at valuation and suitable accommodation was provided. Without any notice to the Board it was discovered in 1924 that the Defence Department had entered into arrangements for the construction of artificial limbs of metal and that the supply would come from the Government workshops in Wellington. The Board was strongly in favour of the workshops being retained and the employees trained in the new methods. An Australian expert (Mr. Ryan) who was in New Zealand, arranged to give instruction to the Board's staff in the new method. The agreement made between the McKay Artificial Limb Company and the Board terminated in 1926. It referred particularly to repairs and making of artificial limbs for ex-military patients. The Board was prepared to make and fit limbs as required. Mr. G. Challis was appointed officer in charge of the Splint Department and Mr. A. Shipman limb-maker.

PRIVATE PAYING WARDS.1922.

With a view to laying down a definite scheme for the future extension of the hospital, a Policy Committee was set up. The question of providing general hospital accommodation for people who could afford to pay had occupied the minds of members of the Board for some time but was held in abeyance owing to the efforts being made to deal with such cases by religious organisations. Canon Wilford met the Committee to discuss the effect of the proposed new Church Hospital (St. George's) on the Board's policy of building a hospital for private paying patients. He appreciated the Board's consideration, but the matter had gone too far to withdraw any proposals with regard to the Church of England Hospital.

The important question of private wards was revived in 1925 when the British Medical Association made recommendations to the Board, and Dr. Malcolm MacBarnhorn, in his report (1926) stressed the need for the provision of private wards.

NURSES' TRAINING SCHOOL.

In 1885 a trained nurse was appointed to the Christchurch Hospital and an attempt was made to train nurses by the establishment of a Christchurch Hospital Nursing School six years afterwards. Lectures were given by the resident surgeon and matron and the Honorary Staff were empowered to act as examiners. Certificates of proficiency were granted by the Board. The efforts of the Board in the establishment of a training school for nurses were well responded to, and in 1892 there were at least twenty capable of taking the highest position in their profession.

Christchurch HospitalNurses' Training School, contd.1923.

After years of contemplation improvements were made in the nurses' school in 1923 when Miss Muir (Lady Superintendent) and Miss Holynaux (Dietitian) returned after a visit abroad. Miss Christies was appointed tutor sister and vast improvements were effected in the standard of training. An entrance test was initiated, and a schedule of subjects increased. A fully equipped demonstration room was added. This was copied by other base hospitals as was the position of tutor sister. The Christchurch Hospital was regarded as a model institution, particularly with regard to the training of nurses. It was approved approved by the Department of Health as a training school in 1926.

In 1934 the Board instituted a Preliminary Training School in addition to the main school. The lecture hall was given over to the Medical Staff for the library in conjunction with the British Medical Association. New lecture rooms with study and library were built, complete with kitchen for demonstrations and a miniature ward fully equipped. Further extensions were made in 1937.

RADIUM & DEEP-THERAPY DEPARTMENT.

Dr. P. C. Fenwick, who had been treating a number of cases with radium for some years, aroused the Board in 1923 to the possibilities of giving beneficial treatment to cancer and kindred diseases by the use of Deep-Therapy X-Rays and radium at the Christchurch Hospital. Dr. Anderson, who was the expert to the Dunedin Hospital and had studied in Europe for some years, attended a conference in Christchurch in February, 1924, and expressed his opinions in regard to this matter as did members of the medical staff. The Board decided to purchase radium needles from the "Maude Barrett Bequest Trust", also to purchase and install a deep-therapy X-Ray outfit.

1924.

An offer was made to Dr. Fenwick in May to take control of the Department and in accordance with conditions laid down by a donor of £4,000, namely, to proceed to England to study and obtain a certificate from Dr. Lazarus Barlow of the Cancer Department, Middlesex Hospital. Dr. Fenwick, a member of the North Canterbury Hospital Board and Chairman of the Hospital Committee, resigned his seat in order to visit England. This arrangement was made possible by the gift of £4,000 and subsidy thereon. Subsequent advice from the Department was to the effect that the subsidy would be only 10/- instead of £ for £. Consequently a publicity campaign was immediately launched to obtain funds. A lady offered to subscribe £500 provided other subscriptions were forthcoming. Three gifts of £100 each were made and others ranged from £50 down - £5,509 was soon subscribed.

Dr. Fenwick returned to New Zealand in 1924 when the Department was established, and considerable demands were made upon his services. Mr. C. Hines, who was with Prof. Lazarus Barlow for eight years, resigned to come out to the department as assistant to Dr. Fenwick.

A new Deep-Therapy and X-Ray plant was installed and building extensions were made in 1937.

Christchurch Hospital, contd.VENEREAL DISEASES DEPARTMENT.

A branch of the Out-Patients Department was established in 1914 to deal with venereal diseases and it was placed under Dr. F. L. Scott's supervision. The Department of Health was in accord with the steps taken and congratulated the Board on its decision.

The Social Hygiene Society opened a bureau in a central position in Christchurch for the spreading of information amongst women. In 1916 the Board was appealed to for the necessary funds to carry out the work. A grant was made from year to year till 1928 when the rooms were closed. A men's branch of the Society was opened in 1920 in Victoria Chambers and was also supported by an annual grant from the Board.

1924.

In 1924 the Department of Health having ceased to be liable for the cost of the clinic, formally handed it over to the Board, together with all equipment and supplies free of cost. The Board retained the services of Dr. A. C. Thomson (in charge from 1920) and Mr. C. H. Read, also the Health Patrol Mrs. Stringer (who later was replaced by a graduate nurse.)

"BORDER-LINE" CASES.1924.

The recommendations of the Hospital Board with regard to dealing with mental degenerates received general support from the Hospital Boards in New Zealand, and the matter was placed before the Government with a view to some action being taken.

In February, 1925, a clinic was opened for the treatment of epileptics and mental degenerates known as "border-line cases" at the Christchurch Hospital. Owing to the congestion of hospital space through a large number of infantile paralysis cases, it was impossible to admit these cases as in-patients. The Government approved a grant of \$500 to each of the main hospitals to enable them to make provision for mental patients awaiting medical examinations. Arrangements were made for the superintendent of the Sunnyside Mental Hospital to attend weekly at the clinic.

NOISY PATIENTS.

For some years special accommodation was required for noisy patients. The question was dealt with in 1921 by a conference with the Mental Hospital authorities, the Magistrate and Medical Superintendent of the Christchurch Hospital. A building was erected for inebriates and noisy patients between the children's ward and the Isolation block; the lighting and ventilation being arranged from the roof.

ELECTRO-CARDIOGRAPH DEPARTMENT.1924.

The Electro-Cardiograph Department was established under Dr. James Whitten of the Honorary Staff. Dr. Malcolm Gray took over in 1930, and an assistant in the direction of taking photographs and developing was engaged. The department closed in 1931, firstly as there was no expert technician available, and secondly as an economy measure. It was reopened the same year when Mr. Harris was re-engaged.

Christchurch Hospital. contd.DIETITIAN.

The matter of appointing a dietitian was fully discussed with Miss Muir, Lady Superintendent, after her visit with Miss Molyneux to America and Great Britain in 1923. In 1925 Miss Molyneux was appointed second Assistant Matron in charge of the dietary and domestic arrangements. Miss E. M. Reid, an Associate of the Otago University in Home Science, was appointed dietitian in 1926. (She resigned in 1928 to accept a position with the Wellington Board.) It was decided not to appoint another dietitian but Miss Molyneux was given control of the main Hospital Kitchen, the Nurses' Home Kitchen and the special Diet Kitchen, with Miss Randall as assistant. These two officers were given control of all the kitchen and domestic staffs of the Hospital.

1925.

CAFETERIA.

In 1925 the Board agreed to provide facilities for serving morning and afternoon tea to the members of the nursing staff, and a room for that purpose was opened at the Hospital. When later it needed renovation its usefulness was extended for the benefit also of the Board's staff and relatives of patients who were often compelled to wait for long periods at the Hospital. The rooms then took the form of a Cafeteria and was opened in December, 1929.

1926.

A new storey was added to the administration block and Ward XI was built. Mr. Arthur Sims gave a generous donation to be dedicated to the furnishing of new hospital accommodation in memory of his late mother. A portion of this gift, with subsidy thereon, was devoted to the new women's ward. Improvements were carried out in the Hospital Kitchen and the special Diet Kitchen. The means of controlling the diets of patients were a source of admiration to all visitors.

A distinguished American Hospital expert, Dr. Malcolm T. MacBarnhorn, in his report to the Government on the hospitals of the Dominion, reviewed the splendid services rendered to the community. Christchurch Hospital, he considered, was the best equipped he had seen in Australasia.

The New Zealand University proposed that the hospitals for the four chief centres be recognized as Medical School Hospitals, each to take a proportion of students in their last year of training. The proposal was accepted but as there was no accommodation on the Board's premises to house the students it was necessary for them to find their own board and residence outside the hospital. The Christchurch Hospital had undertaken the teaching of medical students for some years previously but it officially became a Medical School in 1926. The organisation and supervision was placed under the Honorary Medical Staff and the Medical Superintendent.

Christchurch Hospital. contd.1927.

During 1927 the work of the Board steadily increased. Five maternity hospitals were opened completing a chain of twelve cottage or maternity hospitals throughout the Board's district. It was generally admitted that the country maternity hospitals were not kept full with the special class of cases for which they were erected. Arrangements were made for admission of medical cases from Christchurch as long as no maternity patients were excluded. The Christchurch Hospital dealt with a greater number of patients than at any time previously.

A movement was set on foot to combine various groups or Boards for the purchasing of hospital supplies in bulk and in the best markets. An exhibition was held in conjunction with the Hospital Boards' Association Conference in March, 1927. The management was in the hands of the North Canterbury Hospital Board and the exhibits - British, Canadian, Australian and New Zealand - were arranged in the Art Gallery, Christchurch. The exhibition was a great success showing a net profit of £100.

1928.

Although there was a large amount of unemployment in Christchurch and general slackness in business the number of patients in hospital was less than usual. Much of the Board's time was given to matters concerning the Infectious Diseases Hospital, Tuberculosis Institutions (including the Military Sanatorium), and the proposed Nurses' Home for Christchurch Hospital.

Squadron-Leader Kingsford-Smith, when making his Tasman flight in the "Southern Cross", conveyed four flags for the main New Zealand Hospitals, the object being to raffie the flags, one half of the proceeds to be devoted to the hospitals concerned and the other half to the Sydney Hospital. The flag for the North Canterbury Hospital Board was won by the Tai Tapu Dairy Company and presented back to the Board as a memento.

1929.

It was claimed that the city took a greater toll of hospital service than the country districts which extend from the Rakaiia River to the Clarence. The North Canterbury district had been most active in providing country hospitals, but the staffs to be maintained and the equipment hardly warranted the upkeep of expenditure. The time had come when economies had to be faced. With the easy means of transport many patients preferred to seek admission in the base hospital.

1930.

A number of contributing local authorities requested the Board to keep the expenditure down to a minimum, and the financial depression forced the Hospital Boards to cut down the estimates as finely as possible. At the same time heavy demands were made upon the Board's funds owing to the state of unemployment that existed.



Miss R. Muir and Dr. W. Fox
1932-35.

a. K. Buckland E. Johnston - McAuley M. Tarpey P. Spink M. Tarpey
M. Milliken N. Wright B. Gillis E. Parkerson M. Skillin -
Farmer H. Prann Dr. Fox Miss Muir - Jellies M. Pearson.

Christchurch Hospital, contd.1931.

An Economy Committee was set up to consider the savings that might be made to keep the expenditure within a curtailed income. The savings at the Christchurch Hospital and subsidiary departments were approximately \$13387; this included reduction of staffs and the reductions of salaries and wages, the closing down of the Cardiograph Department, and in other departments as vacancies occurred they were not filled. In some of the special departments the costs were drastically cut down to meet the demands of the Government. Reports show that the economies brought into effect were kept within the estimates. The falling off of patients' fees was very marked. (Salaries and wages were restored in 1936.)

1932.

The estimates for the year were again reduced but the reduction of salaries and wages was evaded by economies practised in all hospitals and keeping down expenses throughout the entire service. Material economies were effected in the Hospital laundry. All employees were given notice to terminate their engagements but were eligible to reapply for positions under a different arrangement. The reorganising meant a saving of several hundred pounds to the Board.

1933.

The Hagley flats suite of rooms was taken over for the cooking school, demonstration room and nurses' lecture rooms. The nurses' lecture room near the Board room was brought into use as a medical library not only for the hospital staff but for the general medical services of Canterbury. The "Harley" Medical Club handed over its entire stock of books and magazines to the Medical Library. In 1913 Dr. W. Fox presented his valuable and useful books to the Library.

For several years the Board passed through difficult financial times but at all costs it maintained the hospital at the same degree of efficiency as in previous years. The medical, nursing, porters and engineers' staffs all worked in three shifts.

1934.

A campaign of eliminating waste at the Christchurch Hospital was initiated by Miss Muir (Lady Superintendent) and Miss Helyneux who was in charge of the Dietary Department. The result from the wards (438 beds) showed a drop from 200 lbs. per week to 100 oz. in food waste, or per patient 1.17 oz. to .04 oz. This indicated a saving so far as patients were concerned. The same effort took place in connection with the staff which numbered ten house surgeons, over two hundred nurses, domestic workers and others. The provision accounts for the year showed a saving of \$5,905 on foodstuffs alone.

1935.

The hospital needs of the community had grown beyond the limitations of the present site and it was proposed that a boarding-out system of chronic cases might be introduced; this was rejected but convalescent patients were sent to some of the country hospitals. The average number of patients was in excess of any previous year. The average daily number of patients during July was 382.4.

Christchurch Hospital, contd.

The question of establishing a bakery and a water plant in connection with the Board's institutions was debated in 1915. It was concluded that the time was inopportune to establish a bakery. A site and design were approved in February, 1936, and a license to operate was issued in April, 1937.

1937.

For the year 1934-35 67979 four-pound loaves were issued to the Board's institutions and recipients of relief at a cost of £1844;

for the year 1937-38 50283 loaves were supplied at a cost of £1676.

The total cost of the establishment of the bakery was higher than estimated. This was brought about by the increased cost of wages and material.

A proposal in 1937 was to erect a subsidiary hospital capable of extensions and within a reasonably easy reach of the city. The object was to remove the long standing cases from the Christchurch Hospital, leaving the base hospital for more acute cases. With the completion of such a hospital and accommodation for fifty to one hundred persons it was again hoped that the original wards IV, V and VI would be replaced by a modern three-storeyed building.

From the trustees of the Chalmers Bequest a further sum of money was received, and the trustees expressed their willingness to support the Board's proposal to call the subsidiary hospital the "Chalmers Hospital" and allow the Board to use what was known as the Chalmers block for such chronic and incurable cases as required expert nursing and medical attention.

Twenty-six offers of land as a site were inspected. The site chosen and bought by the Board was part of the Cashmere Estate situated between Hackthorne Road and the Cashmere plantation.

As it was impossible for the proposed subsidiary hospital to be completed for several years and extra accommodation primarily caused through war conditions was required, alternative measures were considered and extensive reorganisation took place. To make provision for 100 beds for soldiers returning from overseas two modern wards were erected at the Burwood Hospital.

NURSES' MEMORIAL CHAPEL.

84

1915.

In December, 1915, Lieut. Col. P. C. Fenwick, Assistant Director of Medical Services, Australian and New Zealand Training Depot, Zeitoun, wrote to the Board asking if it had done anything to commemorate the bravery of the New Zealand nurses who were drowned on the transport "Marquette" which was submarined in the Gulf of Salonika on the 23rd October, 1915.

Miss Thurston, Lady Superintendent of the Christchurch Hospital, before leaving New Zealand and taking up the position of Matron of the Walton-on-Thames Hospital, asked the Board to keep in mind the building of a chapel if not before at least at the end of the Great War. For religious services both for nurses and patients, a chapel would fill a long felt want.

It had been the hope of Nurse Maude and many nurses particularly Miss Thurston who trained the three brave nurses, that a memorial chapel be erected in the grounds of the hospital. Nurses Nora Hildyard, Lorna Rattray and Margaret Rogers lost their lives while serving their country in the Great War.

1917.

At a memorial service held in St. Michael's Church in July to commemorate the disaster, the offertory was appropriated to form a nucleus for a building fund for a Nurses' Memorial Chapel. In September the members met in consultation with the Chaplain of the Hospital, a representative of the Ministers' Association and the Lady Superintendent of Nurses (Miss Muir). The site chosen was on the Riccarton Road frontage south of the covered way leading from the children's ward to the Isolation Block to enable cripples and persons in wheeled chairs to enter.

1925.

A Nurses' Memorial Chapel Committee (all denominations) was formed in August with Dr. Fox as Chairman, Messrs. H. D. Andrews, Hon. Treasurer, J. W. Baty, Hon. Secretary, and W. E. Leadley, Organiser. The chapel committee collected money sufficient to build and equip a chapel free of encumbrances, the board's contribution being the cost of the foundations and basement. The Executive of the Nurses' Memorial Chapel Fund handed over a credit balance to the Hospital Lady Visitors Association to be used solely for chapel purposes.

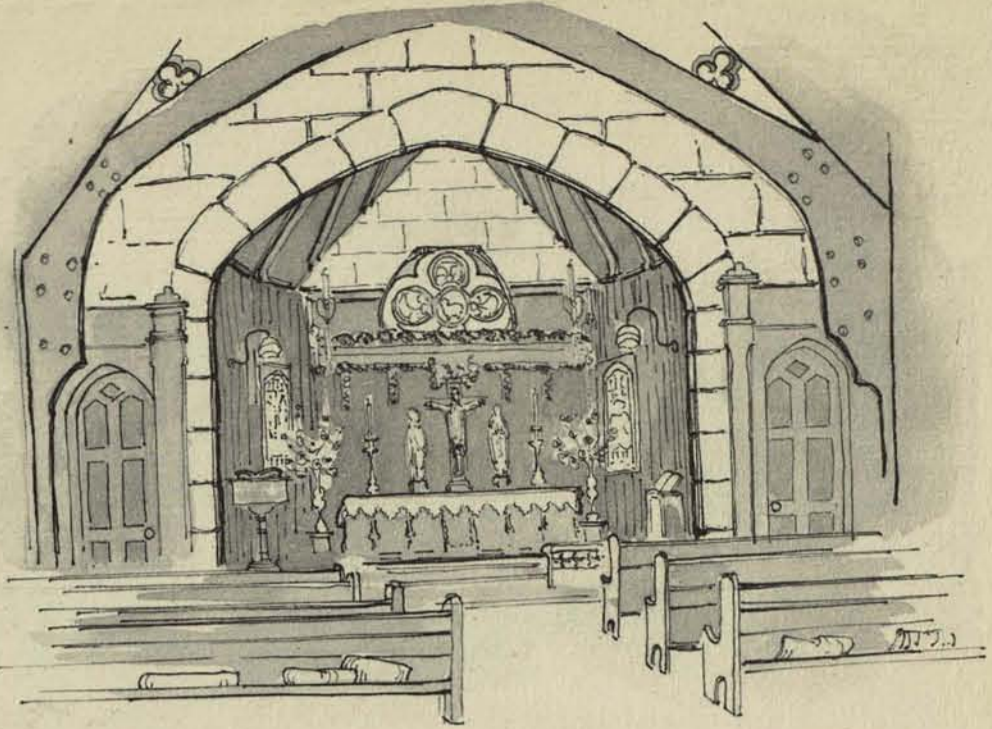
The foundation stone of the Chapel was laid by the Duke of York on 15th March, 1927.

The plans were furnished free of cost by Mr. Collins, the Architect, and the chapel was duly handed to the Board. The first service was held on Christmas Day, 1927.

Apart from being the first chapel in a public hospital in New Zealand, Christchurch had the privilege of establishing an important precedent. The Board in accepting the gift expressed appreciation of the work which had been done by the Committee and others enabling the chapel to be brought into being. It was given a wide scope and embraces the names of nurses and others whose lives and deeds should be remembered for all generations.

1928.

A silver casket containing an historical record is embedded in the wall of the chapel and was graciously presented to the Board by Dr. W. Fox on his retirement in 1936.



The Chapel Christchurch Hospital



Nurses' Memorial Chapel.

The Chapel was built in memory of the Nurses
 who perished in the Hospital Ship "Marquette"
 during World War I. The first Service was held
 on Christmas Day 1927.

NURSES' HOME - CHRISTCHURCH HOSPITAL.1892.

The North Canterbury Hospital Board (W. D. Wood, Chairman) made a vigorous effort to remove the very serious cause for complaint by the Inspector-General, the Honorary Medical Staff, and indeed of the public generally, in regard to the absence of all provision for the accommodation of nurses.

The nurses' bedrooms were to be found spread over the range of hospital buildings, and in most cases were destitute of ventilation. The common dining hall was a standing disgrace to the city.

The Christchurch Hospital provided for an extensive district; it was also charged with the care of all cases which fell by the way while travelling from the out-lying districts. The demands were constantly increasing, and could not be satisfactorily responded to unless immediate provision was made for the comfort and housing of nurses.

Local authorities recognised the great want for a nurses' home, but could not allow any contribution to be made from funds even if they could legally do so. The Selwyn County made a grant of £200 conditionally on a sum of not less than £1000 being raised by voluntary contributions, and that the amount so raised, together with the Government subsidy, be expended on the accommodation for the nursing staff.

The land was vested in the Hospital Board by Section 3 of the Christchurch Hospital Act, 1887, which states that the said land was vested in trust for the purpose of a kitchen garden and of pleasure gardens and recreation grounds respectively for the use of the inmates of the hospital, and for no other purposes; so the Board could not at any time erect or permit to be erected, any buildings or constructions of any kind thereon, except such as may be approved by the Domain Board having the control of the lands in Hagley Park.

1893.

The Inspector of Lunatic Asylums and Hospitals under the direction of the Hon. W. P. Reeves introduced the Bill required to vest the proposed site, and a special Act was passed to build. Mr. W. D. Wood, as a protest against the removal of the site from the Lincoln Road frontage to the low ground adjoining the river, requested that his name and that of Messrs. Wood, Shand & Co. be removed from the list of subscribers (each gave £50). In the early days the site was subject to floods and so unsuitable was it considered for building purposes that a clause was inserted in the Dedication Deed forbidding the erection of buildings on it - its unhealthy position, the want of drainage, the highest point on the mound being one foot below the city main drain, the expensive foundations required and the distance of the water supply rendered it very unsuitable compared with the site on Lincoln Road.

The Honorary Medical Staff considered the garden site much the more desirable of the two from every medical and hygienic point of view. The Lincoln Road site was considered noisy and dusty on the one side whilst overlooking the back entrances to the wards and morgue.

The Government granted £500 towards the erection of a Home, the money to be paid as soon as the Government was satisfied that the Board had received the £1,000 voluntary contribution promised. Upon the Board's request for the £500 it was informed by the Director-General that as this was promised expressly to aid in

1894.

Nurses' Home, contd.

placing the home on what was then considered both by the Board and himself a more suitable though a more expensive site, and since the less expensive site had been chosen, all question about the grant was at an end. The Selwyn County varied the condition on which it agreed to contribute £200, that not less than £800 be raised by voluntary subscriptions instead of £1,000.

1895.

The contractor (W. H. Bowen) commenced the excavations for foundations. The ground in many places was found to be very treacherous. In 1895 Mr. J. C. Maddison, architect, notified that the building was completed. It was built of brick with slate roof - two floors containing Matron's sitting room and bedroom, twenty-two nurses' single bedrooms (10 x 12 x 12), three double bedrooms, two dormitories, four beds in each. Total accommodation for thirty-six nurses and matron with necessary offices in both floors; The dining-room on the ground floor and sitting-room on the upper. The building was approximately twenty-five yards from the main building and cost £5,000. Owing to the bad state of the ground the cost of foundations over and above the contract greatly increased the cost.

1910.

A new wing of two storeys was added to the Nurses' Home in 1910. The ground floor consisted of 17 bedrooms and matron's suite; first floor: 19 beds and sub-matron's rooms; 19 more beds were in the roof making a total of 55 exclusive of the matron's quarters.

1919.

To overcome the difficulty of housing nurses in 1919, 35 Cambridge Terrace was leased for three years from Miss Baker who acted as matron with two assistants.

NEW NURSES' HOME.

1926.

The nurses' old Home had been enlarged to its fullest capacity, and the nurses and domestic staffs were - accommodated in the temporary buildings built by the Government during the War (1918). Accommodation was urgently needed to enable one day's holiday a week to nurses.

The Board approached Parliament in August, 1926, for authority to acquire an area of ground from the Domains Board to be used as a site for the Nurses' Home. It had been suggested that the Medical Superintendent's house, a valuable one, should be removed, but the proposal was not entertained. Prior to this, Parliament, with a view to overcoming the difficulty, had granted permission for a new building to be built on ground which had been specifically set aside as a kitchen garden. There being no other suitable place on the Hospital grounds where a new Nurses' Home could be placed, the Board was compelled to seek a suitable site, if possible, adjoining the Domains Board. The Acclimatisation Society had adjoining property fronting the Riccarton Road comprising 11 acres 28 perches of which the Domains Board proposed to grant the nurses' Home an area of 1 acre 2 roods 3½ perches. In return for that the Hospital Board agreed to surrender to the Domains Board the 3 roods 5¾/5 perches (part of the kitchen garden) and to pay the Acclimatisation Society £2,000 as the replacement value of the assets on its land to enable the Society to establish its work elsewhere.

Nurses' Home, contd.1928.

A Bill was promoted and before Parliament giving the power required to obtain the land and with the assistance of most of the local members was passed but it took two sessions to get it through. The Christchurch Hospital Amendment Bill dealing with the Nurses' Home site was passed in October, 1928. Plans were immediately prepared and tenders called. The Home was built in ferro-concrete with reception and dining rooms, kitchens and all offices requisite for a modern Home. The structure is steel-framed and of strength to carry additional storeys when required. Three additional storeys were added in 1941 with the most modern facilities provided. The Nurses' Home consists of six storeys - the total cost being approximately £135,000.

1941.



New Nurses' Home - Interior



99



Main Entrance
to hospital and
administration
offices.

Maids' Quarters and Nurses' Home.

CHAIRMEN AND MEMBERS
NORTH CANTERBURY HOSPITAL BOARD.

<u>Names.</u>	<u>Chairmen.</u>	<u>Members.</u>
Beetham, R.	1885 to 1888	1885 to 1886
Branley, F.		1885 to 1886 (Resigned)
Chalmers, A.		" " "
Forrester, J.		" " "
" "		1894 to 1895,
Ivory, A.	1889 to 1890	1905 to 1904
Jones, F.		1885 to 1886
Lance, H.		" " "
Louison, G.		" " "
McFarlane, J.		" " "
Monro, R. Hon.		" " "
" "		1910 " 1925
Nalder, H.N.		1885 to 1886
Toomer, H.W.		" " "
Vincent, W.		" " "
Westonra, R.	April to December, 1888.	1885 to 1888
" "	August to December, 1890.	1886 to 1888 (Resigned)
White, W.	1886 to 1889	1885 to 1889
Wood, W.D.	1890 to 1892	1885 to 1886
" "		1887 to 1888
McMillan, D.		1888 to 1891
Dunlop, W.	1902 to 1903	1886 to 1888
" "		1885 to 1910
Hooking, W.H.		1886 to 1887
Prulhoe, H.		1886 to 1888
Boys, J.C.		1886 to 1889
Parish, R.H.		1886 to 1885
Hoor, W.	1893 to 1895	1884 to 1885
" "		1886 to 1887
Martindale, R.		1886 to 1888 (Died)
Tait, J.		1887 to 1888
Crooks, H.		1888 to 1888
Blackett, H?		1888 to 1888
Gray, C.H.	1888 to 1889	1888 to 1891
" "		1888 to 1889
Langdown, W.		1891 to 1893
York, T.		1892 to 1894
" "		1900 to 1902
Rennie, J.		1891 to 1894
" "		1900 to 1902
Wood, R.H.	1892 to 1893	1891 to 1893
Allwright, H.		1891 to 1892 (Died)
Outler, T.		1891 to 1893
Hamilton, John		1891 to 1904
Boag, W.		1891 to 1894
Feryman, H.W.		1892 to 1897
Thoms, R.D.		1892 to 1893
Milcock, E.		1892 to 1895
Widdowson, H.Y.		1892 to 1894
Murray, I.G.		1894 to 1901
Wiffen, A.		1894 to 1895
Thomas, R.D.	1895 to 1898	1895 to 1898 (Resigned)
Wallace, G.		1895 to 1903 (Died)
Stewart F. Mc. Bean		1895 to 1897
Caygill, I.A.		1895 to 1897
Webb, G.R.		1895 to 1896
Hunt, F.E.		1895 to 1897
Dobson, J.		1896 to 1903
Payling, G.	1902 to 1909	1893 to 1903 (Died)
Money, G.F.		1897 to 1898
Wolfe, J.		1897 to 1900
" "		1901 to 1903
" "		1907 to 1910

<u>Names.</u>	<u>Chairman.</u>	<u>Members.</u>
Marshall, A.		1897 to 1898
Hedfield, JY		1897 to 1898
Acton-Adams, W.	1898 to 1901	1897 to 1902 (Resigned)
Mc.Haffie, G.H.		1898 to 1904
White, H.		1898 to 1899
Jacques, W.	1901 to 1902	1898 to 1899
" "		1900 to 1903
Felwick, E.		1898 to 1900
" "		1902 to 1903
" "		1903 to 1907 (Resigned)
Douglas, J.H.	May to December, 1899	1898 to 1900
Loughman, H.H.		1899 to 1905
Taylor, R.M.		1899 to 1900
Dunlop, W.	1902 to 1903	1900 to 1910
Murray, J.C.		1900 to 1901
Davy, F.H.		1900 to 1903
Bellitt, W.		1900 to 1902
Rutherford, A.W.		1900 to 1902
Endcliffe, W.		1901 to 1902
Mc.Millan, W.		1902 to 1903 (Resigned)
" "		1912 to 1914
" "		1915 to 1919 (Resigned)
McC.Farlans, D.D.		1902 to 1906
Winney, C.H.		1902 to 1904
Harrell, F.	1910 to 1920	1902 to 1922
Scott, George		1904 to 1908
" "		1913 to 1915 (Resigned)
Hedfield, J.		1904 to 1907 (Resigned)
Sorensen, H.B.	1921 to 1923	1904 to 1905
		1910 to 1923 (Died)
Capes, T.		1905 to 1908
Allison, C.		1905 to 1912
Horrell, H.J.		1906 to 1908 (Resigned)
Davison, J.H.		1906 to 1913
Morris, C.D.		1907 to 1910
Ingens, John	1909 to 1910	1906 to 1910
Storry, James		1906 to 1910
" "		1920 to 1922
Boag, T.D.		1906 to 1917
" "		1919 to 1921 (Died)
Horsley, T.H.		1908 to 1910
Murray, J.M.		1908 to 1911 (Resigned)
Cook, C.		1908 to 1911
Turner, W.W.		1910 to 1917
Glass, Rev. W. L.	The North Canterbury Hospital & Charitable Aid Board.	1910 to 1912 (Resigned)
Carrington, Mrs. E. W.		1910 to 1913
Inson, Mrs. W.		1911 to 1913
Wilson, Mrs. J. H.		1910 to 1920
Hall, J.D.		1910 to 1916 (Resigned)
Henderson, J.		1910 to 1912
Mc.Millan, D.		1910
Spencer, W.P.		1910
Clothier, O.F.		1910 to 1911 (Resigned)
Palmer, E.O.		1910 to 1912
Turnbull, A.H.		1911 to 1915
Montgomery, W.H.		1911 to 1912 (Resigned)
Flower, H.L.		1912 to 1915
Bradley, Orton		1912 to 1920
Otley, H.J.	1920 to 1921	1912 to 1921
	1923 to 1928	1923 to 1928
Harrison, T.		1912 to 1914
Christie, Mrs.		1912 to 1920
Forsick, P.C.		1912 to 1915
" "		1922 to 1924 (Resigned)
Cooper, W.H.		1913 to 1919
Ashley, J.		1913 to 1915
Andrew, B.		1914 to 1925

Names

Chairman

Members

Andrew, I.
 Evans, R.
 Norton, F.G.
 Green, Mrs. Catherine
 Paterson, H.
 Nicholls, W.
 Walter, W.
 Bethell, M.
 Smith, A.T.
 " " "
 Herbert, Mrs. A.
 Burgoyne, F.
 Armstrong, W.
 Holland, H.
 Leadley, W.R.
 McRae, D.
 Archer, Rev. J.K.
 " " "
 Page, Mrs. S. S.
 Dety, J.W.
 Carr, Rev. Clyde
 Roberts, Mrs. W. G.
 " " " "
 Armstrong, G.
 Howell, F.
 " " "
 Rule, Rev. F.
 McCombs, Mrs. E.
 Evans, L.B.
 Acton-Adams, P.M.
 Davison, H.R.
 Green, Mrs. Theresa
 Acland, H.T.D. Sir
 Foster, Dr. P.S.
 Boyd, J.
 Cardale, Miss E.
 Anderson, W.
 Sharpe, P.W.
 Barnett, J.G.
 Dean, Mrs. J.S.
 Foster, W.T.
 Thompson, T.
 Bennett, H.A.
 Parlans, Mrs. I.
 " " "
 Mould, R.A.
 Mackay, Mrs. J.
 " " "
 Read, Rev. F.T.
 Monk, F.J.
 Flavell, G.
 Heslop, J.
 Denton, H.E.
 Hope, Pearson, R.E.
 McParlans, Mrs. L.M.
 Clarke, Mrs. J.N.
 McLean, Miss M.
 McMillan, R.T.
 Freeman, F.W.
 McKellar, C.G.

The North Canterbury
 Hospital Board.

1938 to present day

1914 to 1920 (Resigned)
 1915 to 1920
 1915 to 1920
 1915 to 1922 (Resigned)
 1916 to 1922
 1917 to 1920 (Died)
 1917
 1918 to 1926
 1919 to 1922
 1924 to 1926 (Resigned)
 1917 to 1922
 1920 to 1921
 1920 to 1922
 1921
 1921 to 1926
 1921 to 1922
 1921 to 1922
 1941
 1922 to 1923
 1923 to 1924
 1923 to 1922
 1923 to 1922
 1941 (Died)
 1923 to 1922
 1923 to 1922
 1923 to 1927 (Died)
 1923 to 1922
 1923 to 1924 (Resigned)
 1923
 1923 to 1922
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 1927 to 1922
 1928 to 1924
 1929 to 1922
 1929 to 1922
 1929 to 1920 (Resigned)
 1920
 1921
 1921 to 1941
 1923 to 1924 (Died)
 1923
 1924 to 1922
 1927 to 1941
 1924
 1925 to 1922
 1941
 1925 to 1927 (Died)
 1925
 1927
 1927 to 1941
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 1928 to 1941
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 1941

COUNTRY HOSPITALS.

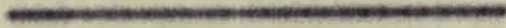
The Country Hospitals which are open to the public are run very much on the same lines as an ordinary nursing home. The doctor is permitted to make his own arrangements with the patients who can afford to pay his charges, and the North Canterbury Hospital Board pays a small retaining salary to the doctor for which he attends the person who is unable to pay, while the Board charges a fee for nursing and maintenance. The institutions were erected to provide for the country residents, facilities for dealing with cases of maternity and sickness. The Board made a stipulation that no surgical operations other than minor ones were to be performed unless there was competent assistance.

With regard to assistance being called for in cases of emergency or operations, it was understood that a neighbouring doctor in receipt of a subsidy from the Board should be called upon. In the event of still further assistance, communication with the Medical Superintendent of the Christchurch Hospital or the Chairman of the Board should be obtained.

Instructions were issued to the medical practitioner when appointed to the country hospitals and were enlarged upon later when the Medical and Lady Superintendents of the Christchurch Hospital were appointed to inspect the country hospitals regularly and report to the Board.

At one time a number of doctors were subsidised to practice in country districts by local medical committees. It was discovered that the County Councils had power to subsidise doctors and some of them did so. The Health Department considered it the function of Hospital Boards, and the power to do so was taken from County Councils by legislation by an Amendment to the Hospitals and Charitable Aid Boards Act in 1920.

To numbers of the travelling public, particularly in accident cases, many of the country hospitals have proved beneficial.



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COUNTRY HOSPITALS.

From 1927 six new hospitals were opened, and proved of distinct benefit to the outlying districts, being run successfully, but certainly not as a paying proposition. The public supply part of the deficit, the rest being found out of general hospital funds to enable the local sick to be retained in their own districts.

That the public made more claims upon the Hospital Boards is only natural, seeing that every individual in the Community contributes towards the upkeep of the country hospitals, and the fear that many people had of treatment in hospital gradually died down till they demanded to have the benefit of local service. Even so, there remained a marked aversion to the public ward so that the North Canterbury Hospital Board was more or less compelled to have alterations made to ensure privacy, more especially for the maternity patients.

The North Canterbury Hospital Board's Economy Committee, formed in 1931, was the outcome of a meeting of Local Bodies to consider the question of closing some of the hospitals because of financial difficulties. The Department of Health suggested restrictions in the amount of subsidies, and to evade the entire cutting down of services, all practical means of economy were performed by those in charge of the Board's institutions.

When the question of closing or leasing some of the hospitals was mooted ten years ago, an opinion was expressed that what was really required when some of the country districts requested their own hospitals was six, eight or ten roomed houses similar to the nursing homes which existed at Rangiora and Kaiapoi. Had such hospitals been built and local co-operation encouraged, both with the building and the subsequent operation of the hospitals, all would have been well. For an average of three patients, a staff of three nurses and two maids was provided. Unfortunately, the requests for hospitals came at a time of unexampled prosperity. Having built pretentious institutions, the expenditure was regulated accordingly. Owing to the extent of the grounds, men had to be engaged full time to look after them and very beautiful some of the gardens were. The results were delightful hospitals and surroundings and an annual deficit!

Although the cottage hospitals were faced with drastic economy during the lean years of 1931-33, they were neither closed nor leased during that period. This surely proved that the policy of the North Canterbury Hospital Board, in endeavouring to maintain these smaller institutions, was in the best interests of the country districts.

The hospitals were :-

Chatham Islands	Kaiapoi
Cheviot	Little River
Darfield	Lincoln.

AKAROA HOSPITAL.

The first hospitals were Government institutions intended for the care of Maoris and indigent white people. It was the plight of the Maoris that seemed



Town Clerk's Office

AKAROA, 20th. October 1941

COMMUNICATIONS TO BE ADDRESSED:

THE TOWN CLERK,
P.O. BOX 10,
AKAROA.

Mr W. R. Norris
11th, Canterbury Hospital Board,
Christchurch C.1.

Dear Madam,

The reply to your telephone enquiry & letter has been somewhat delayed. I have spent a great deal of time in endeavouring to secure information in connection with the early history of the hospital, but cannot get very much.

If the matter of a history had been considered about 10 years ago, more information would have been available.

I have searched the "Akaroa Mail" from 1876, its beginning, but cannot find very much, however, what I have found may be useful.

The hospital was apparently erected in the latter part of 1876, in June the paper mentions that the hospital has been erected in the months and has not been furnished, again in Sept. the same year, (1877) the Govt. is severely criticised for not furnishing the building, and in Feb. 1878 mention is made about the non-furnishing.

On 26th. March 1878 mention is made of an operation by Dr. Christie, but it does not say whether it was in the hospital or not, and yet in spite of no furnishings, additions were being made to the building in June 1878.

The medical officer mentioned in your letter was Dr. Pearde, evidently there was a matron in charge, as I noticed the matron expressed thanks on different occasions for gifts of linen, fruit etc. but no name is mentioned.

The several write-ups re the furnishings were brought about owing to the number of accidents and sickness in the district and nowhere else put them, although mention is made of some patients in the emigration tracks, which was then in existence next to the old hospital.

I am afraid this is about all the information I can give at present but if I can get anything further I will let you have it.

Yours faithfully,

Town Clerk.

AKAROA HOSPITAL.

The first hospitals were Government institutions intended for the care of Maoris and indigent white people. It was the plight of the Maoris that seemed to be the main concern. They suffered from infectious diseases, venereal diseases, alcoholism, and other troubles that came with the white man.

1862.

In June, 1862, the white population of Akaroa raised amongst themselves £150 for the purpose of erecting a small hospital or invalids' home. Most of the Maoris of the district at that time were healthy, and all had been vaccinated. Occasionally, some suffered from diseases requiring attention and surgical care. Thus on behalf of all the natives, efforts were made for a Government grant to swell the Hospital fund in the hope of finding something suitable for the requirements of both the white and native population. The estimated cost of the proposed hospital was £300 and the annual subscriptions guaranteed would leave that required for native purposes, trifling.

1874.

In 1874, Mr. Durham was appointed medical officer at a salary of £50 per annum. He was expected to look after charitable aid and hospital cases also. In 1875, the Provincial Government placed £300 on the estimates for the establishment of a hospital or casualty ward. The Rev. W. Aylmer and the Mayor of Akaroa furnished to the Superintendent of the Province, the names of suitable residents to constitute an Akaroa Hospital Committee.

1876.

In 1876, tenders for the erection of the Hospital were considered by the Provincial Executive and that of W. Penlington for £440 was accepted for the building, and £75 for the verandah. The subject was side-tracked till 6th September, when a large petition was received from Akaroa residents pressing the necessity for such an institution. A statement of Provincial accounts was presented to the Provincial Government showing that a balance of £300 out of a vote of £500 remained unexpended in connection with the Christchurch Hospital building. The Akaroa Benefit Society requested a donation from the Provincial Government, also the control of the Hospital (with Dr. Pearce as Medical Officer) by the Society when that institution opened. The hospital was situated on the corner of Jolie Street and Aylmer Valley Road.

1877.

In 1877 a case illustrating the necessity of having the hospital placed under the management of a committee in Akaroa was made painfully apparent. A man was taken dangerously ill and an appeal was made to the authorities to secure the attendance of a nurse, but they were unable to aid the unfortunate patient, as the charitable grant from the Provincial Government which they formerly had, no longer existed. Good samaritans succeeded in securing the services of a man to attend, otherwise the patient might have been left without the slightest assistance.

It was not till March, 1877, that T. Crane, who had been architect to the now defunct Provincial Government, was called upon to prepare plans of alterations to the Hospital.

1879.

In 1879, Mr. and Mrs. Dickson were in charge of the hospital cottage. In 1881 they resigned and were followed by Mr. and Mrs. G. Smart. Mrs. Smart, in addition to cooking and nursing, frequently had to wash for the .

Akaroa Hospital, contd.

patients. Her husband did the necessary repairs and painting to the building. In consideration of these duties, they were given \$100 per annum.

1884.

During 1884, thirty-one patients were treated. There was no doubt that the hospital was of great benefit to the district as many patients came from long distances and could not possibly receive the same attention from the Medical Officer in their own homes.

1886.

In 1886 additions were made to the Hospital by W. B. Tosswill. Dr. Woodforde was appointed surgeon after Dr. Singleton's resignation. Mr. and Mrs. S. Penrose were appointed caretaker and nurse. It was the duty of the caretaker to make the necessary enquiries as to the ability of patients to pay for maintenance while in the hospital. The Mayor and Chairman of the County Council were the official visitors.

Owing to the large expenditure incurred in maintaining medical patients at the Cottage Hospital, it was recommended that, as there had been provided greater accommodation in the Christchurch Hospital, they should be transferred to that institution. The Cottage Hospital would still be called on as a casualty ward. Exception was taken by the Mayor to the transfer of patients to Christchurch. Since Dr. Woodforde's removal in 1888, no medical man had taken up residence at Akaroa, consequently the position of surgeon at the Cottage Hospital had not been filled. The residents formed a Medical Guarantee Association and secured the services of Dr. Bolger, who was also appointed surgeon to the Cottage Hospital, a post rendered vacant by Dr. Woodforde leaving the district.

1894.

In 1894 after eight years as caretaker, Mr. Penrose applied for holiday leave for himself and for some extra assistance for Mrs. Penrose, but after some regrettable incident, he did not return. Everything at the hospital was in perfect order, reflecting great credit on Mrs. Penrose. Strong representations were made to the North Canterbury Hospital Board from all the leading residents for the appointment of Mrs. Penrose as Matron. This appointment was approved by the Board, who considered her thoroughly competent to take charge of both the men's and women's wards.

1895.

In 1895 the Town Clerk advised the urgent need of painting and repairing the Immigration Barracks then in use and in occupation by the Board. Dr. Bolger reported that as only one or two inebriated patients who might be unsatisfactory for a general ward were placed in the barracks, the Council was exceeding its duty in asking the Board to make improvements, especially as the Government still had control of the buildings. A section of land adjoining the hospital grounds on which formerly stood the Immigration Barracks was gasetted as a hospital reserve No. 97, containing 2 roads, 14 porches.

Akaroa Hospital. contd.1898.

In 1898 the hospital consisted of two wards 16' x 16', with four beds in each, and staff accommodation consisting of sitting-room, two bedrooms with kitchen and outbuildings and morgue. The Board impressed upon the Medical Officer that the hospital was for the reception of casual cases only. Cases requiring operations might be transferred to the Christchurch Hospital as it was not possible to keep a nursing staff at Akaroa.

1911.

In 1911 Mrs. Penrose, after twenty-five years as nurse in charge, was granted six months leave of absence, and resigned the following year. Charge nurses were sent from Christchurch Hospital to relieve for periods of two to three months at a time till Nurse Davies was appointed nurse-in-charge in 1914.

1916.

The Akaroa County Council in 1916 was instrumental in bringing before the Board the demands of the residents of the County respecting a much needed Maternity Hospital; or some provision for the services of a Maternity Nurse. The Board was entirely in sympathy with the suggestions, but was unable to carry them into effect. Pending the establishment of a Maternity Hospital, the Board promised to appoint a midwife with the hospital as her base, but the services of a qualified nurse were unobtainable. Under the scheme for the extension of the St. Helen's Hospital system, nurses trained there were placed in country towns and districts to attend cases of confinement at the homes of the individuals.

1920.

In 1920 an agreement was made to purchase a site for a new Hospital and Maternity Home. The Board decided that if the residents of the Akaroa County and Borough would contribute the sum of £500 and the Government subsidy of 2½/- in the £ was obtainable, it would then purchase the area of land selected as a site for such a building as proposed.

1921.

In 1921 a ward in the existing hospital was reserved for maternity cases and a qualified midwife was appointed there with a trained nurse. The other ward in the hospital was reserved for emergency cases.

1923.

In 1923 the Board on the representation of the Akaroa Borough and County prepared plans and arranged to purchase a site. With the Minister's approval, the purchase of a site at Aylmers Valley, offered by Mrs. Porter, of 2 acres 1, rood, 14 perches, at the corner of Aylmer Street and Onuku Road was determined upon. Little time was lost in calling for tenders, and that of Hammett and Sons for £7,486 was accepted.

1924.

In 1924 the building was completed and opened on the 10th May, 1924, provision being made for four beds for maternity cases and three for sickness or casualties.

Approval was given by the Health Department for the sale of the old hospital site, the Board to utilise the proceeds towards the capital cost of the new building.

Akaroa Hospital, contd.

1929. It was not long before application was made for further accommodation for the benefit of the nursing staff. The Health Department was of opinion that as a new hospital had recently been erected at considerable expense and accommodation provided for a staff of six, it appeared there should be ample accommodation to meet the needs, therefore, the application was not granted. The refusal was not altogether unwarranted, for the staff consisted of five trained nurses and a hospital aid. At a later date alternative plans for providing extra nursing staff accommodation were drawn up by Collins and Harman. Harnett and Sons' tender was accepted for £664, and a covered-way for £51. In 1929, the Board granted the Akaroa Borough a small portion of land at the corner of Jolie Street and Bruce Terrace to enable a better turning for vehicles, and the fence in the hospital ground was set back so as to give more land for hospital garden purposes.

The Ladies Visiting Committee from time to time provided many extras to ensure comfort for the patients in no small measure. The residents of Akaroa and Banks Peninsula made contributions towards a radio for the hospital, and the Board accepted the County Council's offer to undertake to look after the grounds and provide all plants and seeds.

1938. A petition was circulated through the County and Borough by members of the local branch of the New Zealand Farmers' Union to support a request that an X-Ray plant be installed. In September, 1938, the Hospital Board approved the purchase of the plant. The County Clerk and the Secretary of the Union conveyed to the Board their appreciation and stated that it would be a great boon to the inhabitants of the district.

1918.

During the influenza epidemic in 1918 the need for a hospital in the Amuri County was made apparent; and if established, would be an inducement for a doctor to reside in the district. Amuri is situated twenty-three miles from Waikari by good road and seventy-six miles from Christchurch. There was a house available for a doctor, including nine acres of land at Rotherham. This land had been set aside by the late Mr. Alex. MacFarlane of Ashray.

A deputation of ratepayers representing practically the whole County of Amuri waited on the County Council to ask them to take immediate steps to establish a combined cottage hospital and maternity home similar to the one proposed for the Waipara County.

The Hospital Board notified the County of the arrangements made with the Oxford and Waipara Counties that their contributions and subsidies thereon should be equal to two-thirds of the cost, the other one-third being made up by the Board. If the Council decided to pay out of rates, it would have to be determined whether the Minister would pay subsidy on such contributions. If voluntary contributions were raised it might be possible to get a higher rate of subsidy.

At the invitation of the County Council, representatives of the Board visited Rotherham to inspect the site and approved of it. As the residents intended to erect a hospital of maternity home, the Board promised, once the building was erected and equipped, that it would undertake to staff and maintain the hospital. The Inspector-General promised to go into the matter with a view to providing a standard plan minimising the cost, which, considering the demands likely to be made upon the Department as in the two instances where contracts were already let, were somewhat excessive.

1919.

Plans similar to the standard design of the Department's Cottage Hospital at Denniston were submitted by the Architects, Collins and Harman, showing an area about 300 feet larger than the Waikari Hospital. They were received and approved by the Board in August, 1919. Tenders were received and in view of the high prices, the matter was referred to the Council, which approved of the Board's acceptance of J. Taylor's tender for building in concrete, with plaster walls and poillite roofing, at a cost of £7,700. The Minister's consent was received in March, 1920. In June, the Board of Trade, Wellington, under the building regulations, issued the necessary permit to build a hospital.

1921.

In 1921, owing to the threadbare conditions of finance, the Board gladly received £1,652.19.0 being the amount donated by the residents towards the cost of the erection of the building. The contractor sustained considerable loss through the inability to obtain cement for some months after his tender was accepted, and further, owing to the awards of the Court, wages had been materially increased.

1922.

In January, 1922, this modern building was opened, and it was considered to be of superior design to that of Waikari Hospital.

The Director, Division of Nursing (Miss H. McLean) approved of the appointment of Miss C. Blackie as Matron, and the Board drew up terms for the guidance of the Medical Officer.

By 1925 the Hospital had been largely diverted from the purpose for which it was originally built, and was mainly used as a convalescent hospital for the accommodation of plaster cases from the Christchurch Hospital. Nine such cases were transferred to Rotherham. From October, 1925, to February, 1926, only six maternity cases had been admitted.

That the Amuri Hospital was not justifying itself was largely brought about by indiscreet discrimination against persons being admitted, and encouraging patients to go to an unlicensed Home. At the same time, it was known that there had been fewer accident cases, and the year had been an unusually healthy one.

In 1931 there was little doubt that the Hospital was overbuilt for the requirements of the district and it was regarded more or less as a "white elephant." The district, however, found most of the money for its construction. Medical men available to the country districts were very often of inferior ability. It was only since the Board granted a subsidy and placed small hospitals at their disposal, that matters have been satisfactory in this direction.

It should be pointed out that the Amuri type of cottage hospital where medical and maternity cases could be treated, was an attraction to medical practitioners. Twice when the Hospital Board had to fill vacancies at Amuri, ten or more applicants on each occasion were received, when Dr. Smale and Dr. Todd were appointed.

The Board anticipated that considerable objection would be raised by the local authorities and the medical men concerned to the suggested closing of Country Hospitals due to the difficult financial position. Especially where contributions had been made towards the cost of erection, and as agreed to by the Department in the districts of Oxford, Waikari and Amuri. Instead of closing, there was an alternative suggestion of leasing and subsidising. The Department considered that the Board was not justified in continuing to operate these hospitals.

The great improvement in speed and comfort of modern transport definitely altered the position of some of the smaller hospitals from that existing when they were built. Medical men interested and representatives of the local bodies were invited to meet at a conference. The opinion was expressed that these hospital and medical and nursing services in the country districts should, to some extent, be looked upon as an insurance Policy. Through the introduction of motor transport, serious suffering and distress would be caused if some of the hospitals were closed. As the hospitals were all of very great benefit to the country districts, the Conference decided that the suggestion that any of them should be closed should be strongly opposed. If hospitals are not available to the residents, they have to go to Christchurch and fall into the hands of medical men other than the country doctor. Consequently, they are lost as patients to the local man, seriously reducing his income.

In 1934 as a practical means of economy, a special committee was appointed, and it was deemed necessary to reduce the medical subsidies by £100 to each of three existing grants, namely, Amuri, Cheviot and Waikari. The resident medical officers were asked to express their opinion regarding the closing of certain cottage hospitals. In the case of Amuri, the locum tenens felt he could make little comment other than to remind the Board that the resident doctor, who was on extended leave, had security of tenure in an agreement under the Board's seal, which provided for his appointment as medical officer at a salary of £100 per annum and for a subsidy of £250. This agreement had been substantially departed from without consultation and it would indeed be an unfortunate occurrence if the Hospital were closed. Taking into consideration the high travelling expenses incurred in this practice, it was apparent that, if the hospital were closed, there would be very little inducement for any medical man to practice in the district.

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AMURI DOCTOR'S HOUSE.

In 1922 the North Canterbury Hospital Board took over the agreement that the Medical Officer had with the Amuri County Council, a free house being one of the emoluments supplied by the Council. The ratepayers gave £740 for the house, and, after bringing it up-to-date with water service, motor-garage, painting and paper-hanging, regarded the valuation as £1,050. The Council considered 25/- per week a reasonable rent for the Board to pay.

The Board was the responsible authority for the appointment of a medical man in the Amuri district and had to provide a residence. Previously the residence was the property of the Amuri Council, handed over to that body by a Medical Association or Committee and the Board leased it at a nominal rental with certain responsibilities regarding repairs.

A lease was drawn between the Chairman, Councillors and inhabitants of the County and the members of the Hospital Board. It was agreed to take approximately half an acre on which stands the dwelling known as the doctor's house, for a nominal rent of 1/- per week; the house to be tenanted by the doctor and the Board to maintain the house, out-buildings, fences etc., to pay all rates, taxes and insurance.

In 1936, the residence was completely destroyed by fire. The insurance amounted to £850 and was collected by the Amuri Council in whom the property was vested. Representatives of the County and the Board met to discuss the matter of ways and means for rebuilding. The Board suggested that it should take over the freehold of the site, and the insurance money and own the house. Objection was raised to this by the Department as a transfer of the property was not likely. The Board was not empowered to expend capital funds for the purpose of erecting premises on land which was the property of another local body.

A proposal was made to erect a concrete building at a cost of approximately £2,750, of which amount £850 was provided by the insurance on the old building. The Board would be called upon to make up the difference.

The Amuri County prepared plans, and when these were submitted to the Board, objection was raised to the apparent high cost of a new building. But it was found that over and above the ordinary accommodation that would be provided for a man of moderate means with a family, there had to be provision for a separate entrance and waiting-room, consulting room and dispensary. Further, on account of its distance from any possibility of assistance in case of fire, the Board agreed that the building should be erected in concrete, which would materially reduce the burden in the shape of maintenance for which the Board would be responsible during the tenancy. The proposal was recognised as being reasonable and subject to the tenders not exceeding the amount of the estimate, the Board agreed to be responsible for the interest on the loan for the total cost of the building, and would be liable for the sinking-fund over the period for which the loan was granted, at the cost of £95.10.0 per annum.



Amuri Hospital.



Amuri Dr's. House.

CHATHAM ISLANDS.

The Chatham Islands consist of two inhabited islands and several unimportant islets of a total area of some 372 square miles. Although about 480 miles eastward of Banks Peninsula, the group was constituted a county in 1901, and is not classed with the outlying islands. Before 1927, the islands were not included in any electoral district, and thus had no parliamentary representative, but from 1927 have been included in the Lyttelton Electoral District, and in the Western Maori Electoral District for the election of Maori representatives. In view of the special circumstances of the Chathams, certain laws are modified in their case, e.g., the Unemployment Act does not apply to them, nor do the provisions of the petrol-tax imposed for road purposes. The Chatham Islands are for most purposes grouped with the South Island, and are also treated for statistical purposes as part of Canterbury Provincial District, although the latter is not strictly correct in point of law. The islands are included within the Wellington Deeds, Land Transfer, and Land Districts, but within the North Canterbury Hospital District and the Canterbury-Kaikoura Sheep District.

The Rev. B. G. Fox, resident Chaplain at Chatham Islands in 1948, brought before the Minister of Public Health the pressing need of a resident qualified Government nurse and the utilisation of the doctor's house as a cottage hospital.

CHATHAM ISLANDS.

The "Discovery" with Captain Geo. Vancouver and the "Chatham" with Captain Broughton parted company during a gale after leaving Dusky Bay, and did not meet again till their arrival at Otaheite (Tahiti).

During the passage of the "Chatham" to this place, the Captain discovered and named the Chatham Islands on 29th November, 1791.

Mr. Seton Henderson, a leading resident, interviewed the Prime Minister in Wellington, and stated the need of a hospital on the Island. The residents were paying hospital rates, and the natives were quite willing to pay so long as the money was expended on the Island. The resident doctor was living alone in a seven-roomed house provided by the Government, and it was considered that this house would be suitable for a cottage hospital as well as the doctor's residence.

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The Rev. B. G. Fox, resident Chaplain at Chatham Islands in 1916, brought before the Minister of Public Health the pressing need of a resident qualified Government nurse and the utilization of the doctor's house as a cottage hospital. A trained nurse was sorely needed especially for the Maoris. The population of the Islands was given as 477, 287 being Maoris. Many of these had little or no conception of the proper treatment to be given in cases of serious illness, and if they had there were no facilities for such cases. A Government nurse trained to work amongst Maoris would render invaluable service and might often be the means of saving lives. Mr. Fox stated:-

"When in New Zealand I saw some of the good work done by Government nurses among the Maoris, especially in the matter of regular and systematic visits, and since I came to the Chathams over two years ago I have increasingly felt the need for a trained nurse here."

It was pointed out that a nurse would be seriously handicapped in her efforts if the nursing had to be done in the homes of the people - especially in the Maori houses. It was always difficult, and in many cases impossible to send cases to New Zealand for hospital nursing owing to the long intervals of the steamer connection. Even if a steamer were available in most cases the patient would be too ill to stand the long passage. The Department of Health notified the North Canterbury Hospital Board that the Minister approved of the Department paying the salary of a nurse but the difficulty was to obtain one. The Board was asked if any nurse in its employ was available for the Islands. The matter was referred to the Minister to make arrangements for an appointment. The Board had difficulty in obtaining any payments towards contributions from that particular part of its district.

Mr. Seton Henderson, a leading resident, interviewed the Prime Minister in Wellington, and stated the need of a hospital on the Island. The residents were paying hospital rates, and the natives were quite willing to pay so long as the money was expended on the Island. The resident doctor was living alone in a seven-roomed house provided by the Government, and it was considered that this house would be suitable for a cottage hospital as well as the doctor's residence.

Public meetings had been held by both races and resolutions were unanimously adopted favouring the proposed hospital. During the previous year, Dr. E. P. Ellison, B.M., of Waitangi, had on several occasions at least twelve acute medical and surgical cases on hand.

A strong committee was formed with Dr. Ellison as Chairman and a canvass of the whole Island was undertaken to raise £400 to secure a site. The site selected was an excellent one, overlooking Waitangi Bay, with a good water supply and natural drainage. It was also close to the medical officer's residence and situated where the roads of practically every part of the Island converge.

A public meeting discussed certain matters in connection with the County Council which would soon operate. Four Ridings were decided upon for the main Island, Pitt Island and the other outlying islands constituting the fifth. The ratepayers' roll was to be made up and members elected.

The Board secured an option on 23 acres of land for £400 and the Government would subsidize £ for £. It was necessary to have the land in order to provide grazing for cows and horses. Milk could not be purchased on the Island. Provision had to be made for horses in order to get about the country.

With regard to taking over the area of land for the erection of the Hospital, the Board understood that the area was native land, but later found that it was Crown Land held under a petition order by Mitai Pupu. Application was made to obtain the Minister's approval to the Board's securing this land and it was eventually taken under Section 18 of the Public Works Act.

An objection was lodged by Mitai Pupu, the owner of the property, unless compensation was exceeding the Government valuation by 10% was granted to him. The Board made this grant in December, 1925, and a proclamation of the taking of the land was gazetted on the 17th December, 1925, (Gazette No. 85). Plans were provided by Collins and Harman in May, 1925, and the design was made as plain as possible. As there was practically no shingle obtainable on the Island, the construction was of timber with an iron roof. The foundations were made of wooden piles; suitable timber was found on the Island, but all other materials were shipped from New Zealand. The Director-General improved upon several features which were contained in the plans and the Department made a sketch-plan setting out the whole of the accommodation on one floor. Arrangements proceeded more or less smoothly till the blow fell.

In October, 1925, the Director-General notified the Board that he had approved the proposed plans under a misapprehension and that the expenditure of £4,500 for a hospital for a population of 400 was absurd. In the circumstances he suggested that a plan of much more moderate design be submitted. The amended plan was approved by the Department and passed for the Minister's consent. The Department's plans were decreed quite inadequate; moreover, enquiry among well-known residents elicited the opinion that any local labour that might be available was neither certain nor reliable. The Board was not disposed to disregard the views of the late Minister of Health on this point, but was supported by the experience of the North Canterbury Education Board, which had erected two buildings on the Island, and its supervisor in the work had reached the same conclusion.

Chatham Islands, Contd.

1926.

In June, 1926, Mr. J. McCombe, M.P. interviewed Dr. Valentine and strongly urged the retention of the previously approved site and the provision of ample accommodation sufficient to cope with a "peak load". The Islanders were 500 miles from the nearest hospital and there were times when seven or nine weeks elapsed before a steamer sailed. Eventually the plans for accommodation for two patients and a staff of two - estimated cost £2,500 were forwarded to the Department. In August, Dr. Valentine recommended the Minister to agree to the provision, not of a cottage hospital, but merely of a district nurse's cottage with accommodation for two cases. The Department had already supplied a plan which was considered ample and could not agree to anything more elaborate.

In January, 1926, Collins and Harman, Architects visited Chatham Islands for the purpose of viewing the site of the building and commencing the work. The site was an excellent one, having a fair grade to the north sufficient to give good drainage to the land and about 100 feet above the sea, 8 or 9 chains distant. The local authorities strongly urged the necessity of the early planting of shelter trees round the buildings.

The Hospital Board's proposal had been received with every evidence of gratification by the residents. The Hospital would be a tremendous boon to all settlers, as the risk of sending patients to the mainland for treatment was a constant worry, a fact which could only be understood by people on the Island.

1927.

As little was known about the local conditions and several arrangements would have to be made for carrying out the necessary work of the Institution, Dr. Fox, Medical Superintendent, and Miss Muir, Lady Superintendent of the Christchurch Hospital, were asked to represent the Board at the opening ceremony, which took place on the 16th May, 1927.

Dr. Greenwood was the recognised medical officer although no arrangements had been made with regard to his salary, seeing that he was in receipt of remuneration from the Department of Health. Dr. Greenwood's appointment as Medical Officer of Chatham Islands terminated in 1927, and Dr. H. V. Drew was the first doctor appointed by the Board.

The Board nominated Mr. Seton Henderson as the Board's representative on the Island, and the County Clerk was asked to appoint a second representative to have authority to act in small matters in connection with the Hospital. No appointment was made until 1937 when the County appointed Mr. H. Lanauze, and a small Lady Visitors Committee was set up.

1928.

An Order-in-Council was gasetted making provision on the Hospital Board for the Chatham Islands County which was included in the combined district comprising the Akaroa, Mt. Herbert and Wairewa Counties.

1930.

In 1930 Dr. Drew reported that everything was going smoothly and the hospital was a little better patronised than when it first started. It was difficult to get the natives to understand the advantages it offered; still they were learning to appreciate it. The Doctor's position was no sinecure. His patients often lived many miles away from Waitangi. One trip to an accident case sixty miles distant included a cold ride through eight miles of water across a lake, the complete journey occupying the best part of ten hours.

Chatham Islands, contd.

There always has been considerable difficulty in obtaining the services of a medical practitioner who would be suitably qualified and otherwise fitted for work in the Islands. It was suggested in 1957 that some arrangement might be made with a House Surgeon whose term of appointment in the Christchurch Hospital had expired. If such a scheme came into force a special grant might be available to raise the salary to a more attractive level including the payment of £100 that the Government Department pays subject to the Medical Officer undertaking the medical examination of school children. As a temporary measure this suggestion was carried out. Since the Board appointed Dr. Drew in 1927 there have been no fewer than nine appointments. Of these, four house surgeons from the Christchurch Hospital were sent to act temporarily. It is clear that the Chatham Islands post is difficult for any medical man to hold, and were it not liberally subsidised, would not warrant any doctor establishing himself there. Medical and surgical skill are not sufficient qualifications. The Chatham Islands Doctor must possess tact to a marked degree to deal successfully with the mixed population of Europeans and Maoris.



Chatham Is. Hospital.





Cheviot Hospital.



1919.

In 1919 the Cheviot County Council expressed its intention to raise money for the erection of a Cottage Hospital and Maternity Home by means of rates, and the Hospital Board was notified that a site offered by W. T. Robinson had been chosen. The situation was unrivalled, with a good water supply, drainage and shelter plantation.

The Board had had proposals under consideration and felt that it could not depart from the method of financing that had already been laid down recently for other districts. It was willing to proceed with the work of erecting a hospital if the Council would undertake to provide, by means of voluntary contributions, a sum that, with the Government subsidy of 2½/- in the £., would provide two-thirds of the cost. In the event of the Council agreeing to this proposal, the Board asked if they would take steps to acquire approximately 2½ acres of land belonging to Mr. Robinson, which was approved by the Board's Committee.

The Inspector-General advised that the Government could not entertain the question of subsidising grants from County Councils for the purposes of erecting Hospitals, with the exception of Oxford and Waikari, which had already been determined.

1923.

In April, 1923, the County Council, considered a proposal made by the Board's representative for the County, but could not see that any advantage would be gained to warrant the erection of a Cottage Hospital, as the Amuri Hospital was more or less empty. Patients were sent on to Christchurch Hospital for treatment as there were neither facilities for operations nor the services of a second medical man.

The Council then approached the Board to consider the possibility of stationing an ambulance at or near Cheviot. An instance occurred when a man fell off a cliff and was badly hurt. The Railway Department refused to carry the man to Christchurch, and as there was no ambulance available, an ordinary motor-car had to be used.

In October, 1923, arrangements were made with Dr. Mary Erwin to go to Cheviot for three months. She intended settling in the district and the arrangement was approved by the Health Department. Later Dr. Erwin established a dispensary when Mr. Rentoul, the chemist, left the district.

The Cheviot County Council then convened a public meeting, at which a unanimous resolution was passed urging the erection of a Hospital. Later a petition containing the names of 170 ratepayers was forwarded to the Board, requesting favourable consideration of the erection of a Cottage Hospital.

1924.

In August, 1924, the Board's Committee visited Cheviot to select a site for a proposed maternity Hospital. It was intended that the institution should contain four beds, one to be set aside for acute or emergency cases. The Committee selected the site to the north-east of Cheviot, an area of 2 acres, 2 roods, 27 perches. Water was procurable from springs at no great distance and the Board was assured that water could be obtained by sinking a well on the site itself. The cost of the section was £300. When it was found that a section of unoccupied Crown Land was included in this block, application was made for its transfer from the Crown to the Board. The

Cheviot Hospital. contd.

Department considered that the section should be purchased in the usual way at Crown valuation. The property was bought from Mr. McClintock for £300 and he agreed to transfer his Crown lease without remuneration from the Board. Section 2, block 29, in the township of MacKenzie, consisting of 1 rood, was purchased for £15.

In September, 1924, the Medical Officer of Health made an analysis and furnished a report on the condition of the water taken from the spring at the rear of the ground on which it was proposed to establish a Hospital.

1925.

Everything appeared to be in order for the plans to be put into operation, but as if to prove that every public institution must conform to the rule that progress hastens slowly, the Department in July, 1925, decided to oppose the multiplication of small general hospitals in country districts, and regretted that it could not recommend the Minister of Health to approve the erection of the institutions at Cheviot and Little River. Attention was also drawn to what appeared to be undue numbers of major operations performed in country hospitals.

Up to October, 1925, nothing further was heard from the Department of the plans which had been submitted, and the people of the district were becoming very importunate, as the matter of a hospital had been held in abeyance so long. Land was purchased with the concurrence of the Department and the residence of a doctor had been completed; all this in anticipation of the building of a hospital at an early date.

In December, 1925, the Board pressed for some determination with regard to the proposals for the erection of hospitals at Cheviot, Little River and Lincoln respectively. The Department took up a somewhat uncomprising attitude and there seemed very little chance of getting hospital accommodation. Mr. G. W. Forbes, M.P., Cheviot, was asked if he could urge upon the Minister the real need for maternity accommodation. As it was years since the movement was first brought forward and twelve months since the Board applied to the Department for consent, it seemed a pity after all the delay that Cheviot should have to suffer because of a wave of economy.

1926.

After an interview, the Director-General had with the members of the Board in August, 1926, he agreed to the proposal for the Cheviot hospital. The Board was assured that there was a good and plentiful supply of water on the road reserve running along the banks of the McQueen Creek. Tenders were called for the construction and that of A. H. Pearce was accepted for £2,110. The plan provided for two single bed-rooms, three staff bedrooms, all on the ground floor.

1927.

On the 4th July, 1927, the official opening of the Cheviot Hospital took place. Mrs. G. W. Forbes performed the ceremony and the opportunity was taken to express the Board's thanks to Messrs. W. McDowell and G. W. Forbes, M.P. for their donations towards the laying-out of the grounds.

Following the Board's usual custom of presenting a silver mug in honour of the first-born child, a presentation was made to the parents of Cecil William Norman Chishelm, born on the 3rd August.

Cheviot Hospital. Contd.

There was rather a setback in September when the Director-General was distinctly averse to a hospital, erected for maternity purposes, being used for the treatment of medical or other cases. The Inspector of Hospitals pointed out that the work of the Cheviot Hospital was a heavy strain on one nurse, who had no one to relieve her. Even when the hospital was empty the Matron had to be constantly on call in case of emergency. He recommended that the domestic be replaced by a hospital aid, sufficiently trained to allow the Matron to leave the hospital when the condition of her patients permitted.

1930.

In March, 1930, an official visit was paid to the Hospital when it was reported that the surroundings, garden and lawn were in excellent order, the buildings were kept in good repair and everything was satisfactory except for the difficulties regarding the water-supply. Although the Cheviot hospital is isolated, it proved to be of valuable service to the district in 1931 when a considerable number of maternity cases were admitted. This was due to the location of the Public Works Camp.

When it was proposed to set up a local Advisory Committee, the Cheviot County Council thanked the Board for the opportunity, but considered that the Hospital was carried on efficiently; should occasion arise, the Council could adequately represent its case to the Board under existing conditions.

1940.

In March, 1940, the Red Cross Society showed its interest. For the purpose of collecting funds for the Hospital grounds, a garden fete was organised and proved financially successful. Local interest is naturally aroused during war time when such associations as the Red Cross are very active and are seeking means of service, especially to hospitals. It is to be hoped these very much appreciated efforts will be continued in the reconstruction years following the war.

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

Darfield Hospital. contd.

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., 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 submit 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 Traway 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 subsidise 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 one 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. E. 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.

WAIKARI HOSPITAL.1915.

A factor that helped to create a feeling in favour of a hospital at Waikari was that the Counties of Cheviot, Amuri and Waipara considered that they were getting a poor return for the hospital rates they were paying. A proposal that the three Counties should get severance from the North Canterbury Hospital Board district and build a hospital at Waikari to serve their district was taken up with considerable favour and sympathetically received by the Minister of Hospitals. However, when it was known that the Hospital Board was prepared to assist in establishing a small hospital in North Canterbury, that proposal was not proceeded with.

A meeting was held at the Great Northern Hotel on the occasion of Dr. Little's return to Waikari after an absence of twenty-three years at Amuri. They all knew what a strenuous life he had lived, and hoped that in the very near future, by the erection of a hospital, he would get some relief and assistance which would save him a lot of travelling and allow him to have leisure to which he was certainly entitled. There was a private hospital in existence at Hawarden in 1915, which was offered to the Government as accommodation for wounded soldiers, but this had nothing to do with the project the County Council had in mind. The Board could not entertain the idea of establishing a Cottage Hospital at this time, but if offered a grant of £75 to the Doctors' Fund, provided the doctor accepted the Board's terms relating to the attendance on such destitute persons in the district as the Board might require him to visit.

1918.

In 1918 the Board submitted a plan - one which had been drawn for a similar hospital in another district. The Council called a meeting of ratepayers and they were strongly in favour of accepting the Board's assistance regarding a Country Hospital and Maternity Home in the County.

A letter from the Minister indicated that it was possible that a subsidy would not be recognised by the Audit Department. The County proposed to raise their proportion of funds for the purpose of erecting a Hospital by a special rate. There was difficulty in obtaining a subsidy from the Government on money contributed in this way as it was neither a voluntary contribution nor a levy. Consequently a special rate was struck in 1918 and the Government was prepared to pay a subsidy on such special rate equal to 15/- in the £.

In May, 1918, four sites were inspected by the Chairman, the Architect and the District Health Officer. Three of these were in Waikari and the fourth was the Horsley Downs homestead built in brick, with 100 acres of land, situated 8 miles from the township. The site chosen was an ideal one near the Railway Station with a northerly aspect, and on a gentle slope with shelter trees on the east. On the adjoining property (Education Department Reserve), water was obtainable from a spring. It was decided to purchase this site comprising 2 acres, 1 rood, 22 perches, of the Townend Estate, and a transfer was prepared in September. The County Council made arrangements for the road running through the section to be closed and undertook to take necessary steps to divert it in the direction as agreed upon by the visiting Committee of the North Canterbury Hospital Board.

Waikari Hospital, contd.1919.

The Architects, Collins and Harman drew the Board's attention to the advance in price of some materials since an estimate was given and pointed out that excavations for buildings and drains were proving to be costly. Tenders were received and J. Taylor's was accepted, but owing to the tender being in excess of the estimate, the matter was referred to the Minister whose final approval was not received till April, 1919. The estimated cost was £4,500 and the tender £5,724 with extras amounting to £796. Feeling against the establishment of a hospital was very pronounced in the Waipara district. Petitions for and against proceeding with its establishment were presented to the Waipara County Council. A meeting of ratepayers was called and passed a resolution supporting the proposal. After that, a move to circulate another petition in opposition was made. In June, 1919, as a counter move, a public Arbour Day was held and shelter belts were planted on the site, a goodly number of those in opposition taking part. The ladies of the district provided afternoon tea, and the battle which had taken place for and against the proposal ended pleasantly. It so happened that one of the strong oppositionists was among the first to be admitted as an accident case.

The Board owed a debt of gratitude to the County Council and especially to Mr. R. Evans, the Board's representative for the district, for the assistance that had been given throughout. A silver cup was presented on the occasion of the birth of the first child. This practice has been in vogue since the Maternity Hospitals, under the control of the Hospital Board, came into being. For a considerable time birth announcements were advertised in the Christchurch daily papers with the idea of popularising the Hospital and Maternity Institutions.

1920.

The doors of the Hospital were opened by Mrs. Evans on 2nd September, 1920. To give the institution the greatest usefulness, it was a Cottage Hospital and Maternity Home combined. Persons unable to pay the ordinary medical and nursing charges outside could obtain accommodation with all the advantage of an up-to-date Institution. Free treatment was given if the circumstances were such that patients were unable to afford payment.

The Waipara County objected to pay such amount as, with subsidy, would provide two-thirds of the cost of construction of the Waikari Hospital. The contention was that they only stipulated to pay one-third of the cost, but there was no justification for this, as it was obvious that the Government had already contributed directly to the County Fund. The Minister stated that if the money came out of rates, the Government could only give 15/-, for it was already contributing 5/- subsidy on the amount raised from the ratepayers of the County.

1922.

In 1922 disappointment was expressed by the Board that the Hospital had not been made more use of, so that to give it the fullest possible use, cases were sent from Christchurch Hospital until such time as the rooms were required for local cases.

1923.

In December, 1923, the Board's Finance Committee and local representatives with the Doctor met at Waikari to inspect the hospital with regard to possible extensions including a balcony in the main ward at the east end, the

Waikari Hospital, contd.

screening off the front entrance for emergency accommodation, and the erection of a three or four-bed ward for males at the west end of the building. The Board decided that extensions should be made later and the cost to be included in the estimates for the following year.

1925. It was not until 1925 that formal application was made to the Minister for much needed extensions at a cost of £900. This was not met with favourably, but fresh plans estimated to cost £600 were approved.

1926. In 1926 application was made for the Waikari Hospital to be registered as a "Training school for midwives or maternity nurses" under the 1925 Act. The Nurses and Midwives Registration Board notified that the Waikari Hospital was approved as a training school for maternity nurses only, and that the maximum number of nurses to be trained in a period of twelve months was three. In the event of this number being exceeded, the recognition as a training school would be cancelled. The minimum age for nurses to obtain registration was fixed at twenty years.

In a report from the Department of Health in 1931, on the small hospitals under the Board's jurisdiction, it was suggested that either the Aauri or the Waikari Hospital should be closed, as they both admitted general and maternity cases and the distance apart was comparatively small with very good road connection. A large proportion of the patients attending Waikari Hospital were from two areas, Seagill-Motenui-Omihi district and the Hawarden-Mason's Flat division. The local Plunket Society and the Waipara County Council strongly protested to the Board against any attempt by the Department to close the hospital. A protest was also forwarded to the Minister of Health by the Council.

Nothing untoward has taken place in connection with the smooth running of this institution which compares very favourably with any of the country hospitals.



Waikari Hospital.

CHARLES THOMAS WILSON LITTLE, M.D.

1866 - 1918.

A statue was erected by his friends to commemorate a life of devotion and self-sacrifice.

Dr. Little was the first doctor to attend to the requirements of the hospital. He strongly supported the proposal to build a hospital at Waikari, but did not live to see that work completed, having fallen a victim to the epidemic of 1918 in trying to assist and relieve those suffering from that malady.

He and Mrs. Little had to vacate their residence at Hawarden and were obliged to reside at the Great Northern Hotel at Waikari. Four residents of Waikari, namely, H. M. Anderson, W. Earl, G. Arves and H. H. Holland, undertook the building of a doctor's residence and the Waipara County Council agreed to take it over after obtaining the necessary power to do so. This was the beginning of County Councils providing doctor's houses in country districts. The Waikari doctor's house was designed in consultation with Dr. Little, but he died before it was completed.

A fund was inaugurated to collect subscriptions for the purpose of erecting a memorial to the late Doctor. The residents of the Waipara County, being whole-heartedly in favour of erecting a statue, petitioned the Board to allow such a monument to the late Doctor's philanthropic work to be placed in close proximity to the Waikari Hospital. A suitable and imposing position was chosen on the gradual rise in front of the hospital.



Monument to late Dr. Little.

TUBERCULOSIS INSTITUTIONS.



Nurse Maude.

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SANATORIUM.

1898.

Miss Sybil Maude, Matron of the Christchurch Hospital, gave up her appointment for the purpose of forming the District Nursing Association in 1898, and in conjunction with that scheme she started a camp for consumptive patients. This was situated on the sandhills in Linton Street in the district now known as Aranui (previously known as "Kilmington"). Nurse Maude felt that the lives of her patients were of as much importance as those of people in better circumstances.

The rates of the city allowed for maintaining the sick poor so far as rations, rents and medical attendance went, but the question of removing consumptive patients from their homes for treatment suggested the camp life to Nurse Maude. Four tents were given and pitched in the broom which afforded a good shelter against wind and rain. Men occupied three of the tents, the wife of one of them, who undertook to look after them, in another. They provided their own bedding and furniture, and the Charitable Aid Board supplied the necessaries of life. Once a week they reported to a medical man who kindly offered his advice. As more patients applied for admission, more tents were procured, timber, iron and bricks were given and all manner of additions were made with the help of Nurse Maude's friends.

After some months, the residents of the neighbourhood agitated to get the camp removed. Money was collected which enabled land to be bought nearby, and as the camp grew, a committee was formed of working men to help carry on the work and collect funds. A flag and flagstaff was given by wharf labourers of Lyttelton to mark the position of the camp. The tents were divided into groups and presided over by a matron whose cottage was in the centre. During heavy winter gales, some of the tents were wrecked and shelters of malthed were erected to house the twenty-three patients. The staff consisted of a trained nurse as matron and a male cook. The honorary physician was Dr. C. D. Greenwood, who had a private sanatorium in the grounds of Wainoni Park only a short distance from the Nurse Maude camp.

Some time after the men's camp had been launched, Nurse Maude called a public meeting of women and addressed them on the disease, and appealed to them to do something for their fellow sisters. The first offer was the loan of four acres of land with a house, some two miles from the men's camp, well sheltered, and on sandy soil. A committee of women was formed, and with the help of various societies, subscriptions and gifts in kind, the camp was put into working order for sixteen women patients. A routine of treatment was set by the physician similar to that in the men's camp. Only cases in the curable stages were admitted as advanced cases had a bad effect on the others and a larger staff would be required.

Entertainments were given by friends from Christchurch, and a piano, books and games helped to pass the time. The average cost per head was 10/- per week - a charge was made if the patient could pay, but always in accordance with their means.

Sanatorium, contd.1901.

The South Canterbury Hospital Board wrote to the Board asking for its co-operation in requesting the Government to take steps towards the creation of a sanatorium. The North Canterbury Hospital Board was in thorough accordance with the scheme, and was aware that the Government knew of the urgent need.

1903.

The District Health Officer (Dr. Finch) reported in 1903 that several cases of consumptives should be removed from their residences, in the interest of public health, for proper treatment in a suitable place, and asked if the Board would provide for such cases at Bottle Lake and at what charge, but the Board was not in a position to entertain the proposal. A year later the matter was again referred to when the District Health Officer waited on the Board. Parliament had given the Boards power to erect shelters for the treatment of consumption, but the matter had been delayed by an imaginary smallpox scare. Dr. Finch assumed that a consumption hospital might be established at Bottle Lake to serve the area that then contributed to the infectious diseases hospital. The tents still standing could be used. It was understood that the General Government was going to provide for consumptive cases, and there was no reason why the responsibility should be shifted to the Local Bodies. The Government had stated that it would take up the matter, but nothing had been done. Nurse Maude was doing very good work, in the treatment of consumption, but did not take cases which were far advanced as they were the ones most dangerous to the public. Even if the Government did establish a sanatorium, it could not deal with all the cases.

1905.

A special meeting of the Hospital Board was held to discuss the question brought forward by the management of the Nurse Maude Consumptive Camp, which was willing to hand over its work to the Board including property, buildings and funds. The committee was willing to carry out the work if the Board would ultimately arrange to take over the responsibility. After addressing the meeting, Nurse Maude and others withdrew.

The question of accommodation and treatment had been considered from time to time hitherto without arriving at any definite course of action. The Hospital Committee went so far as to select two sites on the Bottle Lake Reserve which they considered suitable for the establishment of camps where, at comparatively little cost, treatment could be carried out. There was provision for cooking and attendants. As the Amended Health Act threw the responsibility of providing hospitals for such cases on the Hospital Boards, the North Canterbury Board considered that the proper course was to erect a sanatorium in a position to be agreed upon, for the accommodation of patients belonging to the North Canterbury Health district. In recognising the extreme lack of funds, and with a view to taking concerted action, the North Canterbury Hospital Board invoked the assistance of Messrs. G. Witty, M.H.R. and H. G. Ell, M.H.R. to induce the Government to erect a building.

Sanatorium, contd.

A deputation from the British Medical Association consisting of Drs. E. Jennings, Talbot, C. Norton Anderson, W. H. Symes, Shone and Orchard and Dr. Finch, (District Health Officer) waited on the Board in May, 1905, regarding a scheme which would necessitate the collection of a large sum of money to be raised by an appeal to the public. Before setting to work the Association wanted to be certain of the Board's practical sympathy to be shown by its taking up the work when the Association left it. The Board promised to afford every assistance possible.

At a special conference on the 1st June the Committee appointed met delegates from the Hospital Boards in the Canterbury Health District. Messrs. G. Payling, Dunlop, Hadfield and Loughnan represented the North Canterbury district; Mr. Davis, Ashburton. Apologies were received from Timaru and Waitaki Hospital districts. The District Health Officer and Dr. E. Jennings, of the British Medical Association were present. It was recommended that the different Hospital Boards take over and maintain the Sanatorium when erected by the Medical Association, and that the cost of maintenance be allocated on a population basis amongst the Boards which agreed to contribute; the control to be vested in a committee consisting of representatives of the contributing Hospital Boards, the number of representatives to be in proportion to the contributions. The admission of patients was to be left in the hands of an honorary staff and resident medical officer, and beds allocated to the different Boards in proportion to population. The conference was of opinion that the proposed Sanatorium should be erected in the North Canterbury Hospital District.

1905.

A public meeting was held on 6th July, 1905, in the Choral Hall for the purpose of bringing before the residents of Christchurch the actual necessity for establishing a Sanatorium for consumptives in the North Canterbury Hospital district. His Worship the Mayor, C. E. Gray presided. Apologies were received from:- Sir John Hall, the Hon. H. F. Wigram, Archdeacon Scott, Canon Knowles, Father Moran, the Revs. Hamilton, Hoggins, T. Tait, Thorpe, Elmalie, Dewsbury, Captain R. Beaton Rhodes, Messrs. C. A. C. Hardy, D. Bydgo, Laurensen, Lee, Felson, Howard and others. The first resolution by Dr. E. Jennings, seconded by Dr. Greenwood, was "That it is desirable that a Sanatorium for the treatment of tuberculosis be erected in the North Canterbury Hospital District". The second resolution moved by the Rev. T. Tait, seconded by Nurse Maude, was "That a committee consisting of His Worship the Mayor of Christchurch, the Secretary and members of the North Canterbury Hospital Board, North Canterbury and Ashburton United Charitable Aid Board, Education Board, County Councils, Road and Town Boards in the district of the North Canterbury Hospital Board, registered medical practitioners in that district, editors of newspapers, members of the committee of the Nurse Maude camp for consumptives, Bishops Julius and Grimes, Dean Harper, Archdeacon Averill, Revs. O'Connor, Erwin, Elmalie, Tait, Coe, Gilmour, Mesdames Barkas and Bowen, Sister Helliish, Miss Gibson, Revs. Moreland and Adamson, Judge Haselden, Professor Macmillan Brown, Messrs.

Sanatorium, contd.

Gilbert Anderson, Ballantyne, Bewick, Bevan Brown, a representative of Friendly Societies, Messrs. H. W. Bishop, S.M., Campbell, Coverdale, Day, S.M., Frostick, Kaye, Devenish-Mearns, Reece, Rhodes, Stead, Smith and Hornibrook be appointed with power to act."

The first meeting of the General Committee was held on 16th July, 1905, in the Council Chambers. Dr. Finch stated that there were about 500 known cases of consumption in the Christchurch District. The Mayor of Christchurch moved "That an Executive be set up consisting of the Chairman (the Mayor of Christchurch, C. H. Gray), President of the B.M.A. (Dr. C. Norton Anderson), the Chairman of the North Canterbury Hospital Board (G. Payling, Esq.) Messrs. Bewick, H. R. Smith, Dunlop, F. Horrell, Pearce (Mayor of Kaiapoi), a representative of the Friendly Societies, Nurse Maude, Drs. Jennings, Greenwood and Talbot and Finch with power to add to their number; that the sub-committee for all purposes in connection with the obtaining of funds for the proposed Sanatorium; to receive monies, to deal with any monies received, and to report as to site; to call for plans, to invite tenders and select plan and tenders. The Mayor moved and Mr. Hadfield seconded "That the executive shall call the general committee together at such times as they shall consider necessary; that a sub-committee be appointed to arrange for a public meeting at which addresses would be given by medical men and others to arrange for the canvassing and collection of subscriptions in the district; that the committee henceforth assume the responsibility in respect of Nurse Maude's camp." Dr. Finch was authorised to ascertain if the Ashburton and South Canterbury Hospital Districts were desirous of joining in the movement.

The executive committee met at the City Council Chambers on the 21st July when Mr. H. J. Bedrick was appointed chairman and Mr. Alfred Evans Secretary. A site was advertised for and all offers were to be in by the 8th August.

A sub-committee met on the 31st July - Drs. C. Norton Anderson, Finch, Jennings and Greenwood, to discuss the selection of an architect and to prepare details necessary to submit to him with a view of setting out a design for a Sanatorium. Properties were inspected, a report and plans were discussed, and authority given to canvass for subscriptions.

The North Canterbury Hospital Board resolved that in August upon the British Medical Association erecting and equipping an up-to-date Sanatorium and handing it over free of debt to the Board, it would take over and maintain same. It was resolved to invite South Canterbury representatives and members of the Sanatorium committee to meet the Board. A meeting was called for 30th August when

representatives of the Medical Association, the Sanatorium Committee, and Dr. Finch and Mr. Craigie of Timaru, attended to discuss the question of the proposed Sanatorium being for the whole of the Canterbury province. It was moved and carried that the South Canterbury and Ashburton Boards be admitted upon contributing towards the maintenance of the consumptive hospital on the same basis as the North Canterbury Hospital district cases, by being taxed at the same rate on the capital value of each district. (In October, 1905, the South Canterbury Hospital Board wrote asking that no further action be taken as regards their position.)

Sanatorium, contd.

The Sanatorium Committee Executive met on 13th September and letters were dealt with from the various local authorities - some in support of the scheme, some in sympathy with the cause only. Offers of land were received from private individuals. The Chairman stated the position of negotiations with Mr. F. Crocroft Wilson regarding a gift of a site. A resolution submitted by Dr. S. Jennings was carried - "That if the site on the Port Hills which the Executive has hopes of obtaining by an offer from Mr. Wilson prove suitable for the erection of a Sanatorium, when such site be definitely offered it be accepted."

The North Canterbury Hospital Board received a resolution emanating from the Timaru local Medical Association asking the Board to defer taking action as regards South Canterbury. It was decided to delay consideration of the question of amalgamation in view of the altered circumstances. The Executive Committee met on the 25th October with Mr. H. J. Beswick in the chair, the Mayor of Christchurch, Drs. C. H. Anderson, Finch, Talbot, Jennings and Greenwood, Messrs. Adamson, Horrell, Pearce and H. R. Smith, honorary secretary. Mr. Alfred Evans was appointed secretary at £100 per annum, and Mr. S. Hurst Seager, architect.

At a meeting of the Executive Committee on 20th November held in the City Council Chambers, a letter was received from Mr. H. Cotterill offering on behalf of the trustees of the Cashmere Estate, twelve acres of land for the Sanatorium. This offer was referred to the Sites Committee to meet the Trustees on the ground with a view of adjusting the boundaries, and with power to accept. The Sites Committee was also asked to negotiate for a water-supply. The architect was authorised to prepare plans and estimates for submission to the Plans Committee. The Honorary Treasurer stated that contributions paid or promised to date amounted to £2,166, and that the credit balance at the bank was £523.

Nurse Maude brought before the committee the necessity of the camp being recognised under the minutes passed at the general meeting on the 16th July. As sufficient funds existed for carrying on the work for another two months, the matter was allowed to stand over accordingly.

1905.

Correspondence was received in December from Mr. H. Cotterill at a meeting of the Executive Committee offering the land on the Cashmere site on behalf of the Wilson Estate. It was resolved that the very handsome offer be accepted with thanks and also the munificent subscription from Mrs. Townsend of £1,000. The Secretary reported that he had visited some country districts and had obtained £341 from Amuri and promises from other counties. A Ladies' Committee had met and an active canvass was organised to collect subscriptions.

1906.

It was formally moved on 24th January that the North Canterbury Hospital Board be asked to confirm its decision to take over the Sanatorium when completed, and it was pointed out that in as much as the Executive was not a public body within the meaning of the Act, it would be necessary to arrange with the Board to claim the subsidy. The Board was asked to keep separate accounts and honour the cheques of the committee. It was decided to approach the Colonial Secretary with regard to a subsidy for the land.

Sanatorium, contd.

The Trustees of the Wilson Estate approved of altered plans - a road to be made and dedicated in exchange for the old road, and when the Trustees required it, the Hospital Board was to fence in both sides of the road, and keep the fences in repair for all time, also to put substantial gates on the public road when required. Correspondence was received from the Heathcote Road Board with reference to the exchange of roads as required by the Wilson Estate. As it was anticipated that legal formalities would take some months to complete, arrangements were made with the Trustees to allow the road to be proceeded with. A permit to put down a trial well was obtained but it failed to get water near the Heathcote river. A section in Fisherton was inspected and the Architect felt satisfied that water would be found. The Fisherton Land Company advised that they did not intend subdividing the lower portion of the Estate at this date. No reply was received up to March, 1906, from the Hon. Minister (Sir Joseph Ward) re subsidy on the land. Further with regard to the road question, it had been referred to the Commissioner for Lands for report.

1906.

In March, the North Canterbury Hospital Board was again approached with regard to taking over the management and control of the Nurse Maude camp from 1st April as a temporary measure. The deputation consisted of Mr. H. J. Beswick (Chairman, Sanatorium Committee) Dr. B. Jennings and Mr. H. R. Smith (Town Clerk, Christchurch). No more patients were to be received into the camp from outside the North Canterbury district. £25 was voted for the upkeep of the camp and a further £25 if needed.

The Board could not see its way to take over the management and control of the camp. Owing to a breakdown in health, Nurse Maude resigned her seat on the Executive. Mr. T. Maude asked for funds to carry on the camp, and on the motion of Dr. Talbot, seconded by the Mayor of Christchurch, £50 was voted by the Executive Council, but the Government had sent £150 for the camp, this money was not required. When Nurse Maude's state of health improved, she was asked to take a seat on the committee, but as her work fully occupied her time, she had to decline the offer. Her sympathy was as deep as ever in the cause of the Sanatorium.

The Sanatorium Committee handed the North Canterbury Hospital Board their funds in hand to be held in trust solely for appropriation towards the building fund. The Auditor-General notified that subsidy would be available on that condition. Messrs. Beswick and Harris forwarded to the Board a draft conveyance of the site, which contained certain clauses by which the said site might be used in event of the sanatorium not being built - viz. for a deaf and dumb institution, or a children's hospital; it was resolved that the trustees of the donor of the site be asked if the following addition could be made:- "or for general hospital purposes" - in either case signature of the draft was authorized.

Sanatorium, contd.1907.

A communication was received from the South Canterbury Hospital Board that it would be necessary to amend the Public Health Amendment Act to enable the union of Hospital Boards to be legally carried out. As there was no question that the Act was quite inoperative a deputation waited on the Minister (Mr. Fowlds) to place the situation before him, and received assurance that at the next session the Government would have the necessary clauses inserted to enable the amalgamation of different districts to be made operative.

A meeting of delegates from North and South Canterbury Hospital Boards with the Executive Committee took place in February, 1907, when it was agreed to take over from the Provincial Committee the proposed Sanatorium on the Port Hills, and pending the necessary legislation, to go on with the building of the Institution, and that the South Canterbury and Ashburton Boards together with the North Canterbury Hospital Board send representatives to act with the Executive Committee to assist in carrying out the work.

The General Committee accepted the tender of Mr. Jas. Greig of £9,566 for the administration block, including main buildings, laundry, nurses' quarters and men's quarters. Tenders were accepted on condition that the men's quarters (£298) might be omitted if so desired. It was decided that the Sanatorium receive the name of the "Canterbury Sanatorium for Consumptives", Port Hills.

The foundation stone of the Canterbury Sanatorium for Consumptives was laid on the 20th March, 1907, by the Hon. W. Hall-Jones, acting Premier. The site selected was on the slope of the Cashmere Hills, situated about three miles from Cathedral Square and $\frac{1}{2}$ mile from the Trway terminus at the corner of Colombo Street and Dyer's Pass Road. From Colombo Street the road to the Sanatorium is at the foot of the hills and follows the Heathcote river for a short distance. The plateau on which the building was erected covers an area of approximately two acres and is two hundred and twenty feet above sea level. The General Committee which had taken the erection of the Sanatorium in hand and the Local Bodies and Associations interested in the project were fully represented. The community had made a generous response to an appeal for funds and approximately £13,000 was contributed. Under the foundation stone is a bottle containing newspapers giving the list of contributions to the fund and plans prepared by Messrs. Hurst Seager, Wood and Munnings, architects, under the direction of the Executive Committee. The document is signed by the Chairman of the General Committee and the Executive and members of the Executive. Leading citizens had given very large sums of money and it was to Nurse Maude that they were indebted for the initiation of the scheme. She had been a great factor in the work to which the citizens had contributed. People from a distance had looked upon her work of love and unselfishness, and had felt respect and admiration for her and for the work she carried on. The British Medical Association took an important part in the

Sanatorium. contd.

undertaking. Nurse Maude, in returning thanks at the ceremony, named two of the wards of the building - the west ward to be called the "Wilson" ward and the east ward the "Moore" ward.

1907.

Mr. H. J. Beswick, Chairman of the Executive, was asked in July to visit Wellington as soon as the Bill was ready to place it before the Minister, and the question also of subsidy on land, and further to secure the best possible financial arrangements whereby the Executive be relieved of personal responsibility for orders sent forward pending the legislation under which the Hospital Boards might raise the necessary funds to equip the Sanatorium and carry on the work.

The gift of land for a building site under the Hospital and Charitable Aid Act, 1885, and Amended Act, 1886, would carry a subsidy of 24/- in the £. The Minister-in-charge of the Department in 1907 raised objection to paying subsidy on an estimated value. He considered the Act provided only for subsidies on monetary contributions. Should the subsidy not be forthcoming, the Executive Committee would be further delayed in carrying out its work for the want of funds. The extremely awkward position in which the Executive Council was placed seemed to lead either to the scheme being abandoned till legislation was passed, or the money could be advanced by the Government, or else on completion of the contracts the building would be completed but would have to remain unequipped. The Committee accorded its thanks to the Matron of the Christchurch Hospital for preparing lists of requirements for furnishing the Sanatorium. The Plans Committee was authorised to call for tenders for cutlery and china to be ordered direct from England. A hearty vote of thanks was passed to Mr. Cockayne and Mr. T. W. Adams for their assistance in laying out the grounds of the Sanatorium, and for the generous gift of ornamental shrubs from the latter.

The expenditure incurred by December, 1907 was as follows:-

Greig's Contract		£9,566. 0. 0
Grown Iron Works Company		
Waterpipes	£149. 10. 0	
Pump and Oil Engine	91. 0. 0	
Waterpipes etc.		
Mechanic's time	15. 10. 3	
" "	17. 15. 5	
" "	51. 10. 6	
Extras		325. 6. 2
J.W. Tant, sinking well		28. 4. 0
Excavation, C. O'Malley		484. 14. 3
Contract, Est., Jas. R. Jack		475. 3. 0
Supply Rubble for Wall, J. Lukies		81. 15. 0
Fencing, A. Perham (Estimated)		100. 0. 0
Sinking Well, W. Rennett		7. 15. 10
Disinfecter		186. 0. 0
Roofing Tiles		300. 0. 0
Planting and Labour		150. 0. 0
Gas		260. 0. 0
Road Metal		30. 0. 0
Architect's fees		563. 6. 6
Clerk of Works Services		
Secretary's Salary and Sundries		160. 0. 0
Additional estimated expenditure:-		
Shelters		1,500. 0. 0
Carried forward		£14,178. 4. 9

Sanatorium, contd.

	Brought Forward	£14,178. 4. 9
Men's Quarters		200. 0. 0
Laundry Machinery		555. 10. 0
Drainage		50. 0. 0
Entrance Gates, etc.		100. 0. 0
Telephones, etc.		100. 0. 0
		<hr/>
		£15,223. 14. 9
		<hr/>

1908.

A conference of delegates from the South Canterbury, Ashburton and North Canterbury Hospital Boards was held in February to discuss the matter of management of the Sanatorium then in course of erection; South Canterbury being represented by the Mayor of Timaru with Messrs. Talbot and Maslin; Ashburton by the Mayor, and North Canterbury by the Chairman, Messrs. Dunlop, Scott, F. Horrell, Winney and Allison, the Chief Health Officer (Dr. Mason) and Dr. Finch were present. It was moved by Mr. Allison that there be a recommendation from the conference to the Hospital Boards of North Canterbury, Ashburton and South Canterbury to agree under the authorities conferred by Section 2 of the Public Health Amendment Act, 1907, to combine, to acquire, establish and maintain the Consumption Sanatorium, such agreement to provide that contributions already made by public subscriptions towards the erection of the Sanatorium be deemed to be contributions from the Boards of the districts from which contributions were received.

The Hospital Board received only £864 subsidy on the land instead of the £2,000 voted, which meant a shortage in the finance of £4,136. The position of the Executive was discussed with a view to deciding on its future action regarding the arrangement of finance. It seemed useless hoping to carry out the work in hand and there was objection to appealing to the public for any further assistance, particularly as the Government had not kept faith.

The Board was notified by the South Canterbury Hospital Board of their resolution declining to be a party to the establishment and equipment of the Consumptive Sanatorium at Cashmere Hills. Much surprise had been expressed by the Executive Committee at the action of the Timaru Board. Owing to the failure of the scheme for amalgamation with South Canterbury and Ashburton, the Executive Committee was left with the alternative of appealing to the public or asking the Hospital Board to take the building over with all its liabilities, and to complete it.

A letter was received in July from Nurse Maude advising that her camp would shortly be closed and enquiring as to the opening of the Sanatorium at Cashmere Hills. The committee informed her that temporary arrangements would be made for six or seven patients under her care.

In October, 1908, Mr. H. J. Beswick, who was Chairman of the Executive Sanatorium Committee, reminded the Hospital Board regarding the naming of beds after families who had donated sums of £100 and upwards to the institution, and in order to keep faith with the Government, he asked the Board to confirm the arrangement. The Board resolved

Sanatorium, contd.

that no objection would be taken to the Sanatorium Committee naming the wards and beds as proposed at the laying of the foundation stone. The south-west ward was named after the Cracroft Wilson family who donated the site, whilst the north-east ward was named the "Moore" ward after the late G. H. Moore of Glenmark. (The Munificent gift of £1,000 donated by Mrs. Townend was intended to perpetuate the memory of her father, Mr. G. H. Moore.) The following are the names of the contributors:-

W. H. Clark, Esq.	£1,000
Mrs. Townend	£1,000
The Late Hon. J. T. Peacock	£500
" " John Ballantyne	100 gns.
" " Michaelis Hallenstein	£100
A. B. G. Rhodes, Esq.	£100
Colonel Heaton Rhodes	£100
Mrs. Heaton Rhodes	£100
A. Macfarlane, Esq.	£100
Mrs. A. J. White	£100

1909.

Dr. Finch interviewed the Board and desired information as to the position with regard to taking over the Sanatorium. The Board received the balance-sheet, and the Sanatorium for Consumptives was formally taken over by the North Canterbury Hospital Board from the Provincial Committee on the 4th February, 1909. Lunch was provided at the building, at which members of the Hospital Board attended together with representatives of the original Provisional Committee, the District Health Officer and others. A sub-committee was appointed, and an inspection was made of the Sanatorium. All the works requiring the supervision of an architect were left in the hands of Messrs. Collins and Harman. The estimate of the cost to meet liabilities, completion of works, equipment and maintenance was £8,772.

The City Surveyor was instructed by the Christchurch City Council to report on connecting the Sanatorium service with the City high pressure water-works, and permission was given by the Heathcote County to lay the necessary pipes.

All plans and specifications referring to the Sanatorium were handed over by Mrs. Hurst Seager in June, 1909. Messrs. Collins and Harman were asked to prepare plans and specifications for shelters for men and women, and instructions were also given for excavating the terraces. The planting of a belt of trees on the drive to the building was left to Mr. John Ingram, to be carried out by Messrs. Hain and Son.

Arrangements were made with regard to furnishings required for the doctor's and matron's quarters, nurses' home and domestic staff quarters. On the suggestion of the matron, Christchurch Hospital, it was arranged to commence with a nursing staff of six nurses, for whom temporary accommodation was made. Miss Annie Rochfort was appointed sister-in-charge in December.

Sanatorium, contd.1910.

It was decided that the name of the Institution be "The North Canterbury Sanatorium for Consumptives." The title of the Resident Medical Officer was substituted for that of Medical Superintendent, three months' notice on either side to terminate his engagement. The Sanatorium was opened for the reception of patients on the 1st February, 1910.

Dr. G. J. Blackmore, M.D. Edin., D.P.H., Oxford, a most able man, took office at the Sanatorium in March. He was with Dr. R. W. Phillip, leading authority in Scotland on consumption, and was well known to Dr. John Stevenson and Dr. Terras Bell of the Christchurch Hospital.

Dr. Blackmore and Miss Rochfort attended a meeting at which it was decided to recommend the new Board to erect a subway leading from the administration block to the men's shelters. Dr. Blackmore pointed out that insufficient quarters had been provided in the building for the resident medical officer. He had only two very small rooms and a still smaller room as a dressing-room, all in the administration block. He also stated that the buildings were unsuitable for a sanatorium and expensive to maintain. In Dr. Blackmore's opinion the institution should have been located on the foothills of the Oxford district, 30 to 40 miles back from the city. The matter was left for consideration of the new Board.

The first patients were admitted to the Sanatorium on the 11th March, being seven men who had been patients in the Christchurch Hospital, and since then there were nine admissions, making eleven men and five women. There were thirty-one beds in the shelters, leaving accommodation for fifteen more patients.

By virtue of the Hospital and Charitable Institutions Act of 1909 the North Canterbury Hospital Board and the Ashburton and North Canterbury Hospital and Charitable Aid Boards, with all similar governing bodies, went out of existence on 31st March, 1910. On 16th March, 1910, a new Board was elected under the title of the North Canterbury Hospital and Charitable Aid Board, which took over the functions of the two previous bodies with the exception that Ashburton Borough and County seceded from the Charitable Aid Board.

North Canterbury Sanatorium for Consumptives, contd.1910.

The Statutory first meeting of the North Canterbury Hospital and Charitable Aid Board constituted under the provisions of the Act of 1909, was held at the Charitable Aid Office, Armagh Street, Christchurch, on 1st April, 1910. The members present were:- Messrs. C. Allison, H. B. Sorenson, W. W. Tanner, Rev. W. L. Cross, Messames Cunningham, Eason and J. H. Wilson, representing the City of Christchurch; Messrs. T. D. Og, J. D. Hall, J. Henderson, D. McMillan, W. P. Spencer, J. Wolfe, the Counties of Selwyn, Waimairi and Tawaia, Messrs. O. P. Clothier, F. Horrell, R. Moore, the Waipara County, the Road and Town Boards in Ashley County and the Boroughs of Rangiora and Kaiapoi; Mr. J. H. Murray, the Counties of Akaroa, Mt. Herbert and Wairua and the Borough of Akaroa; Mr. J. H. Davison, the County of Asuri; Mr. E. C. Palmer, the Counties of Cheviot and Kaitioura; Mr. C. Cook, the Boroughs of Lyttelton, Sumner, Woolston and New Brighton.

A tour of inspection by the newly constituted Board set out in a four-in-hand drag to visit the institutions which had come under its undivided control. The Sanatorium appeared to be an attractive miniature settlement with its administration block of buildings and the red-tiled shelters, but there were faults to find - owing to the exposed position to all winds, difficulty was experienced in keeping the lightly built shelters on their foundations; the water supply which was pumped by a windmill was inadequate, and the drainage system was a source of grave concern.

As already mentioned Miss Rochfort was in charge before the Sanatorium was opened, and most of the work of preparation for the reception of patients fell on her shoulders. Her work was of the highest order, and her departure on the 31st August, 1910 was much regretted both by staff and patients. Sister S. Kitto was appointed sister-in-charge, and resigned in March, 1911. Miss K. Benjamin was then appointed and held the position of matron for eleven years. Six nurses were employed, one fully certificated nurse remained for six months, the others in course of training at Christchurch Hospital changed every three months. The practice of sending nurses from the Christchurch Hospital ceased in 1913.

1912.

The bye-laws and regulations of the Sanatorium as submitted by Dr. Blackmore were adopted by the Board in November, 1912.

Single shelters for men were completed, and the women's shelters were moved back into line in preparation for excavating for another terrace. The purchase of more land, excavations and more shelters were the principal features to allow for twenty-one beds for women, twenty-four shelter beds for men and four observation beds. The total number of beds was forty-nine at the end of March, 1913.

1913.

More accommodation was required to cope with the number of applications for admission; as fast as accommodation was increased so did the number of applications multiply. People from other parts of New Zealand sought admission, as did immigrants. Preference was given to local cases and the question of immigrants was dealt with by conference. The law did not go far enough to prevent persons suffering from tuberculosis landing in New Zealand.

Sanitorium.

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Preparing section for Dr's. residence - 1913.



Women's
Shelters

Administration
Block

Men's
shelters

Dr's.
House

Coronation
Hospital.



1918.

North Canterbury Sanatorium for Consumptives, contd.

Two more terraces were prepared for five double shelters for women, and three single shelters for men. The Doctor's residence was built and in occupancy in 1913.

1913.

Dr. F. H. Lester was appointed Assistant Medical Officer, but resigned early in 1915 owing to ill health, and Dr. William Watt took his place. New arrangements were made with regard to staffing, and the training of nurses in tuberculosis was commenced. The first examination was held in 1914 with very satisfactory results.

New land was purchased in 1915, fencing and road making were carried out, and cultivation for a new orchard was commenced. The new orchard was designed to impart instruction to patients in fruit culture. Notwithstanding the very adverse season, the value of the fruit and vegetables produced was £256 at current market rates. Sufficient potatoes were grown to supply the wants of the Tuberculosis and other Institutions. Pines planted round the new ground for shelter purposes took well, but were almost entirely destroyed by rabbits. Of the 1,300 trees planted, only 30 or 40 survived.

Miss K. Benjamin left for war service, and Miss Edwards acted as Matron till March, 1919, when Miss Benjamin returned. Other nurses were drawn for military service including Sisters Sisley, Trumble and Faulkner from the Sanatorium staff. Dr. I. C. Macintyre commenced as Assistant Medical Officer in June, 1916.

1916.

More shelters were erected, and outside Hospital Boards were allowed to build shelters at Cashmere. The Grey, Westland, and Wairau Boards took advantage; they had nine single shelters between them; besides these, six new shelters were for the Board's own use. A pavilion containing eight beds for young children was opened. These additions brought the total number of beds to 84 at the Sanatorium. The valuations of buildings at the Sanatorium, including administration block and Nurses' Home was given in March, 1916 as £40,000 and shelters £3,000. Fifty-six acres of land were purchased to allow for future extensions and provide a site for the Fresh Air Home. The Board purchased a stone-crusher in 1916, and extensive quarrying was undertaken. Valuable deposits of stone were available, and sufficient for building purposes and road formation. An extension to the Nurses' Home was made, the lower storey being opened in April, 1917.

1918.

An epidemic of influenza broke out in November, 1918 at the time of the Armistice celebrations. The first patients were members of the nursing and domestic staffs who contracted the disease. When it spread to the patients, outside assistance was readily offered; V.A.D.s and women helpers undertook work both as regards nursing and domestic duties to help carry on the routine of the Institutions.

1919.

There was great difficulty in meeting the demand for more beds on the women's side of the Institution in 1919. Every bed was occupied and applicants were awaiting admission. All the terraces were full and it was almost impossible to see how more buildings could be put in or extended. The provision of more accommodation entailed the filling in of a deep gully and the building of an expensive retaining wall.

North Canterbury Sanatorium for Consumptives, contd.

As an experiment, a piece of ground above the children's pavilion was used for growing oranges, lemons, guavas, loquats and figs. The trees came through the first winter well, and later gum and wattle trees were planted on the hillside above the Sanatorium. Patients at this time were attending the demonstrations given in fruit culture organised by the Defence Department for the Military Sanatorium patients. The horse paddock was brought into use for the establishment of a poultry farm which served its purpose for six years as a vocational service, but proved to be a costly experiment.

1920.

Dr. Macintyre resigned in 1920 to join the Christchurch Hospital staff to obtain additional general medical and surgical experience. He also visited Great Britain and Europe, and after an interval of two years was re-appointed as Dr. Blackmore's assistant following on Dr. Kidd's resignation to accept the position of Medical Superintendent of the new Waipiata Sanatorium in Central Otago, after three years' service as assistant to Dr. Blackmore. Dr. Blackmore had one year's leave of absence in 1923-1924.

The Red Cross made an offer in 1920 to contribute towards an X-ray apparatus and accommodation for same at the Tuberculosis Institutions. The equipment was installed in 1923, and the cost was partially met by the Red Cross Society's donation of £512.

1922.

The Military Sanatorium was taken over by the Hospital Board in 1922, and for one month it was under Dr. Blackmore who declined to accept continuance of his control. He assured the Committee that he was physically unable to take charge of another 100 patients and satisfactorily carry out his duties as Medical Director of the Tuberculosis Institutions. Dr. W. Aitken was appointed with Dr. Pemberton as Assistant and Miss Trumble Matron. The Military Sanatorium was run as a separate institution.

1924.

Miss Hetherington was appointed Matron of the Sanatorium on Miss Benjamin's retirement in 1924.

The male patients at the Sanatorium were eventually transferred from the Middle Sanatorium to the Upper to make room for more women patients. As the number of inmates in the Upper Sanatorium was gradually decreasing, the Board suggested that a number of patients be returned to their own districts, and those who were likely to benefit by Sanatorium treatment were transferred to Pukeora.

The first storey extension to the Nurses' Home was opened, and in 1931 a further extension brought the accommodation to the present capacity.

1925.

In 1925 donations were received towards the cinematograph machine which was purchased through the manager of the Liberth Picture Theatre in Christchurch. In the years past, appeals for funds were made and an anonymous gift of £100 was accepted for recreation purposes. Two pianos were purchased largely owing to the efforts of the Licensed Victuallers, Mrs. Holmes, The Spreydon Tennis and Debating Clubs and others.

North Canterbury Sanatorium for Consumptives, contd.

1927. Steps were taken in 1927 to bring all the institutions at Cashmere under one management. The first step was to do away with the old agreement made with the Defence Department whereby the military patients were not called upon to give any service whatever in the institution. The idea was that no special privilege should be extended and that all patients connected with the institutions should be treated alike and perform certain light duties. This was brought into effect satisfactorily.

1928. More accommodation was required for advanced cases of tuberculosis in 1928, and the Board made a request for a special grant. The Department was much concerned at the increased cost generally of Hospital Boards, and the Minister was asked to appoint a commission of enquiry to go into the matter of prevention and treatment of pulmonary tuberculosis in New Zealand; whether the sanatoria, hospitals, and other institutions were being used to the best advantage, what additional institutions, if any, were required; whether sufficient co-ordination of all the Agencies dealing with tuberculosis existed etc. Members of Parliament were addressed by Dr. Blackmore on the subject. The Board's recommendations in connection with the enquiry were forwarded to the Prime Minister for consideration. In October, notification was received from Wellington that a grant of £200 was passed in the supplementary estimates towards the erection of accommodation for advanced cases of tuberculosis. (See Coronation Hospital).

A dental clinic was opened in August, 1928, and arrangements were made for the dental surgeon of the Christchurch Hospital to draw up a schedule and to visit the institution when required.

1929. Dr. Blackmore resigned in December and Dr. I. C. Macintyre was appointed Medical Director. In 1929 Dr. J. E. K. Brown was appointed Junior Medical Officer, and Miss Trumble Matron of the Institutions, namely:- the Upper Sanatorium, Middle Sanatorium, Coronation Hospital, and Fresh Air Home. The staffs were re-organised and Dr. W. Aitken, who was in charge of the Upper (or Military) Sanatorium resigned.

1930. The Board endeavoured to bring into effect a group agreement in 1915 which was to a certain extent ineffective, but the Grey, Wairau and Westland Boards agreed to send their patients to the Sanatorium at Cashmere and to pay the actual cost of maintenance. This agreement was continued till 1930 when a new agreement was entered into with the Nelson, Wairau and Picton, Grey, Buller, Inangahua and Westland Boards. From time to time renewals of the agreement have been entered into. It was arranged that the Medical Director visit the affiliated Boards every three months.

1931. The valuation of the buildings in 1931 was estimated as follows:-

Sanatorium	£33,810
Coronation Hospital	£27,850
Upper Sanatorium	£23,200.

These were amalgamated and brought under the title of "Cashmere Sanatorium". The patients from the Upper were transferred to the Middle Sanatorium and Coronation Hospital; the building was closed and later sold by

North Canterbury Sanatorium for Consumptives, contd.

auction. A considerable amount of equipment was distributed to other institutions, and the remainder taken into stock.

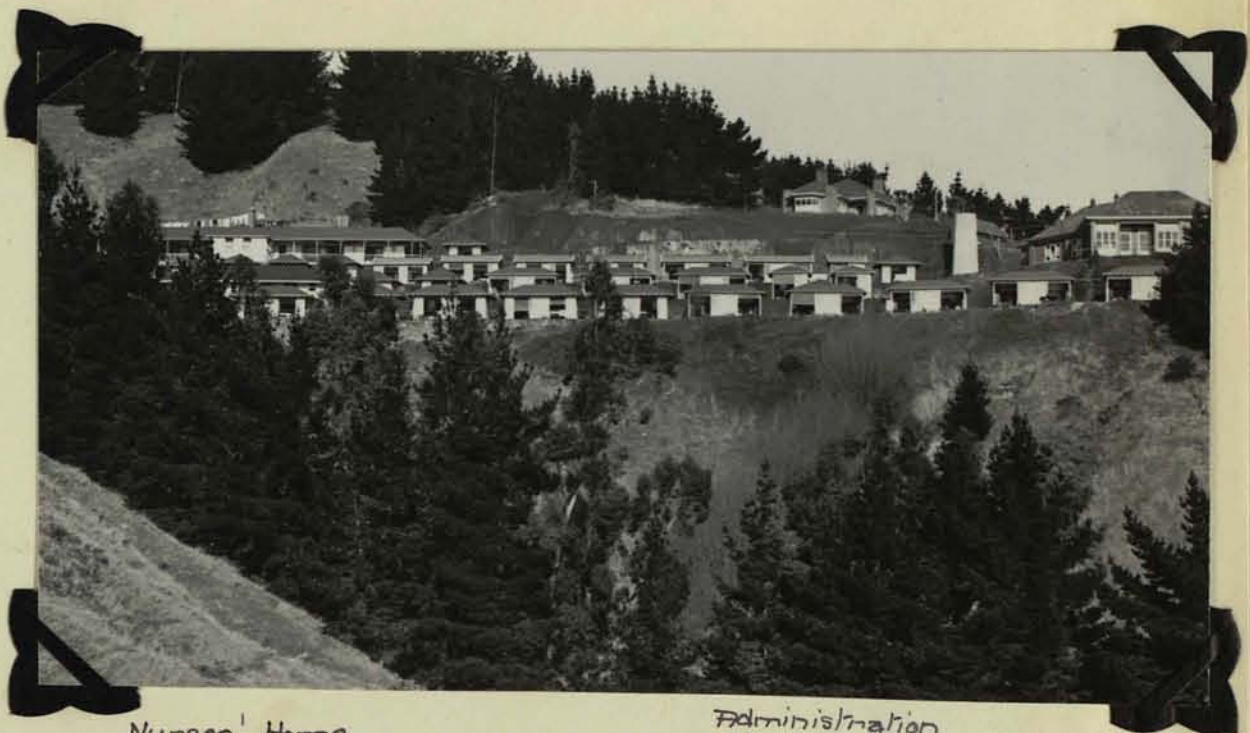
1932. A Patients' Welfare Guild was organised by private people to see that the equipment of individual patients was maintained. The Sanatorium Service Society and other associations contributed largely to the benefit and entertainment of the patients.

1935. Miss Trumble, who had held various positions on the staff, resigned from the Board's service in June, 1935. Miss J. E. McLeod acted temporarily as Matron till Miss A. C. Griffin was appointed in September.

1938. Dr. McIntyre had extended leave in 1938, and during his absence, Dr. Pemberton was placed in charge of the Institutions.

1939. By public subscriptions, donations by the patients, and a contribution from the Board, a new picture machine was procured, and the first set of talking pictures was shown in May. Regular donations have been received in the course of years from the Hyman Marks estate, the Ada Smith Trust, the St. Augustine's Lodge and others.

1941. On the same site and for the same purpose as in 1919, a new Sanatorium of 32 beds was built to deal mainly with soldiers returning from the war zone.



Nurses' Home

Men's shelters

Administration Block

Dining room.



Patients' Dining Room.

men's shelters.



King George V Coronation Memorial Hospital.



Aerial view
of
Tuberculosis Institutions.

KING GEORGE V CORONATION MEMORIALHOSPITAL.

1911.

On 10th May, 1911, His Worship the Mayor of Christchurch, T. E. Taylor, Esq. called together a meeting of citizens of Christchurch and surrounding districts to consider the best means of celebrating the Coronation of His Most Gracious Majesty, King George V. At a meeting held on the 22nd June, it was decided that a permanent memorial in the form of a Home or Hospital for persons suffering from advanced consumption should be established.

A Coronation Memorial Executive Committee was formed consisting of:-

His Worship the Mayor,
Christchurch.

The Hon. C. Louison

The Hon. H. F. Wigman

Dr. Thacker

Dr. Chilton

Messrs. J. A. Frostick

W. Miller

J. J. Deugall

H. G. Ell

S. H. Seager

W. R. Smith

Jas. Jamieson

C. Allison

F. Vincent

Geo. Scott

E. W. Ralph

T. H. Davy

C. H. A. T. Opie

A. S. Taylor

Charles Bean

Geo. Harper

H. J. Deswick

E. Norton.

His Worship the Mayor, Woolston

His Worship the Mayor, Spreydon

His Worship the Mayor, Sumner

The Mayoress (Mrs. T. E. Taylor)

Messdames Burgoyne

W. H. Cooper

J. J. Deugall

T. Gapes

A. D. Hart

H. Holland

W. Hunter

W. Miller

C. D. Morris

E. Smith

W. R. Smith

H. B. Sorensen

A. Williams

Mr. Henry Holland was elected Chairman and Mr. H. R. Smith (Town Clerk of Christchurch) was appointed Honorary Treasurer to the fund.

Dr. G. J. Blackmore emphasized the need for a Home for patients who had tuberculosis in an advanced form. The Sanatorium was ill devised for economical and efficient working, and the site was by no means suitable. The expense of removal (to Oxford) and transferring the Sanatorium was beyond the Board's financial means. A Home would be part of a comprehensive scheme to eradicate consumption and would be of untold benefit to the public generally.

Nurse Haude, who for twenty years or more, had devoted her life to the relief of suffering humanity, gave some impressions gained from personal contact with the patients in their homes. She had tried for years to cope with consumption in a small way and was more than ever anxious to get at the root of the evil instead of filling the institution with patients. She told of revolting facts which had to be faced, and pleaded for help for the many who were suffering and for the liberal giving of money "as a thank offering for one's own good health."

King George V Coronation Memorial Hospital, contd.1912.

Subscriptions were received from all classes of the community until the sum of approximately £4,453 became available. This amount was placed at the disposal of the North Canterbury Hospital and Charitable Aid Board and with the Government subsidy - a further sum of £5,037 - a total of £9,234 was reached. The gift was handed over unconditionally.

The General Committee recognised that in the selection of a site and preparation of plans, the Hospital authorities must have full control as the final responsibility rested with them. Plans were drawn up by Messrs. Collins and Hawman with the advice of Dr. G. J. Blackmore, the Medical Superintendent of the Sanatorium. In October, the Board was advised by the Inspector-General to accept the lowest tender of £10,450 including extras; the successful tenderer was Mr. J. Taylor. Considerable excavating had to be made for the building - designed in brick with a tiled roof. There was accommodation for forty-four patients with rooms for staff and Junior House Surgeon.

1913.

The foundation stone of the King George V. Coronation Hospital was laid on the 28th January, 1913, by His Excellency the Governor of the Dominion, the Earl of Liverpool. On His Majesty's birthday, 3rd June, 1914, the Hon. Sir R. N. Rhodes officially opened the Hospital. It was primarily established for advanced cases of tuberculosis, most of the admissions being placed there for the purpose of observation. Miss M. Urquhart was appointed Sister-in-charge, and Miss Trumble followed till she left for active service in 1915 when Miss Webster filled the vacancy. Eighteen patients were transferred from the Christchurch Hospital, and the forty-three beds were soon occupied.

1917.

It was not long before demands were made for extending the accommodation, especially soldier patients returning from active service. Verandah and balcony extensions were carried out to accommodate twelve more patients in 1917, and a cottage was erected for the use of the Sister-in-charge and another for the Medical Officer.

1920.

Twelve more beds were available and there seemed no limit to the number of beds required. People from other parts of New Zealand were tending to find their way to Christchurch and Dunedin, the only two Boards dealing with consumption. In the North Island only a few beds were available for advanced cases. Since the Coronation Hospital was built, twenty-four beds had been added.

1923.

A recreation room built on the terrace and west of the Institution was brought into use, also the extensions to the Nurses' Home, which gave extra accommodation for the staff and to ensure the regular fortnightly day off duty.

The Red Cross Society promised a liberal donation in 1921 towards an X-ray plant, but the matter was held over till 1923 when a cheque of £512 was handed to the Board as the Society's contribution towards a building and apparatus.

King George V Coronation Memorial Hospital, contd.1927.

Some Men patients were transferred from the Coronation Hospital to the Upper Sanatorium to make room for more women. Owing to the lack of accommodation and the conditions prevailing in the homes of the patients, women were admitted temporarily to the Infectious Diseases Hospital, Burwood. By the end of 1928, 797 patients had been admitted to the institution.

1929.

More room was required for advanced cases. A new storey for 37 beds for patients, extensions to the maids' quarters and the porters' cottage were built. The porters had been housed in the lightly constructed shelters that originally stood in the Christchurch Hospital grounds, and were moved to the Cashmere Hills sixteen years ago.

1930.

The ground floor of the Coronation Hospital was completely renovated in readiness for the cases of bone and joint tuberculosis, thereby relieving the Christchurch Hospital of the cost of maintaining such cases. Dr. L. A. Bennett was appointed Honorary Surgeon to the Tuberculosis Institutions at this date.

1931.

Economies were practised as in all the Board's institutions, and the staff reduced to the extent that when a member of the staff left of his or her own accord, the position was not filled. Patients were transferred from the Upper Sanatorium to the Sanatorium and Coronation Hospital when the Upper Sanatorium closed. As the patients were confined to two institutions and brought under the one heading, the Board terminated the engagement of Dr. E. H. H. Taylor in 1932.

1932.

Other than the ordinary upkeep and improvements, there is little to record in connection with the Coronation Hospital from 1933 to 1939.

A tender was accepted for £2,248 and the X-ray plant for the Tuberculosis Institution was installed.

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MILITARY SANATORIUM - 1916 - 1922.

KNOWN AS THE UPPER SANATORIUM FROM 1922 - 1932.

1916.

The Board approached the Government to ascertain whether it would be advisable for it to erect a sanatorium for soldiers on the new ground attached to the Cashmere Sanatorium. The Sanatorium could be made applicable to the whole of the South Island and when the need for it ceased to exist, it could be taken over by the Board as an extension of its institutions. The Minister of Defence notified the Board that all soldier patients should be at the Te Waikato Sanatorium where additional accommodation was about to be erected. The Hon. G. W. R. Russell intimated that a proposal was under consideration for the establishment of a separate consumptive Sanatorium in the Provincial District of Canterbury. The Te Waikato Sanatorium was devoted entirely to the reception of male patients, and it was possible to arrange transport of soldiers from Cashmere to Cambridge. The patients signed a petition begging that they should not be sent north, and wished to complete their treatment under Dr. Blackmore.

1918.

The Defence Department decided to erect its own buildings where both soldiers and discharged men would be provided for entirely independent of civil requirements. Surgeon-General Henderson, Director of Medical Services, asked the North Canterbury Hospital Board for the use of land at Cashmere for a temporary sanatorium - all expenses to be borne by the Defence Department. He also asked for permission for Dr. Blackmore to give medical supervision. The medical and nursing staff would be provided by the Defence Department. The site would in no way affect the building proposals of the Board with regard to the Open Air Home for Children. Sketch plans, preliminary estimates and the best methods of securing an early completion of the work was discussed. The Board was not desirous of granting a lease of the land nor did it require any return in the form of rent, but was prepared to give occupancy to the Department of a definite area for the purpose of the treatment of soldiers suffering from tuberculosis. A temporary annexe was arranged for. The Board's surveyors were instructed in 1919 to prepare a plan showing the area of land loaned to the Defence Department.

1919.

1920.

The Military Sanatorium was built and the Board relieved of the care of soldiers. The buildings were hurriedly erected and completed within six months at the end of the War. Consideration of such essentials as the lasting quality of the buildings, economical working and administration were over-looked in order to hurry forward the completion of the institution. The Departmental Officers believed that the institution would only be required for five years for the treatment of tuberculous ex-soldiers, and with this idea in view, the buildings were erected as cheaply as possible as they were not to be permanent.

The Vocational Branch of the Defence Department established a poultry farm and commenced demonstrations in fruit culture etc. In April, Brigadier-General McGavin asked if the Board would be willing to take over the Military Sanatorium towards the end of June, and if so upon what terms. A special committee met in June with regard to the transfer of military patients. The following points were agreed upon and recommended for the Board's acceptance:-

Military Sanatorium - Upper Sanatorium, contd.

- "(1) Buildings and equipment to be handed to the Board free of cost, present transport vehicles to be regarded as equipment.
- (2) The Board to undertake the maintenance and treatment of all patients in the institutions at the time of transfer and such patients as may be sent in by the Defence Department from time to time.
- (3) The Board to maintain all buildings and equipment.
- (4) The Department to pay the Board full cost of maintenance, less any proportion of the cost applicable to such civil patients as may be admitted by the Board.
- (5) The Board's medical officer to have full control over patients.
- (6) Payments on account to be made from time to time as may be agreed.
- (7) The present staff will be available for selection, or the Department will retain the services of such till the Board is able to fill the necessary positions."

1920. An agreement was arrived at, and the North Canterbury Hospital Board took over at midnight on the 31st August, 1920. The transfer was withdrawn in September, 1920. Patients petitioned the House against the Hospital Board administration but this action was based on grave misunderstandings on their part.

1922. The Military Sanatorium was taken over by the North Canterbury Hospital Board in 1922, running as a separate institution over which Dr. Blackmore, as Medical Director of Tuberculosis Institutions, exercised no control. The Military Sanatorium was, in the future, to be known as the "Upper Sanatorium". The staff consisted of Dr. Aitken, Medical Superintendent, Dr. Pemberton, Assistant Medical officer, Miss Trumble, Matron. All medical and ordinance equipment on loan was transferred to the Board.

1923. Miss Trumble, who was appointed Matron to the Fresh Air Home in 1923, was replaced by Miss McLeod. The Board decided in July that civilian patients were to be admitted to the Upper Sanatorium, five beds to be held open for service patients.

1925. The civilian men patients were transferred to the Upper Sanatorium, and Dr. Aitken became responsible for their treatment. During the previous three years of the Board's control, the patients had all been ex-service men. Further shelters were built to leave the Middle Sanatorium available for women.

1927. Dr. H. T. Jennings was appointed Assistant Medical Officer temporarily, and resigned in August. Dr. E. H. H. Taylor filled the vacancy.

Military Sanatorium - Upper Sanatorium, contd.1929.

Dr. Macintyre was in charge from 1st March, 1929 and Dr. W. Aitken left in May. Patients were transferred to the Middle Sanatorium and Coronation Hospital.

1932.

The Upper Sanatorium, which was a temporary building erected by the Military Authorities, was abandoned in 1932. Furnishings and equipment were taken into stock or absorbed into other institutions. The building was dismantled and sold by auction. The buildings reserved were, the doctor's cottage, the nurses' home and Orderlies' cottage. The shelters were sold for removal as they stood.



Fresh Air Home. Upper Sanatorium.

Nurses' Home
Administration Block

Men's shelters

Dr's' House.
Coronation Hospital.

FRESH AIR HOME.1914.

The movement for the erection of the Fresh Air Home for children who were predisposed to tuberculosis commenced in March, 1914 when Dr. Blackmore reported that Sister Rochfort who was then in charge of the Tuberculosis Dispensary, was anxious to initiate a movement having for its object the provision of an institution for dealing with children. The Board granted her permission to take action. She called a meeting of ladies interested in philanthropic work in the city to secure their co-operation in the Dispensary work and the subject of an institution for children which met with general approval.

The following executive was appointed:-

Sister Rochfort, Bishops Julius and Grimes, Dr. Fenwick, Mesdames Fountain, Humphreys and McLennan, Misses Meadows and Stodard, Dr. J. Hight, Messrs. R. E. MacDougall, G. T. Aschman, D. Hember, J. A. Fisher, P. L. Hallenstein and H. Holland.

A provisional committee was set up, and the Mayor of Christchurch was asked to hold a meeting. A large sum of money was collected, reaching a total of £3,411. The Executive Committee asked the Board if it would take charge of the money raised and take over and maintain the Home when erected. Owing to the outbreak of war, the matter was not followed up as Government finance was then uncertain and the Minister was not disposed to grant a subsidy on so large a sum.

1915.

Mr. G. D. Greenwood of Teviotdale very generously offered to provide a site for the institution on his property north of Amberley, but, for various reasons, the Board could not accept the offer. The cost of building material and labour went up by leaps and bounds due to the war. Plans were prepared which served to meet the requirements, and the site selected was situated east of the Military Sanatorium, but in view of financial stringency, the Hon. the Minister reluctantly withheld his consent. He considered that only work of an absolute necessity should be carried out.

1919.

The consent of the Minister was given to the subsidy being paid, and authority was given by the Board to proceed with the plans. The cost again was prohibitive, and efforts were then made to obtain a modified plan, and in this, the Board was successful, and then, once again, intimation was given to the Board that the Department would prefer that the erection should be put off for at least another year.

1922.

In June, 1922 the Board was much gratified at the decision of the Minister to grant subsidy on the donations, and in September, consent was given for the erection of the building.

The Home was opened on 20th October, 1923, and placed under the guidance of Matron Trumble who was transferred from the Upper Sanatorium.

The capacity of the Home was thirty-two; 4 four-bed dormitories for boys, and 4 four-bed dormitories for girls, all opening on the verandahs. Twenty-eight children were in residence from the 16th October. The age limit was twelve years for boys and fourteen for girls.

Fresh Air Home, contd.

There were many enthusiastic workers for the campaign to raise funds for the building. The Canterbury Commercial Travellers alone contributed £839. It was Dr. Blackmore's suggestion that parts of the Home be named after the contributors and districts which had donated £100 and over. The Board agreed to inscribe a brass plate at the main entrance of the Home to indicate that the money for the building of the Home was contributed by residents of the North Canterbury Hospital District.



Fresh Air Home.



Open Air School.



OPEN AIR SCHOOL.

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1923. Consideration was given to the education of the children at the Fresh Air Home, and a room was provided in the administrative block of the Sanatorium. The Hospital Board made application to the Education Department for them to undertake the staffing of a school for the instruction of the thirty children who were all of school age.

1924. The Education Board appointed Miss Hilda Walker in February to take charge of the school subject to the regulations and gladly co-operated with the Hospital Board in the preparation of plans, and the supervision of the building of an open air school.

The Canterbury Rugby Union handed the Board a cheque for £375 in September, being the proceeds of a "Charity Day" collection allocated for the purpose of erecting a schoolroom based on the plan of a room at St. Andrew's College. As a result of the efforts of Mrs. J. C. Holmes, approximately £200 was collected through contributions from two hundred and twenty schools. Young New Zealanders, through their goodness of heart, had willingly given their pennies towards the cause. The total amount received in donations and subsidy was £1,116 and the Education Department agreed to contribute one third of the cost provided that the plans met with its approval.

1925. The building was designed by the Architect of the Canterbury Board of Education with suggestions from Dr. Blackmore, the Board's Specialist in tuberculosis. The work was carried out by the staff of the Education Board.

The school was officially opened on the 11th August, by His Excellency the Governor-General of New Zealand, Sir Charles Ferguson.

SWIMMING POOL.

1939. The swimming pool was contemplated in 1937. The North Canterbury Hospital Board provided £300, the Lord Ruffield Fund £100 and the Government contributed by subsidising labour from the men engaged on scheme 13 to the extent of £80. The Sanatorium Service Society, through Mr. P. H. Harris, found the balance of the money required. The pool was completed in 1939.

TUBERCULOSIS DISPENSARY.1912.

Dr. Blackmore explained the working of a dispensary should the North Canterbury Hospital Board undertake to establish a building and carry out his proposals. A conference was held between the Medical Superintendents of the Sanatoria, the Chief Health Officer and the Board, regarding the measures to be undertaken.

1922.

The Dispensary was established in Aruagh Street in the building formerly the offices of the Ashburton and North Canterbury Charitable Aid Board.

Dr. Blackmore interviewed the first patients in August. A Sister attended daily and visited the patients' homes as desired.

The Dispensary assists the Tuberculosis Institutions, but the work is chiefly preventative. Precautions are taken in the homes to prevent infection, and advice is given and recommendations made as regards examinations. Ex-patients of the Institutions are periodically examined at the Dispensary.

The routine of the Dispensary work progresses with little variation.

INFECTIOUS DISEASES HOSPITAL.



Diphtheria Ward.



Isolation Ward and Nurses' Home.



INFECTIOUS DISEASES HOSPITAL.

BOTTLE LAKE.

1900. In 1900 the Commissioner of Health (Dr. W. H. Symes) approached the Hospital Board to ascertain if any arrangements or proposals had been made for the medical care and nursing of possible plague cases. As the Board had not made any provision on the estimates for such a contingency, the Government was communicated with asking for a loan for the purpose. If granted, the Board would undertake to place a similar sum on the estimates for the next year. The Board proposed to utilize the infectious diseases ward at the Christchurch Hospital in the meantime, if a case of plague should occur. Although the Board had the power to erect buildings, it would not compel the local contributing bodies to contribute to the erection of such buildings (Southland Contributors versus Southland Hospital and Charitable Aid Board).

It appears that the Bottle Lake Hospital was established on the reserve vested in the City Council, and known as the Bottle Lake Cemetery Reserve (in pursuance of the provision of the Public Health Act, 1900, pt. 41, Sec. 37). The local authorities left the selection of the site to Dr. Mason, Chief Health Officer for the Colony. The Hospital Board agreed to purchase from the City Council the freehold portion, about twenty acres at £4.10.0 per acre, and the lease of the reserve at £25 per annum. As soon as the purchase and lease were completed, the City Council was authorized to hand over the management of the Infectious Diseases Hospital to the North Canterbury Hospital Board on such terms as were approved of by the Health Department. Dr. Mason pointed out that the onus of providing for infectious cases was cast upon the local authorities, but in fairness to them after providing the land, the Board should take over the management and allow the Health Department to have some measure of control as it would have had if the City Council continued the supervision of it.

1902. In November, 1902, the Board took over the management and control of the Bottle Lake Hospital temporarily with a guarantee from the City Council to cover all expenditure, and permanently as soon as the Hospital and Reserve were definitely vested in the Board to come within the Hospital and Charitable Aid Act, 1885.

For the purpose of a site for an infectious diseases hospital, the area of ground was transferred to the North Canterbury Hospital Board under the Hospital Reserves Act, on the 19th December, 1903. One Hundred and eighty-seven acres, one rood, 23 perches, was conveyed to the Mayor and Councillors of the City of Christchurch in pursuance of the Cemeteries' Act, 1882, entered in the office of the District

1903. Land Reserves on the 15th October, 1900. The Board actually took over from 1st June, 1903. The buildings were of a very temporary character being canvas-covered structures and tents.

Nurse Frances J. Beere accepted the Board's offer of £2.2.0 and food in payment of salary to act as nurse-in-charge. The Honorary Staff of the Christchurch Hospital was of opinion that it would be incompatible with the proper discharge of their duties for either the House Surgeon or the Assistant to have anything to do with the management of the Bottle Lake Hospital or the treatment of patients therein.

Infectious Diseases Hospital, contd.

Owing to the multiplicity over the control and management, there is little wonder a deadlock occurred; the Chief Health Officer, the District Health Officer, the Mayor, the Hospital Board, the Honorary Staff, and the local authorities were all in disagreement.

When the City Council refused to authorise an outlay of £1,000, the Board resolved to take no further action in the management. The Council asked that the matter be reconsidered and that the Board continue the charge of Bottle Lake, limiting its expenditure to necessities until such time as the hospital was vested permanently in its hands. The City Council having practically agreed to the proposed expenditure on the Infectious Diseases Hospital, the Hospital Board proceeded with the work with as little delay as possible.

Messrs. Collins and Harman, reported that as the levelling was finished and the sand firm, it would be safe to use concrete for piles instead of totara wood. The smallpox ward, about a quarter of a mile from the main building, was completed at a cost of £55, and two rooms for a doctor cost approximately £120. Dr. Livesey was appointed for three months at £250 per annum with quarters and food. In consequence of the decrease of scarlet fever there were comparatively few patients, so the resident medical officer resigned and the staff was re-organised in 1903. A married couple was advertised for, and Mr. and Mrs. H. A. Seymour were appointed caretakers. Part of the caretaker's duties was to prevent patients walking outside the boundaries of the reserve. A qualified nurse with an assistant was also engaged.

When the Public Health Amendment Act was passed, and Bottle Lake Hospital became a branch of the main hospital, the onus of the care of infectious cases was transferred from the local authorities to the Hospital Board.

For the year ending March, 1903, 128 scarlet fever cases were treated in Ward 3, Christchurch Hospital. The following year they were transferred to Bottle Lake.

1904. The expenditure on maintenance was £200 for the first year.

1904 - 1905.

<u>Receipts.</u>		<u>Expenditure.</u>
Balance 1st Apl. 1904	£1.15. 7	Maintenance, Bottle
Contributions from		Lake Hospital
local authorities -		Refund, Ch.Ch.
Christchurch City		City (Cost Bldgs.)
Council	£1,362.17. 4	Refund Treasury
Lyttelton Borough	100.17. 0	(advance)
New Brighton "	27. 1. 3	Balance, Bank H. 2.1,296.10. 4
Sumner "	27. 9. 0	31/3/05.
Woolston "	52. 4. 6	
Avon Road Board	50. 0. 0	
Halswell Road "	84. 4. 6	
Hentcote " "	59.19. 9	
Lincoln " "	81. 0. 0	
Tai Tapu " "	28. 2. 6	
Templeton " "	117.10. 6	
Riccarton " "	100. 0. 0	
Subsidies	937. 5. 8	
Patients' Payments	8.10. 0	
	<u>£3,038.17. 7</u>	<u>£3,038.17. 7</u>

Infectious Diseases Hospital, contd.1904.

The Mayor of Christchurch (H. Wigram, Esq.) called a conference in 1904 to adjust finally the accounts of the Infectious Diseases Hospital. Sir Joseph Ward authorized the Chief Health Officer to act as Banker, and although the Health Department was technically in control, the institution was still under the Board's charge. A further meeting of representatives and members of the contributing bodies liable for the maintenance was called for the purpose of apportioning the cost, but amicable arrangements were delayed.

The Hospital Board was approached by the City Council to carry the establishment of the Infectious Diseases Hospital into effect by designing and erecting a suitable building, the Council meeting all necessary expenditure. The Chief and District Health Officers conferred with the Board and the local bodies adjoining the Bottle Lake Reserve. An agreement was arrived at by which the hospital was taken over from the City Council and a levy was made on the restricted area by which, with subsidy accruing, the City Council could be reimbursed for its outlay. The Hospital Board received no official communication from the City Council as to its manner of financing the project, consequently trouble arose from a misconception as the audit-inspector found on auditing the City Council's accounts that half the cost of the building and equipment had been met by subsidy, and when the Hospital Board's accounts were audited, he found that a subsidy claim was made for the same purpose. The Board's original intention was to pay the City Council its total outlay.

Dr. Pinch, the District Health Officer, asked if the Board would undertake the care and treatment of consumptive patients at Bottle Lake and at what charge, but the Board was not in a position to entertain the proposal. When Parliament gave the Board power to erect shelters for treatment of consumptive patients, the District Health Officer assumed that the Board would desire to take some action. Nurse Maude was doing splendid work at her camp (now Linton Street) but she did not take cases which were far advanced.

1905.

In March, 1905, a special meeting was held to discuss the question brought forward by the management of the Nurse Maude consumptive camp which was willing to hand over its work to the Board, including property, buildings and funds. The committee was willing to carry out the work if the Board would ultimately arrange to take over the responsibility. The provision laid down in the Health Act of 1905 empowered Hospital Boards to build annexes to accommodate consumptive cases. Such could not apply to the Christchurch Hospital as there was no space available, and Nurse Maude's camp was not suitable for a large number of patients.

With a view to taking concerted action in the matter, other Hospital Boards were communicated with. Messrs. G. Witty and Eli assured the meeting that they would use all their efforts to assist the Board in bringing the matter before Parliament to induce the Government to provide the necessary means for erecting a suitable building for the treatment of consumptives. A special conference committee was appointed to meet delegates from the Hospital Boards in the Canterbury Health Districts to discuss the whole question of providing a sanatorium.

Infectious Diseases Hospital, contd.

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1905.

As there is little recorded on the Hospital files with regard to the infectious Diseases Hospital during the next few years, the following statement of receipts and expenditure must, therefore, suffice:-

<u>Receipts.</u>		<u>Expenditure.</u>	
Balance, 1st Apl. 1905.	£1,296.10. 4	Maintenance	
Contributions from		Bottle Lake	
Local Authorities -		Hospital	£430.15. 9
Christchurch	£125.17.11	Balance, Bank	
Riccarton	100.12. 3	N.Z. 31st	
Heathcote	59.19. 9	March, 1906.	1,582. 9. 8
Spreydon	39.15. 6		
Avon	84. 8. 3		
Subsidy £ for £			
Patients			
Refunds	1. 7. 6		
"	5. 0. 0		
	408.13. 8		
	282.17.11		
	18.16. -		
	6. 7. 6		
	£2,013. 5. 5		£2,013. 5. 5

<u>Receipts.</u>		<u>Expenditure.</u>	
Balance 31st March, 1906	£1,582. 9. 8	Maintenance	
Refund	2. 8. 9	Bottle Lake	
Interest	18.18. 1	Hospital	£594. 0. 4
		Balance 31st	
		March, 1907.	1,009.16. 2
	£1,603.16. 6		£1603.16.6

<u>Receipts.</u>		<u>Expenditure.</u>	
Balance Mar. 31st. 1907.	£1,009.16. 2	Maintenance -	
Rent Reserve	15. 0. 0	Bottle Lake	
Refunds	7. 8. 4	Hospital	£515. 5. 4
		Balance 31st	
		Mar. 1908.	516.19. 2
	£1,032. 4. 6		£1032.4. 6

<u>Receipts.</u>		<u>Expenditure.</u>	
Balance, 31st Mar. 1908.	£516.19. 2	Maintenance	
Local Authorities	500. 0. 0	Bottle Lake	
Refunds	3. 3. 0	Hosp.	£525. 0.10
		Balance, 31st	
		Mar. 1909.	495. 1. 4
	£1020.2. 2		£1020. 2. 2

Infectious Diseases Hospital, contd.

1909. Under the Hospital and Charitable Institutions Act, 1909, the hospital was transferred to the Board as the Infectious Diseases Hospital for the North Canterbury district, the area then being 187 acres, 1 rood, 23 perches. A large portion had to be remodelled in 1910, and a series of detached buildings was made.

The property was covered with broom, manuka, gorse and lupins, with a shelter belt of pines about thirty years old on the south side. Roughly 30 acres were occupied by the main wards, shelter sheds and outbuildings. The small-pox hospital was about 50 chains from the main building in a northerly direction. The balance of the land was let for a short term at £20 per acre. There were two large wards in the main building used for scarlet fever cases; there were also two moveable shelter sheds or tents, one was occupied by the caretakers and the other by the assistants. Five single shelter sheds or tents were used for observation cases, measles or chicken pox. The additional building consisted of bedroom, fumigating chamber, and washhouse. There was also a building 200 yards from the main building for a resident doctor. The water supply was from a deep artesian well and a run, and the drainage was taken into pits dug in the sand for that purpose. It appears that the well was sunk in 1903, approximately 280 feet deep, and the following are the strata of the locality:-

1 to 15 feet sand	147 to 160 feet blue clay
15 " 40 " blue shingle	& peat
40 " 83 " Blue sand	160 " 170 " brown
83 " 93 " clay and peat	shingle
93 " 147 " brown shingle	(2nd stratum)
(1st stratum)	170 " 185 ft. yellow sand
	185 " 193 " blue sand
	193 " 211 " brown
	shingle
	(3rd stratum)
	rising 11 feet.

The capital expenditure from April, 1910, to September, 1913, was as follows:-

Hospital extension	£204.19. 7	Playroom	£264.15. 9
" "	11.13. 4	Treeplanting,	
Moving & Renovating		clearing, fencing,	
Doctor's house and		etc. (1911)	187.12.10
repairs to shelters	52.15. 1	Treeplanting	
Asphalting	14. 0. 0	(1913)	42.16. 4
Small-pox hospital		Fencing (1913)	85. 3. 6
(1910/1911)	223.16. 6	TOTAL	<u>£ 1,110.17. 9</u>
(1913)	26. 4.10		

The staff consisted of Mrs. Seymour, Nurse-in-charge, Mr. Seymour, caretaker; a cook, and temporary nurse. A laundress was engaged when required. The food supply was taken from Christchurch by a neighbour who also supplied the milk to the institution. Medical attention was given by junior assistants from the Christchurch Hospital who received extra remuneration and were under the supervision of the Medical Superintendent, who visited all serious cases as required.

In 1903 - 113 cases were treated. In the years 1904-9 inclusive the annual numbers of cases of scarlet fever treated were 48, 23, 44, 37, 26 and 24. In May, 1910, there were 25 cases. It was considered that in the event of an

Infectious Diseases Hospital, contd.

epidemic the accommodation was certainly inadequate. The work entrusted to the Nurse-in-charge and those working with her had been carried out as efficiently as the adverse conditions existing there permitted. During the six and a half years that the Nurse-in-charge was in residence she received leave of absence only twice.

1911. Dr. Duncan who was appointed Medical Officer, required a certificated nurse to assist him at Bottle Lake in 1911. The position then was that nurses were sent from Christchurch Hospital, and incidentally the Board had to pay for the isolation week which the nurses had to undergo after leaving the Infectious Diseases Hospital. The caretaker's wife had worked hard and done well, but she was not a trained nurse. Sister Bowie was placed in charge under the Matron of the Christchurch Hospital; the staff arrangements were re-organised, the wards fumigated and thoroughly cleaned, and the grounds put in good order.

1912. With all the improvements, difficulties arose regarding the domestic staffing in 1912. Keeping help so far out of town, coupled with the mosquito pest, made it almost impossible for anyone to remain for long. Several cases of severe poisoning were caused from mosquito bites, especially with some of the children, to such an extent that it was hoped that the Board could be induced to close the hospital grounds, thus simplifying all nursing and domestic arrangements, and to allow of daily supervision. To say the least of it, arrangements were primitive at Bottle Lake. Alternative estimates were prepared for a fever hospital at Bottle Lake or in the Christchurch Hospital grounds.

1913. Instructions were given in 1913 to prepare for small-pox cases, and accordingly bare necessities were sent down. The nurse who volunteered for duty was vaccinated in readiness to receive any patients.

At the Infectious Diseases Hospital, 124 cases were admitted during 1913; the greatest number in hospital at any one time was 36. Owing to the lack of accommodation another year of difficulties was endured. Sister Trumble was in charge with twenty-seven patients. Throughout the year, the sister with thirteen nurses carried on; the daily staff consisted of Sister, 2 Nurses, 1 Porter, 1 Cook and 1 Housemaid. One nurse was on day duty and one on night, each being twelve hours on and twelve hours off. The Nurses' Cottage was completed, the eight hour system was adopted and brought into line with the Board's other institutions. It was strongly recommended that the Sister-in-charge should have the status of Matron with full charge, and nurses for periods of three months should be sent from Christchurch Hospital to be under her control. She would be responsible to the Medical Officer and the Board. This did not meet with the wishes of either the Lady Superintendent or the Department of Health. However, the Board decided to separate the fever hospital from the Christchurch Hospital, and Miss Thurston nominated Miss E. Stanton to be Matron on probation for three months.

1914. There was a serious outbreak of scarlet fever in 1914 and the accommodation proved to be wholly inadequate to cope with the situation, although a new building was almost completed. Additional tanks were erected and the water supply met all the requirements; the nurses' home was finished and added much to the comfort of the nurses; the petrol gas plant was satisfactorily installed and bells

Infectious Diseases Hospital, contd.

connected with the entrance gates. A contract was entered into for £264 for lighting and £220 for the discharging room.

1915.

Miss Stanton volunteered for active service in December, 1915, and Miss Burnett took up the duties of Matron in February, 1916.

There were 112 cases of scarlet fever in May, and the highest record of patients was 119. The excessive over-crowding was overcome by the erection of four large marquees in which the convalescent cases were accommodated, and a small one erected for the staff.

The scarlet fever epidemic of May showed no signs of abating in July. The need of special provision was urgent and increasing, and it was considered that the only means of solving the difficulty which confronted the Board was the use of the Waltham Orphanage to provide accommodation at short notice. The Director-General advised the Board to be satisfied with obtaining the Minister's consent for the additions and alterations, namely, one pavilion, observation block, and ear clinic. Whilst he was in entire sympathy with the Board with regard to reconstruction of the old parts, he considered that in the matter of an epidemic the proposals were best deferred.

The tender of Mr. J. Searle was accepted (£141) for maids' quarters.

It was decided not to press on with the Bottle Lake extensions in the hope that there would be a diminution in the number of patients. Tenders were received in September, 1916, for a pavilion containing twenty-five beds and observation ward, and the necessary alterations for the ear clinic. Mr. Searle's tender for £2,382 was accepted.

The drainage question opened up another problem for the Board to deal with. A new system was urgently needed as there was no proper drainage disposal for the institution other than the system of pits and £350 was approved by the Hon. Minister. A contract was entered into for the electric supply from the Waimairi County.

Miss G. A. Robinson commenced duties as Matron in September, 1916, with 168 patients, and the staffing of the hospital was an added difficulty. The Director-General approved of nurses being transferred from the Christchurch Hospital to the Infectious Diseases Hospital for three months out of the term of twelve months. This would be counted in the course of three years required under the Nurses Registration Act.

The conditions concerning the Infectious Diseases Hospital were far from satisfactory; independently of scarlet fever, there was an outbreak of chicken pox, and severe cases of diphtheria occurred. There also appeared to be some condition that affected the health of the staff, many of them breaking down without contracting any of the ailments mentioned. The Public Health Committee invited Drs. Blackmore, Lester and Pearson to furnish a report for the Board's guidance. A full report was received. Nothing but an extreme devotion to duty on the part of the staff, under the most disheartening conditions, could have enabled the work to be carried on at all." Dr. Frengley also inspected and reported at the Board's request.



Aerial view of
Infectious Diseases Hospital.

Infectious Diseases Hospital. contd.

He made enquiries into the conditions incidental to the use of the hospital for the accommodation of cases of infectious diseases, more particularly scarlet fever. One of the most important matters, related to the water supply. In dealing with the reports the Hon. Minister of Health consented to £1,100 being spent to give effect to the recommendations.

The alterations and additions included moving the nurses' and maids' homes; building change rooms, new foundations, and a verandah to the maid's quarters, nurses' dining room, lowering of the old verandah roof, and putting in fanlights, and minor alterations to the duty and operating rooms in the old building. The water service was greatly improved; the well flowed into a concrete reservoir capable of holding 4,000 gallons. The service was taken round the buildings for garden and fire prevention use.

1917. The old Bottle Lake Hospital was practically wiped out of existence and a new institution almost double the size sprang up in its stead - two buildings of 3 wards each, the observation ward, quarters for nurses and maids were erected and the only remaining portion of the original block was renovated.

A lengthy chapter could be written of the heated discussions regarding the Bottle Lake Hospital and surroundings. With the many changes that took place, the title was altered from Bottle Lake Hospital to the North Canterbury Infectious Diseases Hospital, Burwood.

The new institution for infectious cases proved equal to all the calls on it and it supplied a long felt want.

1921. The question of transferring all infectious cases from Christchurch Hospital to Bottle Lake was again under consideration in 1921, as also the necessity for a resident medical officer, possibly junior medical officers for six months or so who would be under the supervision of Dr. J. F. Duncan. The suggestion met with the approval of the Inspector-General. With the object of carrying out these building proposals, plans were submitted in 1922, and suggestions made by the Department were brought about, covering buildings, electricity, steam heating, destructor etc. and nurses' home (£13,009). In addition to the main hospital a sterilising and boiler house and chimney were erected in 1923.

1923. Dr. T. A. McGibbon, who had been responsible for the operations carried out at the Infectious Diseases Hospital, resigned in 1923, and the work was then divided between the three members of the Honorary Staff of the Christchurch Hospital. Miss McKay, who had been Matron for a few years, resigned in 1925 when Miss Cochran was promoted to the position.

The number of infectious cases dealt with during August, 1928, totalled 374 - Scarlet Fever 365 and diphtheria 9. This was a record number. Up to the

Infectious Diseases Hospital, contd.

end of August, out of practically 1,000 cases which occurred since the beginning of the year, there was only one death. Comment was made on the very excellent work which had been done by the staff, and to give some relief, short holidays were arranged for those who suffered most from the strain under which they had worked.. This did not interfere with the regular holidays. The following list shows the number of patients remaining in the I.D.H. on 31st May for the past thirteen years.

<u>Patients.</u>	<u>No. of Cases treated.</u>
1918	34
1919	23
1920	34
1921	45
1922	45
1923	29
1924	80
1925	44
1926	55
1927	40
1928	199
1929	106
1930	23

29 scarlet fever only.
 " " "
 " " "
 23 miscellaneous
 " "
 " "
 " "
 " "
 " "
 " "
 " "
 " "
 " "

1930.

An additional sanitary block was erected in 1930 to make distinct and separate provision for diphtheria patients. Steam heating of the wards replaced the use of fireplaces and to increase the water supply for fire protection, slight alterations were carried out at the suggestion of the Christchurch Fire Brigade.

1935.

Two conferences were held in 1931 and another in 1935 to deal with safety measures regarding the fire menace. Though the Christchurch City Council had matters well under control as far as their reserves were concerned, the question of inflammable undergrowth on adjoining properties was the hazard to be overcome. Apparently there was no law to compel owners to clear their properties (according to the State Forest Service) and the local authority could only compel owners to clear their land of noxious weeds such as gorse, etc. Early in 1937, enquiries were made to see if there was any possibility of purchasing a strip of land on the border of the Board's property so as to enable proper protection to be made for its plantations. This was reiterated in 1939, but the matter was again deferred. In 1940 it was decided to ask the Christchurch representative in Parliament to press for legislation in the matter with the object of enforcing adjacent owners to clear.

1937.

Rearrangements were made in 1937 regarding nurses in training who had been sent from the Christchurch Hospital for duty. Instructions were issued for a trained staff and hospital aids to be engaged.

The Nurses and Midwives Registration Board took a serious view of the lack of training given to pupil nurses in infectious diseases work, and urged the Board to make provision for training in this direction. The matter was left entirely in the hands of the Medical and Lady Superintendents to make the best possible arrangement with the Department concerned.

An extensive programme was prepared for further

Infectious Diseases Hospital, contd.

additions, and the diphtheria ward was brought into use in September, 1936.

1939.

Miss J. Lambie resigned from the position of Matron in 1939.

Great changes took place as regards the purpose of the institution, when Hospital Boards were instructed to prepare for and to undertake the care and treatment of soldiers. Very soon an outbreak of influenza occurred, followed by other infectious ailments. Cases were so numerous that it became necessary to put the hospital at Burwood into use as an adjunct to the Christchurch Hospital. To cope with the influx of patients, Voluntary Aids came to the rescue through the St. John Ambulance Association and the Red Cross Society. Miss Cooke was appointed to take charge of the nursing of military patients.

The position hitherto of Matron was superseded by the appointment of Sister K. T. Compigne as Sister-in-charge under control of the Lady Superintendent of the Christchurch Hospital.

In 1939 the hospital experienced one of the quietest periods since 1934. This, no doubt, largely influenced the Board in taking decisive steps with regard to the congestion at the base hospital. The Board determined to place chronic patients in the diphtheria block at Burwood and the control of the Institution so far as it related to patients was handed over to the Hospital Committee from the Public Health Committee.

1940.

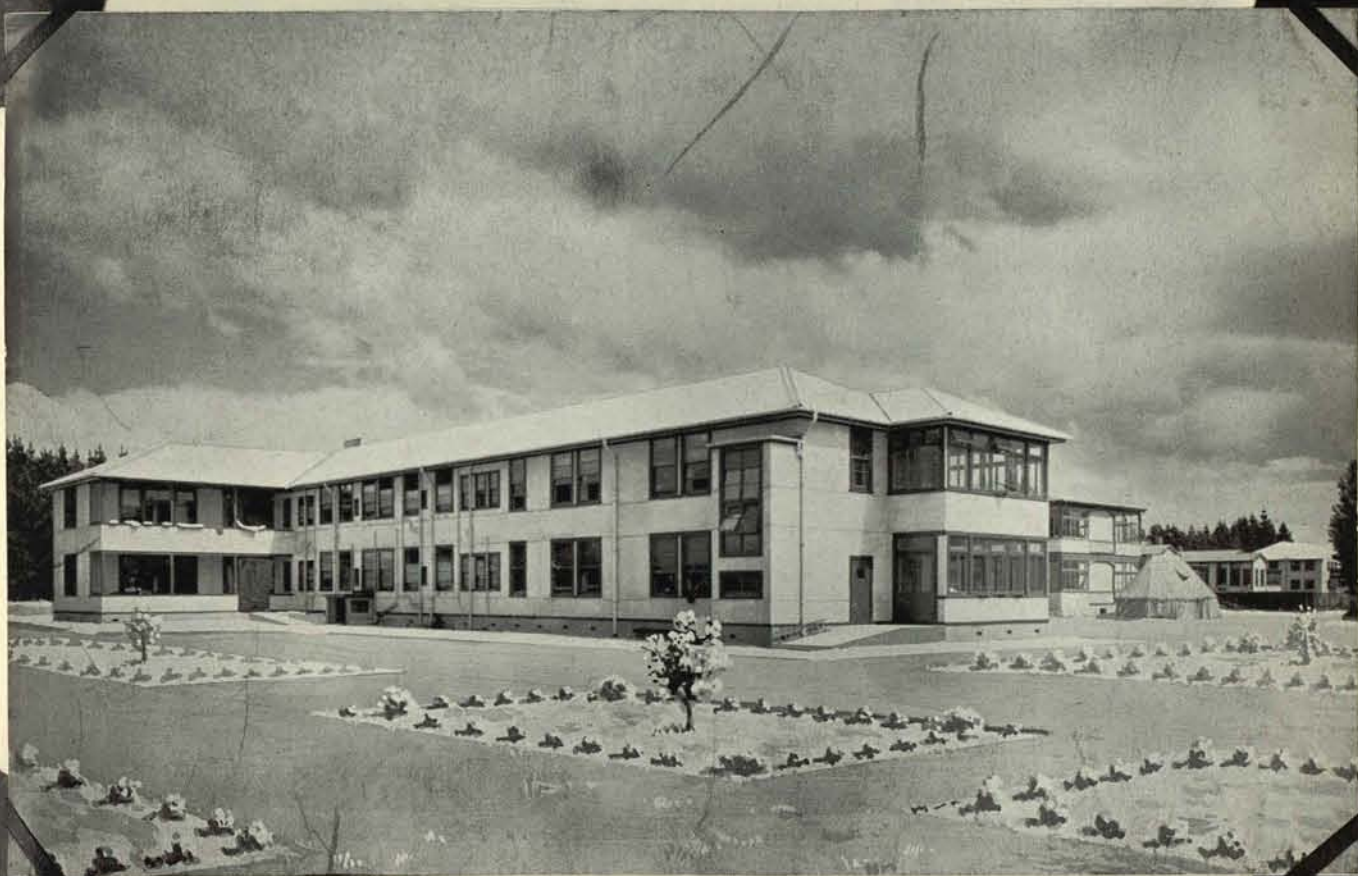
There was a further outbreak of influenza in June, 1940, at the Burnham Military Camp. Cases were admitted to the Christchurch Hospital and Burwood Hospital. The orphanage at Waltham housed the convalescent patients, as did many citizens of Christchurch and its environs. The inrush of influenza patients, approximately two hundred, added a great burden on those responsible for staffing, and without the voluntary aid which was so readily given, the strain would indeed have been great. By November, the number of cases decreased leaving a majority of measles cases.

1941.

The clearing of land was carried out ready for levelling by the Public Works Department and 1940 brought about swift changes to keep up with the increasing demand for accommodation. The cost of the new wards and Nurses' Home was met by the Government. The Christchurch Hospital was relieved of approximately one hundred beds. The Matron's cottage, Homes for trained nurses, aids and maids were erected, and two new wards were completed. In 1941 the staff consisted of nurses 13, nursing aids 43, senior aids 10, V.A.D.'s 20, domestics 11 and 4 porters. The title of the institution was altered to that of "Burwood Hospital" and new rules were drawn up and approved. A new position instituted, was that of Supervisor to be responsible for the clerical work, House Manager and other duties. Dr. H. Wales, Jnr. commenced duty as Resident Medical Officer in February, 1941. Arrangements were made for the training school to come into operation with Sister Blaine as tutor sister.

Infectious Diseases Hospital, contd.1941.

With the admission of military patients, the Defence Authorities helped considerably by the erection of marquees and arranging transport. Assistance was also given by the Red Cross Workers as regards staffing, clothing and equipment. The highest number of patients on any one day totalled 234. Miss Lambie, Director Division of Nursing, paid a visit of inspection and was favourably impressed with the arrangements and conditions generally.



Wards v and vi - Burwood Hospital - 1941.

INFECTIOUS DISEASES HOSPITAL - BURWOOD.

TREE PLANTING.

1911. The property was inspected by several members of the Board, and of the Hospital Committee with Mr. Adams of Greendale, with a view to making recommendations regarding tree planting. The property then consisted of a fine well grown belt of pinus insignis trees thirty to thirty-five years old, growing on the western side and partly on the southern boundary.

1915. The whole of the first plantation had the blanks filled in with between 4,000 to 5,000 trees. The six acre triangular section on the north west corner was planted and towards the north west of the reserve there was another four to five acres ready for planting. At this stage tree felling was in operation, and approximately forty cords were stacked.

1920. The Selwyn Plantation Board reported in August on the afforestation work, pointing out that undoubtedly the pinus insignis was the most suitable tree for the sandy surface. It was recommended that two marginal lines of fire-resisting poplars should be planted to check any outbreak of fire. Rigid measures had to be taken with regard to the suppression of the rabbit pest.

The Board had planted about sixty-eight acres of land altogether. The area of the first plantation which was ten years old contained twelve acres planted with Abies Douglassii which did fairly well, Abies Excelsa and Abies Menziesii which did not do so well; the Pinus Ponderosa and Pinus Maritima gave good results; the Pinus Laricio and Cedrus Atlantica were no good at all; all the Pinus Insignis gave splendid results. The remaining forty-eight acres were planted with this species. There were a few breaks through the pines, planted with Lombardy Poplars as a safeguard against fire. It was difficult to grow trees on the flats which had been flooded at times with salt water as the reserve was only about one mile and a half from the sea.

1923. It appears that a large number of pines, poplars and willows were planted; and to complete the whole reserve a further consignment was planted in July, 1923.

1926. Twenty five acres of gorse and broom were cleared in 1926. In September the Superintendent of the Selwyn Plantation Board was asked to report as to whether the trees were suitable for milling or firewood. As the tenders for the purchase of trees were not satisfactory, a contract was let for felling, splitting and stacking at 14/- a cord. The number of cords cut by the Contractor totalled 563 1/2.

Some were divided among the Board's other institutions, and a considerable amount was sold privately up till March 1927. Notice was then given to Mr. Cairns to have all the reserve cleared up as it was essential for the ground to be ready for re-planting.

A satisfactory report was received on the tree planting in November, 1927. Out of 1,600 pines planted on the block previously occupied by pines which were taken down for timber, not one plant had suffered, and the macracarpas planted the year before were also doing well.

Tree-Planting, contd.1928.

In 1928 twenty acres were cleared of gorse and bracken, and it was found that 80% of the pine trees were in a healthy condition. The mature trees on the boundary line of the Bottle Lake Road were ready for felling to make room for more planting, and a contract was entered into for this purpose. The fire breaks on the property amounted to approximately 6½ acres.

A large fire occurred on 13th January, 1931, and of the 90,000 to 100,000 trees planted, 41,190 were still standing. It was decided to cut down all the damaged trees and to accept an offer made by the Returned Soldiers' Association to donate £100 provided the Board contributed the same amount, thereby earning a subsidy of £200 from the Unemployment Relief Board. On the 30th January the Board voted a further sum of £200 with a view to obtaining Government subsidy.

1931.

The Board accepted the offer of the Returned Soldiers' Association in 1931 of £100 towards the cost of employing men to clear in the reserve; the Board contributed £100 and the Unemployment Board £200. Returned soldiers nominated by the Association and appointed by the Labour Bureau were to be employed. About fifty men commenced work in chopping down trees and cutting up the timber as approximately 167 acres planted in pines had been destroyed by fire in January, 1931, out of the 177 acres planted. Forty acres were cleared and the scorched wood was cut up for firewood ready for the Board's Institutions and for sale. Labour was obtained from the Labour Bureau under the No. 2 Scheme of the Unemployment Board. A contract was entered into with the Radley Milling Company on the understanding that a total clearance would be made within six months. Formal notice was given in September, 1932 for the firm to cease work owing to the very unsatisfactory way in which the work was being carried out.

A conference was convened by the Waimairi County Council, held in the Council Chambers, to discuss safety measures to prevent the recurrence of fires in the Burwood and New Brighton districts. Another conference was held in 1935.

A letter was received from the secretary of the Department of Labour with reference to a new schedule to come into force on the 1st June, 1931. The Board made enquiries regarding the payments proposed to be made to the workers.

The replanting was finished in August, 1932. Fifty-five thousand pines were planted - 78½ acres - and it was proposed to plant 58½ acres in the following year.

Statement of expenditure for year 1st April, 1931 to 31st March, 1932:-

Trees for planting	£50. 0. 0	By Sale - wood	£145. 0. 0
Foreman's wages	30. 0. 0	" Refund wages	608. 18. 2
Fire workers' wages	36. 0. 0		
Wages - No. 5 Scheme	608. 18. 2		
Balance	29. 0. 0		
	<u>£753. 18. 2</u>		<u>£753. 18. 2</u>

Tree-Planting. contd.1935.

In 1935 the Director-General drew the Board's attention to a memorandum from the Controller and Auditor-General in which attention was drawn to the expenditure on the grounds of the Little Lake Hospital where six hundred unemployed workers had been engaged, and reduced the number to four hundred in August, 1935. The cost on the 187 acres for 1934-35 was over £23,500, and for the previous year £9,300. It was made clear to the Department that the employment of the large number of relief workers on the grounds was not of the Board's choosing.

1940.

More scrub and grass fires occurred in 1936, and the City Council asked for the Board's co-operation in a fire-prevention campaign. In March, 1940, the Canterbury members of Parliament urged the Government to introduce legislation making some provision for enforcing property owners to clear their sections to minimise the risk of fire by accident or otherwise.

BENEVOLENT INSTITUTIONS.

"TUARANGI"

OLD MEN'S HOME, ASHBURTON.

1879.

During the early seventies when immigration was a feature of the Julius Vogel Ministry, the Provincial Government constructed Immigration Barracks, also Public Works in different parts of the Province including Ashburton. That district was then the terminus of the first section of the South Island broad gage railway.

When the Vogel millions vanished, immigration ceased, and the barracks in Short Street, Ashburton - then considered pretentious buildings - were converted into an Old Men's Home. Amongst many of the inmates was Edward Jerningham Wakefield, once a member of Parliament and author of "Adventures in New Zealand (1845)". He was in the institution for some time and died there in the late eighties.

The Home, managed by a Home Committee appointed by the Christchurch Hospital Board, was open to all Canterbury and the Southern portion of the Provincial District.

1880.

In 1880, a Professor Wallenbury cured the blindness of two inmates enabling them to leave and go out to work. The Board thanked the Professor for his kindness in gratuitously and successfully treating the two patients.

1885.

In 1885 when the Ashburton District was united with that of North Canterbury for benevolent purposes, the Old Men's Home came under the control of the newly constituted North Canterbury and Ashburton Charitable Aid Board. Its first meeting was held in the Christchurch City Council Chambers in November when a Committee of Management was set up consisting of Messrs. Harrison, Walker, Jackson, McLean and Friedlander. This Committee inspected the Home and obtained from the Secretary of the Provincial Government as much information as he was able to give regarding past management

1887.

At this time there was available from the Public Works Department the sum of £120 for a new wing at the Home, but the buildings having become unsatisfactory from defects in construction and quite unsuitable, were not considered worth adding to. The Lands and Survey Department offered the Board a large building - the Immigration Barracks - on a railway reserve at Oxford, but the offer was declined.

1892.

Additional accommodation was required for at least 20 men.

1896.

Complaints were received through the Inspector-General that the Home had become totally unsuitable. The Board applied to the Lands and Survey Department for a grant of 500 acres, part of the Highbank Estate, but it was not permissible for land acquired under the Land for Settlers Act being granted. The Ashburton Borough objected to the proposal to remove the Home to Highbank.

1898.

The need for further provision for temporary and urgent cases, particularly for the infirmary quarters, became pressing.

Old Men's Home, Ashburton, contd.1900.

As a site for a new Home, a reserve was available if the Government vested 10 acres of a Police Reserve, but it was somewhat unusual for reserves to be handed over. Legislation enactment was necessary before the Board could obtain the title and expend funds on buildings. A short Bill was put through as was the transfer and the new site from the Government was acquired.

It was decided to build a new Home in place of the ramshackle building which was much out of date. The Ashburton Home Committee prepared a block plan of buildings designed to afford improved accommodation for about eighty inmates. Peter Gourdie of Ashburton was the contractor, his price being £5,474. It was considered that the proposed buildings on the Police Reserve at the back of the chow-grounds would be far enough out to prevent the inmates from loitering about the town.

1901.

The laying of the foundation stone of the new building took place on 14th November, 1901. The Hon. W. G. Walker, C.M.G., Minister for Education and Minister in charge of the Charitable Aid Department performed the ceremony.

Copy of Manuscript deposited in the cavity beneath the foundation stone of the new buildings:-

"If it should happen in the course of time - possibly after the lapse of centuries - that this scrap of paper again becomes exposed to the light of day, and the writing hereon be intelligible when the language of men may have changed, it may serve to relate that on the 14th day of November, A.D. 1901, and the first year of the reign of King Edward VII, the Stone above was well and truly laid by a Minister of the Crown; the Hon William Campbell Walker, M.A. a Companion of the Most Distinguished Order of St. Michael and St. George, a Member of the Legislative Council of the New Zealand Parliament, and erstwhile a Chairman of the County of Ashburton, and a Member of the Charitable Aid Board of the United District of Ashburton and North Canterbury:- In the presence of the Members for the time being of the last-named Corporate Body, to which was entrusted the local administration of relief to the poor, including the housing of destitute aged men, in Homes adapted to their needs. Such a Home was, at the time of this writing, designed to be erected on this FOUNDATION STONE; and it must be left to the Historian of the future to judge whether its purpose was eventually and faithfully carried out."

The Members of the Board:-

Frederick J. Board
Richard Westera
Charles John Harper
Andrew Rutherford
Bethel P. Manhire
Hugo Friedlander
Edwin Felcdwick
John Tippet Smith
Emily Black
Sidney Harris
George Witty
George Wallace
John Wolfe
Henry B. Sorenson
John Robson

Late Mayor of Linwood (Chairman)
Chairman Selwyn County.
Chairman Ashburton County.
Chairman Cheviot County.
Mayor of Lydenham.
Late Mayor of Ashburton.
Late Mayor of Kaiapoi.
Christchurch City.
Selwyn County.
Akaroa County.
Selwyn County.
Ashley County.
Selwyn County.
Christchurch City.
Ashley County.

Felcdwick

Old Men's Home, Ashburton.

Thomas G. Morris
 Thomas M. Morrissey
 Peter Gourdie
 William Leggett

Secretary and Treasurer.
 Master of the Home.
 Contractor for Building.
 Clerk of Works.

1901. Plans of the Ashburton Home Committee were laid before the Board and a design was unanimously approved. Certain alterations had to be made and the Contractor's supplementary tender for £139 was accepted. Specifications were obtained from Mr. A. D. Dobson for the proposed lighting by electricity.

1902. Mrs. Grace Neill, the Government Inspector, expressed herself as greatly pleased with the progress of the building and suggested that a better name than the "Old Men's Home" should be chosen. One of the best known authorities on the Maori language was consulted with regard to a suitable name. Six names were submitted and "Tuarangi" meaning "old" was chosen and adopted. The interior of the building was on the large dormitory system with a commodious dining room and kitchen. The staff quarters were in the two-storied building, and in the turreted portion were eight four-gallon water tanks. The buildings were up-to-date and nothing had been spent on unnecessary ornamentation. The building contract was satisfactorily completed and a windmill was decided upon.

"TUARANGI" HOME.

The opening of the new home took place in August, 1902. Mrs. Harper, whose husband was Chairman of the Ashburton Home Committee, hoisted the Union Jack at the ceremony, and Mrs. F. J. Board, wife of the Chairman of the Board, on opening the doors of the institution was presented with a golden key. His Excellency the Governor, Lord Ranfurly visited the Home later to see how many faults he might profit by when forming plans for his own projected Veterans' Home (Auckland). The Board was gratified that the general arrangements met with his unqualified approval.

The inmates were kindly treated in every respect and only those who broke the rules gave trouble. There was a good library, and books and papers were well supplied. The Board was pleased to notice that the Inspector-General in his annual report to Parliament bestowed a well-deserved compliment on the management of the Home.

1904. A considerable portion of the old building was removed to the new site to be made use of for various purposes, and a screen was added to the balcony to give protection against the North-East winds.

1906. The institution was not only a home for old men, it also had an infirmary ward run on the same lines as a hospital ward. The old men were cared for by nurses and under the direction of the part-time Medical Officer

1909. When the Boards dissociated, under the Act of 1909, the Institution was far too big to be undertaken by the Ashburton Board, therefore, it was left under the control of the North Canterbury Hospital Board subject to a division of the income from bequest based on the comparison of the valuation and population of the Ashburton district as against the North Canterbury district. The Ashburton Board's claim was for a proportion of the whole of the Canterbury Board's properties and assets including the trust estates, the total amount of which was estimated at from £70,000 to £100,000. In October, 1912, the verdict

Old Men's Home, Ashburton.

of the Court of Appeal was in favour of the North Canterbury Hospital Board. An arrangement was made that \$1,350 be paid to the Ashburton Board in full settlement of their claims on the value of the assets of the United Board. The \$1,350 effected no endowments and were purely liquid funds. The Ashburton Board's principal objection to the dissolution was that the old home site in Short Street was to be vested in the North Canterbury Hospital Board.

1911. The Charitable Aid Board had previously taken advantage of the amended Act which enabled Boards to raise funds through the contributing local authorities for the purchase of land and for the erection of buildings by erecting an infirmary ward at Tuarangi (and Jubilee Home). A verandah was built with concrete floor in 1911, and rooms for the staff were added to the infirmary in 1913.

1913. As a contract for the water supply with Woods Hills at Ashburton terminated, the Ashburton County Council was consulted as to the best methods for supplying energy for the turbine at the Home. Authority was given for specifications to be prepared at an estimated cost of \$715. A small power house was erected and the installation completed. Trouble arose with the flow of water in the Wakanui Creek, and the Council was asked to provide a more regular supply of water. The matter was of importance to the Board as over \$1,000 had been spent on the installation. The County Council was unable to make any further provision.

1920. During the next three years, various improvements were made regarding the drainage, and heating of the wards. The non-smokers' rooms was erected at a cost of \$441 in 1921.

1922. Extensions were made to the domestic staff's quarters and increased accommodation for inmates of 20 beds or more, as there was a long waiting list. With extra accommodation one of the wards downstairs could be used in conjunction with the infirmary to enable cases to be removed from the Christchurch Hospital.

Specifications were drawn up for alterations to the domestic staff quarters for accommodation of eighteen extra beds.

1924. All inmates of Tuarangi (and Jubilee Home) were granted 2/6 per week pocket money irrespective of pensions. The original idea was that a small amount should be refunded to all those inmates who were in receipt of the Old Age Pension, but the Board did not approve of the proposal. From time to time the amounts fluctuated till the alterations in Pensions were made in 1936. The Board then increased the allowance to every inmate to 4/- weekly and since the Social Security Act came into force in 1939, payment was raised to 30/- per month.

1935. Electric cooking apparatus was installed, and painting and extensive repairs were effected throughout the building. "Tuarangi" was regarded as one of the successful institutions of its kind in the country.

Old Men's Home, Ashburton.MASTER AND MATRONS OF THE ASHBURTON
HOME.

Mr. and Mrs. Maddison	1879 - 1880
Mr. and Mrs. Thomas Harris	1880 - 1883
Mr. and Mrs. James H. Fox	1883 - 1897
Mr. and Mrs. T. H. Morrissey	1897 - 1907
Mr. and Mrs. Knight	1907 - 1932
Mrs. Knight (after death of her husband)	1932 - 1937 (30 years)
Mr. and Mrs. Corbett	1937

MEDICAL OFFICERS.

Between 1900 and 1922 the Medical Officers were Dr. Trevor, Dr. Boyd, Dr. Lyon, Dr. Baigent and Dr. John Connor.



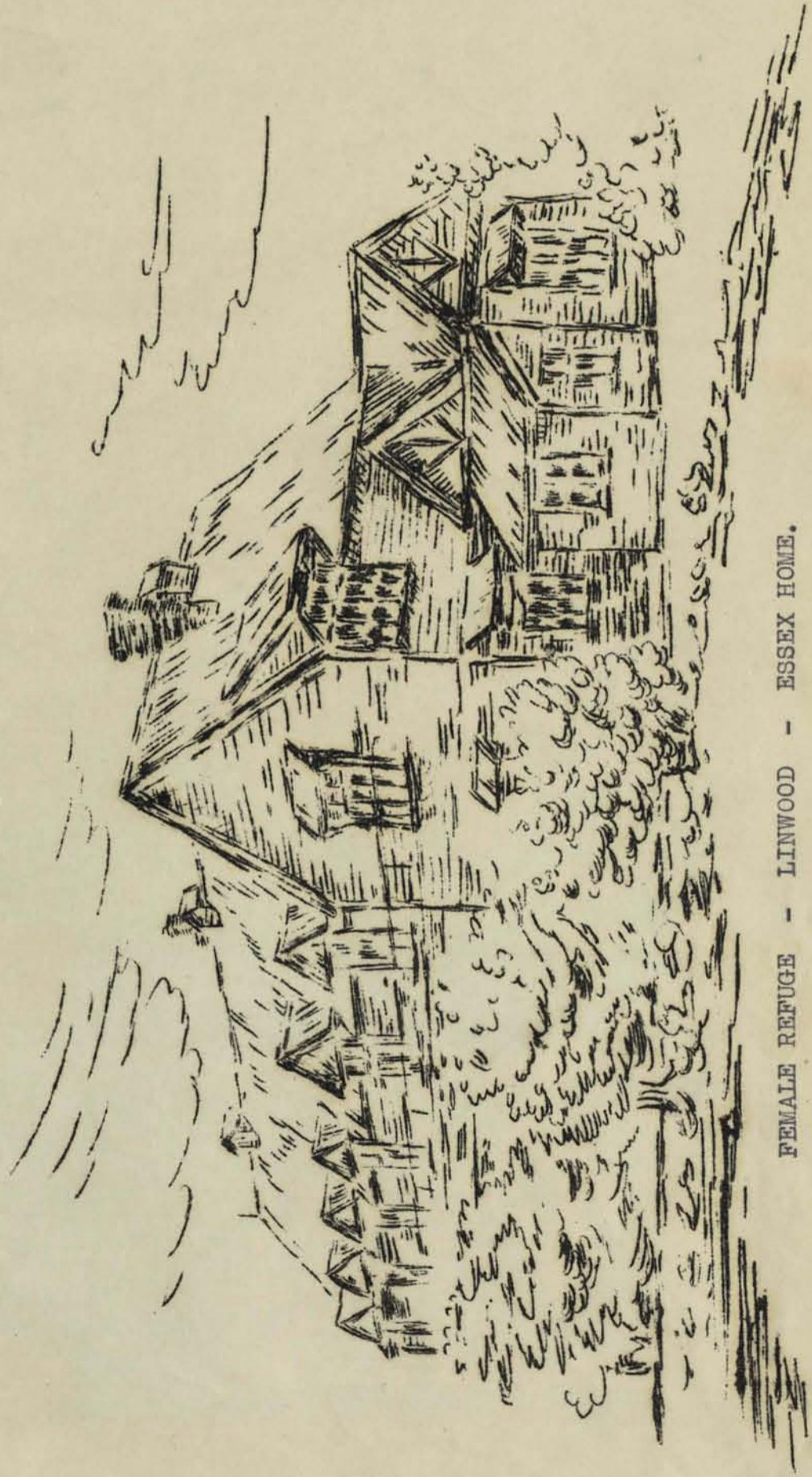
Tuarangi Home.

FEMALE REFUGE - ESSEX STREET, LINWOOD

There seems to no record of the early days of the Essex Home available. The original building was brought out from England in pieces and was erected in 1852 on that site as the Vicarage of the Rev. C. Mackie. It is still standing and is used as the laundry of the institution.

The rafters are bolted together, instead of being notched and fitted on the plates on the top of the studs, which supply the frame work of the walls as in ordinary buildings.

In front of this, there is a larger and more modern building, which supplies the crux of the problem. It is much newer than the laundry, as is proved by it's concrete foundation, but yet it is not less than sixty years old, because in a large number of places the floor boards are nailed on to the joists beneath by a type of nail known as the "cut-brad" which went out of use some 60 years ago, when the modern wire nail became general. It is surmised that the building is the work of the late Mr. B. Mumford, but there is no trace of it in the plans he left behind him. This in itself proves nothing, as many of his plans were burned. What is more strange is that no record of a permit for the building can be found in the City Surveyor's Office. It seems highly likely that this large two storied building was erected for some purpose such as it was later used for, because in 1885 it was taken charge of by the Hospital Board and was known as the Female Refuge - Gordon Street. About this time the name of the street was changed to Essex Street.



FEMALE REFUGE - LINWOOD - ESSEX HOME.



House brought from England - 1852
by Rev. C. MacKie.

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FEMALE REFUGE - ESSEX HOME.

1851.

It was not long after the arrival of the Canterbury Pilgrims that an historic house was built in Phillipstown. In September, 1851, the sailing ship "Duke of Portland" arrived with immigrants. She carried as Chaplain, the Rev. Charles Mackie, and his family of nine. He had also brought with him a house in sections. He purchased a ten acre section about a mile from the centre of Christchurch, and there erected the house which he named "Stricklands". The building still stands, being part of the block of buildings now known as "Essex Home." The entrance from Cashel Street was called Strickland Street, since named Albert Street. There are only a few records of the early days of the Female Refuge available. In 1855 when it was taken over by the Charitable Aid Board it was known as the Female Refuge, Gordon Street and about this time the Street name was changed to Essex.

1864.

There arose the question of providing a refuge for women who had succumbed, or who were in danger of succumbing to the moral temptations incident to city life. The Diocesan Synod went into the matter and a Female Refuge was founded on the site now occupied by the Canterbury College School of Art. It continued its activity until 1865, when the Charitable Aid Board was constituted and took over the work. The Guild of St. Mary which had been responsible for the Institution, opened another in 1867, and continued to work until 1910, when the building was converted into an Orphanage, known as St. Saviour's Orphanage, and in this form continues to the present day.

The Rev. Henry Torlesse requested the Government to place the sum of £1,000 on the estimates for a Refuge and its maintenance. The proposal was declined, nevertheless, the House of Refuge was opened on 1st December, 1864 at a cost of £455 with minor extras. Later, additions were made costing £126, and an artesian well was sunk. The Matron's quarters were added in 1867. Mr. Torlesse, in addition to attending to the finances which depended on public interest, acted also as Chaplain, and Mrs. Torlesse controlled the details of the Institution.

1867.

In June, 1867 supporters of the House of Refuge met in the Town Hall, His Honour, Judge Gresson presided and a committee of management was set up. Mr. W. Wilson then owner of the Strickland Estate offered the property to the committee. The Provincial Government was approached, but considered the price, £1,578, too high.

1874.

The Government came to the conclusion that it would be better to limit the area of ground to be purchased to about an acre or an acre and a half, and suggested that an offer should be obtained from Mr. Wilson with respect to the 1 acre, 32 perches contained in that part of the land under offer, which fronted Cashel Street, and numbered on plan as section 3, 4, 5 and 6, the price which he named to include a right to carry a drain through the property to the south to connect with the City Council drain running along the southern boundary of the property at the intersection of Jackson's creek.

Female Refuge - Essex House, contd.

It was resolved that Lot 2 be recommended for the site, upon condition of permission being obtained from the landlord to cut a drain through the section to the drain running parallel with the City Council drain. The Government approved of the purchase of Lot 2 as recommended by the committee for the site for the sum of £425. Mr. Edward Jollie, the Provincial Secretary, wrote stating:-

"The Provincial Solicitor will at once be instructed to prepare the necessary deed, for which purpose I have to request that a plan of the site may be furnished. With regard to the accommodation to be provided, it was intended that it should include accommodation for lying-in cases of single women, and with regard to the erection of the building, the Government wish the Committee to employ an architect to devise a plan and submit it to the Government before taking action. I may state that the sum available for all purposes, including purchase of land is £2,000."

1876. Levels were taken for the drainage, and the new House of Refuge was ready for occupation on 17th November.

1877. A Ladies' Committee controlled the working of the Institution and a Men's Committee also existed. All took turns to visit the Refuge as did numerous Church Representatives.

1879. Reference is made to a new wing in 1879 as Class "B". The caretaker's wife and the girls did the laundry work, which was done for hotels.

Dr. McBean Stewart was Honorary Physician, and the names of other doctors appear - Doctors Ellis, Campbell and Patrick.

1881. It was agreed that the Refuge be used as Class "A" as hitherto, and as a lying-in hospital for married women from the country who would pay a moderate charge.

The Committee of Management consisted of the Dean of Christchurch, Rev. I. Elmlic, Rev. Aldred and Messrs. John Anderson and G. Booth. The new Board constituted under the Hospital and Charitable Aid Act (1885) met the Management Committee regarding the future of the Home. The Committee undertook to report fully on the Institution and its working. Later it reported:-

"That seeing the object of the new Act is now in force, it is inexpedient to continue the Refuge as a separate Institution."

Arrangements were made for the committee to remain in office temporarily.

1890. The Board adopted the Ladies' Committee's suggestion as to the future working of the Refuge. The ladies continued till the end of March, 1890, when they resigned, and the staff was dismissed with a view to re-organising the establishment. The committee considered the question, by no means easy of solution, and recommended as a first step that applications be invited for a matron at £60 per annum to take sole charge of the management.

Female Refuge - Essex Home. contd.

1891. The Board conferred with the council of the St. Saviour's Guild on the management of the Refuge. The Bishop of Christchurch, the Rev. E. R. Otway, Sister Frances Torlesse, Mrs. Blakiston and Mrs. Cunningham represented the Guild. The ladies undertook to draft some suggestions for consideration by the Council of the Guild, and to endeavour to submit definite proposals for taking over the management of the Refuge at an early opportunity.

A contract was entered into with the authorities of St. Saviour's Guild for the care and attention of the Refuge for twelve months or longer if found mutually agreeable to continue. The Board's Committee emphasised the fact that the rights and powers of the Board to retain supreme control of the institution were carefully conserved by the terms of the agreement. The Refuge extended its sphere of special work under the new management at the fixed maximum of cost to the Board, in terms of the contract with St. Saviour's Guild. It was suggested that a nurse should be obtained and the girls could be allowed to leave their children in her care on paying 5/- per week. The rule was made that no girl should be admitted except with her first child.

The first meeting of the Ladies' Committee of the Guild met in September, consisting of Mesdames Blakiston, Bridge, Inglis, Cunningham, Dunkley and Miss Torlesse. Miss Torlesse read to the Committee and to Mrs. Harriott, the Matron, the new rules and regulations drawn up and approved by the guild and the Board.

The chapel of the House of Refuge was opened by the Bishop of Christchurch. Rev. R. J. Thorpe, Rev. J. Gilbert, Messrs. Walker, T. C. Norris and A. P. Blakiston and members of the council of the Guild were present.

St. Saviour's Guild was granted £250 for one year to provide for destitute unmarried women, who might be recommended by the Board. Maintenance included medical and surgical attendance, food and other necessities, also nurse and attendants whose engagement would be subject to the Board's approval.

1893. Dr. McBean Stewart, the Medical Officer, resigned and Dr. Murdoch filled the position. Mrs. Harriott resigned in December and Miss Lewis was appointed Matron.

1894. In 1894, Mrs. Grace Heill, Inspector of Hospitals, Wellington, inspected the Home and was shocked at the low wage given to the Matron and nurse. She considered that the Home was very well conducted. It was especially impressed on the committee that if the Board should agree to build a lying-in ward on the Refuge ground, the management must be under the same head, with a sub-matron and the same nurses for both establishments; also the necessity of complete separation of inmates. The mothers remained for six months, and were taught to tend their babies. A follow-up method after discharge was adopted.

Female Refuge - Essex House, contd.

1895.

A rule was made that the sum of 6/- should be the regular charge for foster mothers for all children boarded out from the Refuge. Cases of contagious diseases certified by a doctor were no longer admitted to the Refuge but sent to the lying-in ward of the Samaritan Home. No girl outside Canterbury was to be admitted without corroborative evidence as to her circumstances.

1896.

On the fifth anniversary of the House of Refuge (29th September, 1896) 204 girls had passed through the institution.

1897.

Mrs. Grace Neill visited the Home in 1897 and very strongly recommended that a small house should be built in the grounds for confinement cases. Plans were prepared and estimates passed by the general committee of the Board. The new ward was satisfactorily completed in May.

1900.

An allowance was increased from 10/- to 15/- per week for supplying inmates and babies with clothes. A free telephone was granted by the Government from 1899 till 1909, when half fees were charged. The whole question of the finances and the contract between the Board and St. Saviour's Guild was referred to the Institutions Committee for report.

1901.

A rule was made that if a girl ran away from the Home she was immediately advertised by name in the newspapers as lost. The committee decided to obtain the assistance of the deaconesses in visiting and making acquaintance with the girls and in finding homes for their babies.

The Honorary Superintendent of the Refuge reported that the subsidy of £340 per annum was insufficient. The number of inmates had been very large, and this, with the increased cost of necessities, especially fuel and medicine made the expenses very heavy. The Superintendent considered that she was acting in strict accordance with the Board in making the laundry work not so much a source of income as a means of providing wholesome employment for the inmates when they were well enough to do it. In 1903 the vote was increased to £330. The average number of girls dealt with was about twenty. They agreed to remain in the institution for six months and work in the laundry and other departments. Since they were kept for a considerable time, the children were better attended to, than if the girls went out to service.

1903.

1907.

In October, the Board had three building sites on the premises of the Refuge, two were approximately a quarter acre each with the frontage to Essex Street, and the other over a quarter acre with an entry facing Gatherer Street.

Female Refuge - Essex Home, contd.

1910. The control of the Female Refuge was assumed by the North Canterbury and Charitable Aid Board from September, 1910, when sketch plans and estimates were prepared for a building at an approximate cost of £1,850 for second confinement cases, providing accommodation for ten to twelve inmates. Application for admission of persons resident in other districts were not to be entertained owing to the requirements of the North Canterbury district.

1911. A quarter acre site at the side of the existing institution on which it was proposed to erect a building, was inspected in 1911. This extension would enable the Board to do without the Samaritan Home (Addington Prison) which was used for housing men and women of the vagrant class. Authority was given for work to be carried out in the extension of the nursery and balcony.

Permanent nurses were provided with uniforms on the hospital scale. They asked if the Board would extend the privilege of wearing badges similar to those issued by St. Helens and the Forth Street Hospital, Dunedin. The Board decided to supply a badge free of charge to each nurse after passing her midwifery examination.

At the instigation of Mrs. Cunningham, the Board agreed to divide the Refuge into three divisions, namely:-

- (1) Women to be confined of their first child.
- (2) Aged and infirm women.
- (3) Women to be confined of other than their first child.

1914. The Ladies' Committee which managed the institution till the Board took over resigned in January, 1914, when Miss Pike was appointed Matron. A covered way connecting the old and new portion of the Refuge was erected. Interior renovations were carried out and a contract entered into for the electricity supply. The buildings were valued at £3,736 in 1915.

1918. The title of the institution was altered in 1918 to the "Essex Home."

The question of utilising a portion of the Refuge as a maternity home was discussed, and it was agreed that the wives of men who were unable to afford the fees of the maternity homes might be admitted. Various local authorities and societies were notified that the home was available for married women. A midwife with Keritane training was engaged at this period.

1924. A suggestion was made that a new St. Helen's Hospital should be erected in Christchurch to deal with all maternity cases dealt with at St. Helen's, the Essex Home and possibly the Salvation Army. The Department advised that the control would be under the North Canterbury Hospital Board. Dr. Jellett interviewed the Committee regarding the transfer of the Essex Home patients to St. Helen's when that institution had more accommodation. A similar application was to be made to the Salvation Army Home, and the effect of a new,

Female Refuse - Essex Home, contd.

larger St. Helen's would be to enable the establishment of:-

- (1) A department for ante-natal advice.
- (2) An extra maternity department.
- (3) Capable of training students and midwives.
- (4) To be of assistance to medical men desirous of specialising in matters connected with maternity.

It was suggested that the new institution might have a separate wing for private patients, and that possibly, in the future, a further wing for giving effect to the Karitane system of dealing with babies.

1925.

The Department of Health asked the Board to agree to the opening of an ante-natal clinic at the Essex Home. This had been to a certain extent carried out by the Medical Officer in charge of the institution for some time past. The Department appointed a nurse to attend all the clinics, St. Helen's, Salvation Army and Essex Homes, and the salary was paid by the Department.

1928.

In March, 1925, the Board agreed to the proposal that St. Helen's should be erected on the Essex Home site and administered by the Board. Nothing further was done till 1928 when plans were inspected. Some members were much against the site, in a dingy neighbourhood and unsuitable for the purpose.

1930.

A deputation of ladies interested in the rebuilding of St. Helen's waited on the Board in May, and strongly opposed the project of building on the Essex Home site and control being placed in the hands of the Hospital Board which was already embarrassed by the control of many unprofitable institutions. They wished the control to continue under the Government not the Hospital Board, as arranged in an agreement in 1925. The women felt that the St. Helen's Hospital was a gift to New Zealand womanhood from an earlier Government, and no Minister of Government should cramp the usefulness of St. Helen's. It could not be made efficient until it was rebuilt and enlarged. Because of the pronouncement of the Government regarding the strictest economy owing to financial stress, the building of the new St. Helen's Hospital was abandoned.

The Nurses' and Midwives' Registration Board notified that the Essex Home would cease to be a training school as from March, 1931. The Board entered a strong protest but to no avail. The action was taken with all schools previously approved for midwifery training with the exception of the four main St. Helen's Hospitals. It in no way reflected on the efficiency of the training carried out at the Essex Home which was recognised as uniformly good.

Female Refuge - Essex Home, contd.

1931. When the Government was faced with drastic economy, the Department withdrew the services of the nurse who attended the ante-natal clinic, and for whom the Department paid a salary.
1933. Considerable overcrowding occurred both at Essex Home and St. Helen's, mainly owing to making provision for the wives of relief workers. Arrangements were made for cases to be sent to private nursing homes in the city, and some cases were sent to the Board's smaller maternity hospitals. To meet the emergency in a small degree, the front balcony of the Home was closed in to make room for four more beds.
1937. Miss L. Pike, Matron, sent in her resignation, but the Board, unable to find a suitable person at the time, asked her to remain for a further term. Incidentally Miss Pike was an examiner for the State Examinations of midwives and maternity nurses from 1932. When she retired as Matron, she was appointed to carry out the social services required at the Home. Miss Crisp was then appointed Matron.
1938. The Nurses and Midwives Registration Board gave approval in April for the training school to be re-opened. Trainees at one time not to exceed eight in number. (For the year ending 1940, 320 babies were born in the Home.)
- So that the inmates might benefit under the Social Security scheme and the Home should be classed under the heading "Hospitals" rather than "Benevolent Institutions", all matters relating thereto were, therefore, undertaken by the Hospital Committee.
1941. A new laundry was built in 1938. The ante-natal block, isolation block, upper nursery and other additions were completed in 1941.

MATRONS OF THE REFUGE:

Miss Annie Hismo	1878
Miss Galbraith	1879
Mrs. Marriott	1890 - 1895
Miss Hewes	1895 - 1911
Miss Pike	1914 - 1937
Miss Crisp	1938.

ST. HELEN'S HOSPITAL.

1901.

The Right Hon. R. J. Seddon was the founder of the St. Helen's Hospitals which started a move as maternity homes other than actual hospitals. The St. Helen's Hospitals were, therefore, a development of the policy begun by legislation in 1901 when the Nurses' Registration Act was passed, followed in 1904 by the Midwives Act, the latter providing that after a certain date only those midwives who were duly registered would be qualified to practise on their own account. Hitherto, women wishing to become midwives had to go to Australia or England to be trained. The first St. Helen's Hospital, established in Wellington in 1905 was for the purpose of training nurses. The Hospitals were not intended to be "charitable" institutions; they were intended to be self-supporting, and were opened for the use of women in cases where the husband's income did not exceed £5/-/- per week and in cases of large families, £6/-/-.

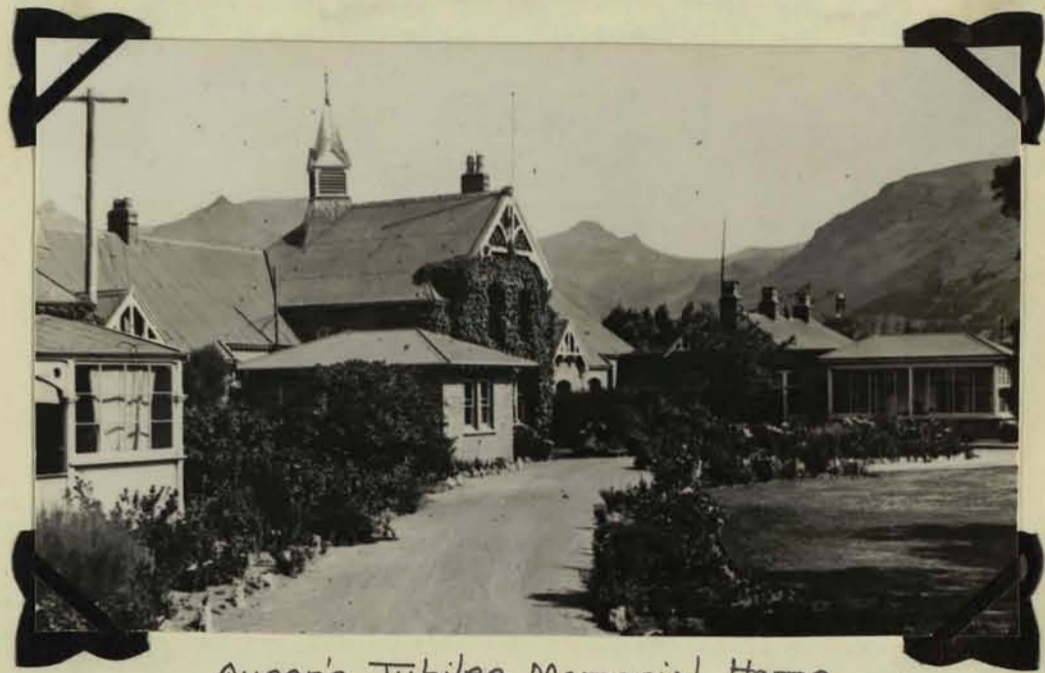
1923.

The Department of Health was approached in 1923 by the Auckland and Wellington Hospital Boards with a view to the Department taking over the St. Helen's Hospitals. It was suggested that the proposal might be acceptable to the North Canterbury Hospital Board, if so, the Department would hand it over free of cost and as a going concern. As the Board was not in favour of taking over the old wooden building in Durham Street, Christchurch, was the Government disposed to consider making a grant to enable the Board to erect suitable and up-to-date accommodation? Plans and accommodation for the proposed St. Helen's Hospital on the Essex Home site were discussed in 1928, and in 1930 a deputation of Christchurch women interested in the rebuilding of St. Helen's waited on the North Canterbury Hospital Board and also approached the Minister of Health definitely opposing the project of building on the Essex Home site.

1930.

The Board decided not to press for negotiations with the Department of Health with regard to the control of St. Helen's. This resolution was conveyed to the Department and nothing further was heard of the matter, other than newspaper controversial and libellous articles.

When the Government considered doing away with State Maternity Hospitals, the Hospital Boards were urged to provide for and build annexes or separate hospitals to run in connection with the general hospitals. At one time our hospitals were allowed to train midwives, but in place of this only maternity nurses were trained. Difficulties arose and protests were made by the Hospital Boards regarding restrictions made by the Nurses and Midwives Registration Board.



Queen's Jubilee Memorial Home.



Nurses' Home.

THE QUEEN'S JUBILEE MEMORIAL HOME, WOOLSTON.

The Queen's Jubilee Memorial Home is a public institution established (under the provisions of the Hospital and Charitable Institutions Act, 1885) by the United District Charitable Aid Board for the reception and maintenance of aged poor persons.

1887.

In 1887, the Board appointed a committee to formulate enquiries as to a means of making better provision for the accommodation of the aged and infirm persons in receipt of relief. £500 was placed on the estimates for purchasing sites for new buildings, and £2,000 for cost of erection, yet it was not intended to press for new premises if the existing buildings at Armagh Street and Ashburton were adequate for present needs. The Queen's Jubilee Memorial Committee representing the Citizens of Christchurch conferred with the Board on the subject and offered to place £1,600 to the £2,000 already mentioned for the purpose of erecting a Home for the aged poor of both sexes. Captain Garcia, Honorary Secretary, Messrs. R. J. S. Harman and G. P. Hulbert represented the committee. To carry out their wishes, the Board undertook to expend the said donation and subsidy thereon on that object only. A site of six acres at Woolston at £75 per acre was chosen for the home. Competitive plans were prepared at the instance of the Jubilee Committee and the plan was marked "Comfort with Economy" by S. Hurst-Seager, A.R.I., B.A. was agreed upon.

The contract for the building was signed by Wm. Smith on the 12th December, 1887, for £3,532. The ceremony of laying the foundation stone was well planned and carried out in a most impressive manner.

1888.

In May, 1888, the Government allowed the Board the use of the Immigration Barracks at Addington till the Home was ready for completion. It was determined that the institution should be known as the "Queen's Jubilee Memorial Home." Some of the old material removed from the Armagh Street Depot was utilised for outbuildings. The grounds were planted with trees presented by the Government; the drainlaying from the building to the river was carried out; £50 was voted for the formation of a road and suitable gates were erected.

The institution was brought into use in December, 1888. The original accommodation was for about thirty-six inmates. The management of the Home was left to the Charitable Aid Committee. Dr. McBean Stewart was appointed Medical Officer in conjunction with the other institutions and outdoor relief.

His Excellency the Governor and Countess of Onslow visited the Home and expressed their gratification with it and bestowed proof of their kindly interest in the aged inmates by a number of appreciable gifts.

1895.

In 1895, the Trustees of the Late James Eaton announced a bequest to the Queen's Jubilee Memorial Home. The following is a copy of an extract from the will:-

"I direct my said Trustees shall stand possessed.

Queen's Jubilee Memorial Home, contd.

"of my said real Estate upon trust forthwith to sell the same by public auction or private contract for the most money and best price that can be reasonably obtained for the same and I declare that my said Trustees or Trustee shall stand possessed of and interested in the proceeds of such real Estate when and as the same shall be received upon Trust to pay the same to the Trustees or Trustee of "The Queen's Jubilee Memorial Home" for the aged poor of both sexes, to be applied by the Trustees or Trustee of the said Home for and towards the support and maintenance of the said Home."

1896.

When the institution was built it was contemplated that an addition would soon be required. The time had come when accommodation was required for men, and also a sick ward was much needed. The Supreme Court made an order authorising the income from the investment of the Eaton bequest trust fund to be expended in the purchase of such land, and erection of such buildings, etc. (under direction of the Court) as might be a permanent improvement and extension of the objects for which the Home was founded.

The trustees of W. Mason, who became an inmate of the Home, sold some of his property which realised £140. This was paid to the Board on the condition that he was cared for during the remainder of his natural life, and for this purpose the Board built a room especially for him.

At a public meeting in the City Council Chambers to consider the best steps to be taken to celebrate the 60th year of Her Majesty, Queen Victoria's reign, it was decided to raise public subscriptions towards the cost of extending the Jubilee Memorial Home. Subsequently, £842 was handed over to the Board with other donations from private individuals, and with the hope that the money might be expended in comfort and accommodation rather than in architecture.

The Institution Committee obtained competitive designs for an additional wing to the Home in brick. The Board favoured the plan giving the greatest amount of sunshine and apartments for twenty-four single persons and eight married couples with sitting-room and other offices. This comprised the second octagon, the rooms being 12' x 12' and 11' x 9' in size with a fireplace in each for the married couples.

Tenders were received through Strouts and Ballantyne, Architects, the lowest being that of Wm. Smith (£1,640) who built the existing building ten years before, and this was accepted.

1898.

The Board opened up negotiations for the purchase of two to three acres of land adjoining the Home grounds for which funds would be forthcoming out of the Eaton bequest income subject to the approval of the Supreme Court. This was granted and the land was transferred to the Board on the 23rd December for the sum of £570. Two acres were purchased from Joseph Snelling for £270, and five-eighths of an acre from Jonathan Garnet for £100.

A bequest was also made from the estate of Thomas Tibble. One Fourth of his property was left to the Charitable Aid Board, the annual income to be applied for the provision of wine, spirits, beer, tobacco and other luxuries for the Queen's Jubilee Memorial Home.

Queen's Jubilee Memorial Home, contd.

1899. The Board had to determine what course to adopt regarding its claims on recipients of Charitable Aid and inmates of institutions who became holders of old age pensions. By law the Board was under the necessity of requiring the pensioners to hand over their certificates. This opened up the question of whether all inmates of institutions should be granted weekly allowances.

1900. A great improvement was effected in 1900 by the distemper of the walls of the large dining hall (65' x 20') which is in the centre of the building.

The Jubilee celebrations were considered incomplete unless something was done for the old people, so arrangements were made for them to visit the Exhibition, the Tramway Company conveying them. At the same time a bright portrait of Her Majesty was produced in gold and handed to each inmate. In November, 1904, their Excellencies the Governor and Lady Ranfurly visited the Home.

1902. A second deep well was sunk as the water supply had considerably decreased and trouble had been caused by quicksand. The Board purchased a cottage adjoining the Home with $\frac{1}{2}$ of an acre of land intersecting the grounds. This purchase made the property complete in rectangular shape.

1903. £100 was applied to the installation of an acetelene gas plant in accordance with a plan for the supply of gas. The Board accepted the Gas Company's offer to extend the gas mains up to the premises.

1906. Mrs. Grace Neill of the Health Department, Wellington visited the Home with the Institutions Committee. Notwithstanding the Board's instruction to engage a certificated nurse, it appeared undesirable to disturb the existing arrangements. The present nurse would do many things that a certificated nurse might not undertake, and it was considered that if a certificated nurse was employed there would be friction. The question came up again in 1910 when the Lady Superintendent of Nurses pointed out that there never would be satisfaction till the chronic wards were separated from the Home and some minor internal alterations were carried out. The Board resolved that all nurses employed in the Board's Institutions should be under the direct control of the Matron of the Hospital, so far as their nursing duties were concerned.

1915. The Public Works Department notified the Board that electric power was available in the Woolston district. The Board's engineer was instructed to have electrical fittings put into the Home.

1924. In January, 1924, the Board confirmed that complete control of the Benevolent Institutions, including Infirmaries should be under charge of the Master and Matron, or Matron, or qualified Nurse, as the case may be, and any other assistance required, beyond trained nurses, should be hospital aids, the Lady Superintendent of the Hospital to act as an inspecting Officer for the Board.

Queen's Jubilee Memorial Home, contd.1928.

In 1928 the Christchurch Diamond Jubilee Celebrations Committee asked the Board to arrange a dinner so that the old ladies could celebrate on the 27th May. Speeches were made by Sir Maui Pomare (representing the Government) and the Mayors of Auckland, Akaroa and Lyttelton.

A further addition was made to the Home in August, by the erection of a sun porch which was situated almost due north and immediately facing the entrance gates.

1929.

A great loss was sustained by the death of Mrs. Annie Herbert. She had been a most prominent social worker and was the first Chairwoman of the Board's Benevolent and Institutions Committees. She had devoted much time and kindly interest, particularly with regard to the inmates of the Board's charitable institutions. The City Council called a meeting of representatives of various social organisations to consider the question of a memorial. It was decided to extend the sun porch as a befitting memorial to one so beloved by the inmates and all who came in close contact with her.

1930.

The attention of the City Council was drawn to the condition of the land in the Jubilee Home being frequently flooded with tidal water owing to the drain overflowing where previously there had been a floodgate.

Amongst valuable gifts and bequests bestowed since the inception of the Home, Mrs. S. Enson, who was a member of the Board, left a small legacy for the benefit and comfort of the inmates. Another member, Mr. James Storry presented an oil painting by John Gibb dated 1870, Mrs. Freeman of Christchurch, who went to live in England, gave "The Light of the World", and Mr. Jameson a collection of pictures.

MATRONS OF QUEEN'S JUBILEE MEMORIAL HOME.

Mrs. Richardson	1888 - 1892
Miss Higgins	1892 - 1920
Miss E. K. Webster	1920 - 1924
Miss M. Johnson	1924 - 1925
Miss F. Gill	1924 - 1938.
Miss Staunton	1938 - -

WALTHAM ORPHANAGE.

1905. The Board purchased a property in Austin Street known as "Willow Glen" with about three acres of land for £1,200. The building was erected as a private residence and was well adapted for the purposes for which it was intended. A few additions had to be made and a playroom added, an increased water supply was also necessary. The Matron, Mrs. Carpenter with her staff and the children moved to Waltham from Lyttelton in May, 1905. Mrs. Carpenter resigned in March, 1906 when Miss J. Donaldson filled the position and held the Matronship for nineteen years.
1906. A serious fire occurred in November after midnight which caused considerable damage to the buildings. The courage and promptitude of the Matron, Miss Donaldson, saved the children their lives and for her bravery, the Board made her a handsome presentation.
1914. Further additions made to the buildings in 1914 included girls' and boys' cubicles, dormitories, dining room extension, new washhouse, and extension of fire escapes.
1917. Owing to difficulties at the Burwood Hospital, it became necessary to use the Waltham Orphanage for infectious cases. This proved a most satisfactory arrangement, but brought forth emphatic protests from the residents of the neighbourhood. Whilst the institution was used for this purpose, the Orphanage children were transferred to Sumner, and unfortunately, a serious outbreak of diphtheria took place while they were in their temporary residence.
1927. Under the Child Welfare Amendment Act of 1927, the Waltham Orphanage was registered as a children's home. The Welfare Branch of the Education Department took charge of all children on their arriving at school age. It was considered an advantage as the Department had special facilities for finding suitable homes and later on placing the children in satisfactory employment. The Department took over the custody of the children at a cost of 17/6 per week for babies and 15/- per week for children up to the time of leaving school, the initial outfit was supplied on condition that medical and dental treatment would be given free of charge. In March, 1930, the children were transferred.
- On many occasions children were admitted who had both parents living; in some cases the children had been deserted or illness had overtaken the parent, in these instances the Board admitted the children at least temporarily.
1940. The Orphanage was used temporarily for convalescent soldiers. A very few children were in residence, and those were promptly transferred to the Cholmondeley Home or to their own homes.
1941. Owing to the heavy cost of maintenance, a suggestion was made that the Orphanage should be closed. It was realised that the Board met a great need in the community in housing children temporarily (or otherwise), whereas it was not practicable for other organisations to act as readily in cases of urgency. Matters relating to the future functioning of the Institution were considered, and from a legal aspect it was deemed unwise to take any steps that might unduly bias the existing bequests which partially support the institution. The name was changed from the "Waltham

Waltham Orphanage, contd.

Orphanage" to the "Children's Home" in 1941.

MATRONS.

Mrs. Carpenter	1900 - 1906
Miss Donaldson	1906 - 1924
Mrs. Ovington	1924 - 1926
Mrs. Barker	1926 - 1930
Miss E. M. Jones	1930 - -



Waltham Orphanage. Cecelia Street

Theresa Green Home
? 1960

THE ARMAGH STREET DEPOT was used for the casual housing of poor men who required temporary accommodation. Its origin is a mystery. It was at first a Police Depot, but of when that was built there seems to be no record. In 1865 the Executive Council of the Provincial Government authorised the reshingling of it. This fact would point to a very early origin indeed. There is no record available of this building at the City Surveyor's Office. When the institution was abandoned as a Police Depot, it was used for housing old men and women. No date can be assigned to this, either, as there is no record of it in the papers of the Provincial Council. An application in 1928 at the Police Court brought no results. As the other institutions of the Board developed the use of the old Depot gradually disappeared and was replaced by a brick building which afforded temporary shelter for swaggers or men waiting to be admitted to "Tuarangi".

ARMAGH STREET DEPOT.

The Armagh Street Depot, originally the Police Barracks, was situated behind the present Tuberculosis Dispensary. There seems to be no record when it was built. Enquiries at the Police Court brought no results as to the date of building, and no record can be found among the Provincial Council papers. The building was also used as a depot for immigrants during the period when large numbers were being introduced into Canterbury. In 1865 the Executive Council of the Provincial Government authorised the re-shingling of the building. Apparently in 1878, a temporary Hospital and Charitable Aid Board was in existence, and on taking office it found that this building was used for charitable aid cases which had been in hospital but could not remain there. They had been most successfully treated and dealt with in this building. The Board considered that the Armagh Street Depot was unsuited for either charitable aid or chronic cases, and they learnt that representations had been made to the Government on the subject prior to the formation of the Board. It fully represented to the Government the great difficulty in not having a suitable building for charitable aid cases.

1865.1878.1886.

Mr. and Mrs. Wills, Master and Matron, resigned in October, 1886, after a lengthy occupation of office. Mr. and Mrs. Richardson replaced them. The Master and Matron were notified that they were responsible for the efficient management of all duties in connection with the working of the institution, that their whole time was to be devoted to the service of the Board; that the nursing of women in child-birth together with the supervision of domestic affairs generally was a portion of their duties. Some able-bodied inmates who were being maintained could be called on for assistance when necessary.

A copy of the by-laws and regulations was forwarded to the Colonial Secretary in November, 1886. The average number of inmates (including children who were required to attend school regularly) numbered 39.3 for the year. The approximate figures relating to the maintenance of this institution showed a total expenditure of £612.15.7. which included a proportion of the Christchurch Medical Officer's salary. Until the recent change of management, the accounts were incorporated with those of charitable aid generally.

1888.

It was decided to close the establishment in August, 1888, and eleven of the inmates were transferred to the Jubilee Home. The buildings not required were sold by auction for removal. Application was made to the Premier for a portion of the gaol at Addington for temporary night shelter for men. As the building was in a very unsatisfactory condition, being very old and unsuitable in construction, it was considered that the premises of the old police barracks should be demolished and a cottage erected. The ancient and historical police barracks were removed. The new building, established in 1894 at a cost of £479, was built in brick. There were single rooms barely furnished, a general kitchen with fuel provided, and a ration of 1/9d. was issued to men seeking temporary shelter. By-laws and regulations for the management in conjunction with the Government regulations were approved. Mr. and Mrs. Reeves were appointed caretakers.

Armagh Street Depot.

For many years the Depot was used as a temporary night shelter for men who passed through the city, or who were awaiting admission to "Tuarengi" at Ashburton.

1934.

In July, 1934 the Depot and its furnishings were made available to Toc H for the purpose of assisting young men who were unable to afford lodgings or board during a temporary stay in Christchurch and who were of the skilled or student type definitely struggling to obtain employment. The house was named the "Friendly Inn" and during the winter months was aided by a weekly grant from the Mayor's Relief Fund and electricity was given without charge from the Municipal Electricity Department. As an indication of the extent of the work carried out over a three-monthly period, 376 beds and 1,057 meals were provided.

As the depot was again vacated, the Benevolent Committee, as a temporary measure, decided to house a family of seven who resided on the premises for over a year. Since then the building has not been occupied.

SAMARITAN HOME.1896.

In 1896 the St. Saviour's Guild (Bishop Julius, Warden) proposed to make use of the Addington Gaol as a home for destitute persons. Application was made to the Charitable Aid Board for a grant and it was explained that the Government was willing to allow the use of the gaol. If the Guild could collect £100 a year in voluntary subscriptions it would be entitled to a grant from the consolidated fund of £120, and also £ for £ subsidy from the Government. It was intended to deal with cases of helpless and indigent persons of both sexes for whom there was no provision elsewhere, inebriates and lying-in cases (second cases). If the Board would take charge of the buildings, the Guild would bring in their staff of workers to assist, if not, it would have to form a "separate institution" and ask the Board to subsidise. The Board considered the proposals with reference to the establishment of the Samaritan Home at Addington and approved the scheme.

CLASS OF INMATES:

"The Guild shall undertake (a) to provide permanent shelter and maintenance for aged, helpless and destitute women for whom, through loss of character, there is no adequate position. (b) to provide for lying-in cases (of unmarried women) other than first births."

CONDITIONS:

"The Guild may provide for such cases to the full extent of the means allowed by the Board, but if it is required by the Board to receive a larger number of such cases than can be maintained by the grant, a further payment per head will be required. The right of admission shall belong to the Guild but the Guild shall receive all cases recommended by the Board. The Board shall have the right of nominating two or more of its members to serve on the committee of management. They agreed to make a grant of £200 in consideration that the duties undertaken by the Guild were efficiently fulfilled and that proper vouchers for accounts were produced for audit. As the agreement applied only to the maintenance of women, any men in residence should be required to leave and apply if necessary to the Board for relief."

As the accommodation at the Armagh Street Depot (old Police Barracks) used as a temporary shelter for swaggers and suchlike was in an unsatisfactory condition, members of the Charitable Aid Board spoke strongly of the need for fresh buildings.

The Christchurch City Council and various local bodies considered that representatives should be on the Board of management of the Samaritan Home, and many of them were distinctly against the incorporation of the Samaritan Home as a "separate institution". The Honourable W. C. Walker introduced a Bill enabling local bodies to be represented with a view to remedying an unsatisfactory state of affairs. Representatives of twenty-seven local bodies contributing through the Charitable Aid Board to the maintenance of the Samaritan Home were elected.

In July, 1896, Mr. A. F. Blakeston, Honorary Secretary, notified the Charitable Aid Board that the building at Addington (owned by the Government) would in future be known as the "Samaritan Home" and Nurse Beveridge from the Christchurch Hospital was appointed Matron.

Samaritan Home, contd.1898.

The Board's subsidy was discontinued in 1898. A petition was forwarded to the Government and the Samaritan Home was legally established as a separate institution under the Act, the Board being required to contribute towards its support.

1902.

It was proposed to close the men's department of the Samaritan Home in 1902 on the understanding that the Charitable Aid Board would make provision for permanent as well as casual or temporary cases such as were dealt with at the Samaritan Home. It was decided that the cases should be admitted to the Depot. The question arose as to dealing with the deserters from the Old Men's Home at Ashburton who came to Christchurch to gain admittance to the Samaritan Home. The Board had had to meet the passages of these men backwards and forwards from Ashburton. It was considered that the Samaritan Home was an incentive for the Ashburton men to desert.

1910.

A conference of representatives of the Samaritan Home, Herrick's Home and Charitable Aid Board was held. The Samaritan Home Trustees notified their willingness to take a certain class of men as far as accommodation would allow, men who were not fit subjects for Herrick's Home, or through misconduct, were refused admission to the Charitable Aid Board's institutions. The Samaritan Home was a half-way house between the Charitable Aid institutions and the gaol. In 1910, the average daily number of inmates numbered seventy-three. Vagrants of both sexes, inebriates and others were committed by the Magistrate.

In 1911 the Charitable Aid Board was notified that the Government was desirous of resuming possession of the old Addington Gaol (known as the Samaritan Home). The Board made provision for housing the female inmates at the Female Refuge and to transfer them as soon as the proposed building was erected.

POVERTY and PAUPERISM.

It is of the utmost importance accurately to distinguish between poverty and pauperism; for by confounding them, poverty is dishonoured and pauperism countenanced. Supply poverty with means and it vanishes, but pauperism is the more confirmed. Poverty is a sound vessel empty, but pauperism is not only empty, but cracked. Poverty is a natural appetite, merely wanting food - pauperism a ravenous atrophy, which no food can satisfy. Poverty strives to cure itself - pauperism to contaminate others. Poverty often stimulates to exertion - pauperism is an arch-hypocrite. Poverty has naturally a proud spirit - pauperism a base one, now servile, now insolent. Poverty is silent and retiring - pauperism clamorous and imposing; the one grateful, the other the reverse. There is much that is alluring in poverty, but pauperism is altogether hateful. It is delightful to succour the one, and irksome to be taxed for the other. Poverty has the blessing of Heaven as well as those who relieve it - pauperism, on the contrary, has nothing in common with the Christian virtues. -

Thomas Walker.

(The original document was undated
and too brittle to handle.)

CHARITABLE AID.

1853.

As far back as 1853, three years after the settlement of the Province, the Provincial Council undertook the responsibility of relieving the necessitous poor of the community. In that year, the estimates included £50 for paupers and the mentally deficient.

1856.

Three years afterwards the vote had risen to over £800.

1861.

In 1861 the Municipal Council Ordinance became law providing for:-

"The preservation of the health of the public and the care and maintenance of the destitute poor and sick."

The following shows how the cost for outdoor relief etc. had increased in the first 13 years of the Provincial Council's responsibility (1853 - 1866).

1853	£50
1855	£150
1856	£800
1861	£1,120
1863/4	£2,250
1866	£4,721

An idea as to what the different items of expenditure were may be got from the 1866 account which was made up by -

Allowance to destitute poor	£2,223
Rations	719
Funerals	121
Clothing	67
Wages for charitable aid gang (Relief workers making roads)	1,290
Road metal	287
School fees	2
Medical attendance	12
	<hr/>
	£4,721
	<hr/>

About this time (1861) a Poor Relief Board was established -

"Consisting of such men as may be willing to give in charity the most valuable gifts of time and labour, and to whom safely might be confided the management of charitable aid funds."

Alexander Black (or Back) who had filled the position of Provincial Treasurer from 1861 was appointed as - "Officer to administer the charitable funds."

SESSION X X V 11
NO. 57
6TH. JULY 1867.

2017 (MM)

With reference to the large expansion which is now being incurred by your Department for the purpose of giving relief to such of the enemployed as may not be able to obtain work elsewhere, and view with regret that the tendency appears to be towards a very considerable increase in the number of enemployed. I have the honour to draw your attention to the following remarks on the subject and which I consider is highly desirable, should be commenced and carried out as soon as possible.

The employment of the Government of a large party of relief who appear to look upon the services given to them in the light of a charity to which they are almost entitled, as a right, rather than as a equivalent for a few days work, not only impracticable to the Government as members of labour, but of mischevious consequence to the labour market of the Province at large, and that in a way perhaps the most objectionable of all, mind the lowering of standard of the labour to be rendered for wages. To counteract these evident results of the present system, I propose in place of daily wages to substitute piece work, and I have to request that the Charitable Aid Gang by employed in future upon the breaking of stone for road metal.

For this proposal 500 yards of stone, upon which the men may now commence work, is lying on the Goal site, Lincoln Road, and will be pointed out to the person you may appoint as overseer by the Provincial Engineer.

The price for breaking should be say 1/6 per yard, and certainly not exceeding 2/- per yard, a rate of which an ordinary labourer can make good wages, while it should as a matter of course by borne in mind, that as the labour of the Chartitable Aid Gang is paid for, not for the want of it, but for the temporary assistance of persons in distress, the price for piece work should be adjusted so as on the average not to greatly exceed the former rate of day wages of 5/-, upon this point the overseer would be competent to inform you.

The necessary hammers, guages will be supplied by Government, and issued under the supervision of overseer who will also measure and certify to the work done.

(Signed) J. E. Stewart,
Secretary for Public Works.

Charitable Aid, contd.1863.

The office was in the old Immigration Barracks in Armagh Street opposite the old Provincial Buildings. (Subsequent holders of the position were:- R. Armstrong, D. M. McKay, James Callender, Dalgleish and J. E. March).

1872.

Accommodation in these Barracks was afforded to immigrants newly arrived for one week after landing and no longer without special permission from the Immigration Officer. The Immigration Officer required adult immigrants to do four hours work daily during their stay in the Barracks.

For the maintenance of those who from accident or old age or other causes were unable to support themselves, the Provincial Council provided liberally. The Charitable Aid Department was run at a cost of £4,500. It had under its charge about ninety persons, mostly widows and children or women deserted by their husbands. The number of men who had, from various causes, lost the use of their limbs, and were incapable of doing anything but light work, were employed in the public domains planting and on the railway lines where the labour was easy and did not require great despatch. Consequently on the rapidly increasing population of the province, especially in the towns, it became necessary to establish some institution for reclaiming from evil, the boys and girls whose parents neglected to look after them. It was, therefore, decided to build a large Industrial School. It was intended that the inmates should be taught various trades and occupations. There were many private Charitable Institutions at this time in connection with various religious denominations such as - The Benevolent Aid Society, the House of Refuge for Females, the Society of St. Vincent de Paul, also branches of the different Benefit Societies as the Masons, Oddfellows and Forresters.

1873.

The cost of the Charitable Aid Department had risen to well over £5,000.

1875.

Administrator James Callender reporting upon the working of the Department since 1874 stated that money allowances were paid out monthly to destitute persons and those having charge of destitute children boarded out. Much time was spent hunting up deserting husbands and putative fathers of illegitimate children, frequent attendance at the Magistrate's Court laying information and suing in various cases, also finding suitable nurses for destitute sick persons (women confined in their own homes and children whose parents were in hospital or too ill to attend to their families).

At this time the Government was corresponding with the Australian Colonies in an effort to make reciprocal arrangements so that wife deserters could be arrested and dealt with as the law directed, but there were difficulties in the way which prevented any immediate arrangements.

1877.

Some of the County Councils washed their hands of the responsibilities of charitable aid, and the Christchurch Municipality alone showed a desire to grapple with it.

Charitable Aid, contd.

Local Bodies were asked to do their share of the work by the annual payment of subsidies from their endowments. It was proposed that a system of charitable aid should be supported in part by such subsidies and by private contributions, the management to be in the hands of a committee elected by the people. If Government aid was to be removed and the substitution provided by law was temporary, the necessity for calling upon the public for help was obvious.

1878.

The question of the management of hospitals and charitable aid was by no means settled. The Hospital Board declined to revise their rules as they had intended, considering it not worth while until a permanent Board had been appointed. That which had been gasetted was only a temporary one. The members of the Charitable Aid Department were staggered at the amount of distress they were called upon to relieve. It had reached almost £300 in one month, one-half given in the shape of rations and the rest in hard cash.

1879.

In 1879 there were 705 persons receiving relief - 86 males, 120 females and 499 children. Some of these were unable to work through sickness or accident, many were widows and others were deserted by their husbands, some of whom were in gaol or in lunatic asylums. The following is a return of expenditure on charitable aid at that period:-

City of Christchurch	£2,457. 3. 1
Borough of Sydenham	518. 12. 10
" " Timaru	484. 18. 6
" " Rangiora	70. 9. 5
County of Selwyn	1,017. 4. 7
" " Ashley	228. 5. 9
" " Akaroa	78. 8. 6
" " Ashburton	60. 16. 0
" " Geraldine	139. 10. 9
Destitute Children boarded out	762. 2. 8
Wages on Relief Works	1,080. 6. 6
Salaries	817. 3. 6
	<hr/>
	£7,715. 2. 1
	<hr/>
Hospital Cottage, Akaroa	£563. 14. 4
Casual Ward, Lyttelton	158. 14. 1
Ashburton Home	971. 13. 1

These figures include an item "Wages on Relief Work". As became the custom 60 years afterwards, there were relief workers employed in the Government Domain at from 3/- to 4/- per day. The Domain Board at that time had no funds to contribute towards the wages of these men.

Dr. Hedwill, the Charitable Aid Medical Officer, received £50 per annum and 5/- per visit outside the *city* belt. The system of payment ceased and £200 per annum was paid for attendances on all cases of charitable aid including midwifery cases.

Charitable Aid, contd.1881.

In January, 1881, the Borough of Waimate applied to the Colonial Secretary to be placed on the same footing as Timaru regarding the administration of charitable aid. Advised by the Department in Wellington, the Hospital Board made the necessary arrangements to enable the Waimate Council to administer charitable aid as requested.

The Ashburton Borough gave notice that from 31st March, 1882, the County and Borough intended to administer their own charitable aid. The Colonial Secretary enquired from the Christchurch Board if there were any objections to the change. This opened up an important question. There were some objections and the Board asked the Government to sanction no change in the arrangements until the whole question of Hospital and Charitable Aid had been dealt with. The Ashburton Board was asked if it would agree to pay for the maintenance of any patient admitted into the Christchurch Hospital from the Ashburton District. Ashburton replied that they would not be liable for any outlay incurred for charitable aid except being actual outlay under that head in the County. The Christchurch Board explained to the Government the difficulties surrounding the subject. The Colonial Secretary replied that the cost of maintaining the Canterbury Orphanage and the Home at Ashburton was regularly charged against all Boroughs and Counties in the Provincial District of Canterbury. (Notwithstanding Ashburton's intention to administer their own charitable aid in 1882, the Government notified the Christchurch Board that the Ashburton County and Borough would cease to administer charitable aid.)

1882.

The Hospital Board was asked by the Colonial Secretary to continue the arrangements regarding the administration of charitable aid in the Boroughs of Kaiapoi and Waimate.

The Amuri County ceased contributing charitable aid, undertaking the maintenance of its own cases for the future. In the meanwhile, cases would have to be sent to the Christchurch Hospital until a ward could be established in the County.

In November, the Government requested the Board to consider devising a plan by which funds might be collected from the public for charitable purposes, so as to supplement the vote which the bounty of Parliament had placed at the disposal of the Government. The sum placed on the Estimates for this purpose was only intended to defray half the expenditure, and it was quite necessary the public should contribute a considerable sum. The Board was unable to supply by voluntary contributions one-half of the charitable aid required during the next year.

1883.

On 31st January, 1883, a meeting of the Board was held to confer with representatives from Local Bodies on the questions of providing funds for charitable aid. There were present the Board Members (The Mayors of Christchurch, Lyttelton and Sydenham, Mr. Montgomery, Hon. E. C. J. Stevens, Dr. Turnbull, and Dr. Prins), the Mayors of St. Albans, Kaiapoi and Rangiora, Representatives from the Christchurch City Council, Sydenham and Lyttelton Borough Councils and from Local Bodies (Counties) - Ashburton,

Charitable Aid, contd.

Selwyn, Ashley and Amuri (Road Boards); Mt. Peel, Springston, Avon, Templeton, Lincoln, Ashley, Handeville and Geraldine. The Representatives decided that in their opinion, the proper way to provide for the future maintenance of hospitals and charitable institutions throughout the Colony, was by the Legislature making large and substantial endowments for them out of Waste Lands of the Colony, and in the meantime, the expense of the institutions should be borne by the Consolidated Revenue.

A copy of the resolution was sent to the Board with a request that it be forwarded to the Government.

Soon afterwards the Board was advised by the Colonial Secretary that the Lyttelton Borough repudiated liability for charitable aid, and that the Board would have to take over cases of relief occurring in that borough.

1885 - THE NORTH CANTERBURY AND ASHBURTONCHARITABLE AID BOARD.

(Renamed 8th September, 1886.)

The legislation of 1885 and in particular the "Hospitals and Charitable Institutions Act" which came into force on 1st October, of that year resulted in considerable changes in administration and in the control and management of institutions and organisations whose objective was the relief of distress and want.

It brought into being the North Canterbury and Ashburton Charitable Aid Board (re-named the following year "The Ashburton and North Canterbury United Charitable Aid Board".)

The Ashburton district was united with North Canterbury for the purposes of contribution and distribution of charitable aid under the new Act.

The Institutions which came under the charge of that Act were:-

Christchurch Hospital
 Akaroa
 Christchurch Benevolent Association
 Avonside Society for Relief of Sick
 and Needy
 Armagh Street Depot
 Christchurch Female Refuge
 Lyttelton Benevolent Society
 Lyttelton Orphanage.

The 1885 Act defined what the Hospital districts were and created three classes of Boards:-

- (1) Boards not united with any other district. These were concerned with both Hospital and Charitable Aid affairs.
- (2) Boards of separate districts - confined to maintenance and management of Hospitals only.

Charitable Aid, contd.

- (3) Boards of United Districts - their function was solely that of charitable aid distribution.

The effect of the Act was to consolidate all charitable efforts, and many smaller charitable Societies ceased to operate.

NORTH CANTERBURY and ASHBURTON CHARITABLEAID BOARD.1885.

The first meeting of the new Board was held in the Christchurch City Council Chambers on 17th November, 1885, pursuant to notification by the Government, which appointed Mr. Wm. Vincent to preside. On the motion of Mr. R. West- enra, seconded by Mr. W. C. Walker, Mr. Richmond Beetham was unanimously elected for the office of permanent chair- man. In deference to the wishes of the Ashburton members who had received very short notice of the meeting, the Board adjourned till 23rd November. Mr. J. E. March was appointed Secretary and Treasurer for the time being. The Chairman and Messrs. Vincent and White formed a committee to consider the appointment of a permanent officer and the matter of his duties and salary. The Board adopted the recommendations of this committee and at its meeting on 7th January, 1886, appointed Mr. T. C. Norris as Secretary and Treasurer and Mr. Escott as Clerk. The offices were in Montgomery's Buildings, corner of Colombo and Tunn Streets.

1886.

For the period between 1886 and 1900, the estimated expenditure for the Institution in the North Canterbury district averaged £16,000 per year.

In 1887 the Board approved of £20,000 for the follow- ing items:-

Charitable Aid	£14,000
Orphanage Expenditure	2,600
Maintenance of Children at Burnham	1,000
Ashburton Home	1,300
" " permanent improve- ments.	500
Contingencies	600

On 8th September, 1886, the corporate name of the Board was changed to "The Ashburton and North Canterbury United Charitable Aid Board."

Summary of Expenditure:	Total incurred.	Amounts Refunded.	Net cost.
Institutions -	£	£	£
Orphanage, Lyttelton	2809	166	2643
Old Men's Home, Ashburton	1155		1155
Female Refuge, Linwood	670	198	472
Armagh Street Depot, ChCh.	612	5	607
Distributed Aid -	£		
Food	2603		
Money	2419		
Fuel	299		
Clothing & Bedding	112		
Boots	134		
Medical	391		
Funerals	64		
	6025		6025
Infirm & Invalid Persons Boarded out	359	3	356
Destitute Children Boarded out	1003	55	948

Charitable Aid. contd.

	£	£	£
Brought Forward:	12633	427	12206
Children at Industrial Schools	1973		1973
Relief Works & Stonebreaking a/c.	514	444	70
General Expenses of Administration	1160	30	1130
	<u>£16285</u>	<u>£903</u>	<u>£15382</u>
Total Expenditure			
Less estimated value of broken metal on hand			100
<u>1887.</u> Net result for the year 31st March, 1887			<u>£15282</u>

Expenditure on Relief Works, Stonebreaking, etc.:

Purchase of stone	175	-	-
Paid for breaking, cartage, etc.	<u>341</u>	<u>8</u>	<u>5</u> £514 8 5

A portion of the broken metal, sold to the Christchurch City Council, realised £414.12. 6., and there remained a considerable quantity on hand on 31st March, estimated to produce at least another £100; besides which, £29.11.0 was recovered from local bodies by way of contribution towards the wages of men employed on relief works.

The monthly average number of cases for 1887 was 464. The number of children was no fewer than 1074, in addition to 65 boarded out and those maintained in the Orphanage, Armagh Street Depot and Industrial Schools. The total number of children was approximately 1300.

Destitute children boarded out:-

(except Orphanage)	(Orphanage)
1887 £1003	1912 2463
1892 866	1917 242
1897 705	1922 157
1902 476	1928 169
1907 (603	1932 1504
Orph. (325	1937 126

Children were maintained at the Board's expense in homes selected by the Industrial School authorities. Orphans, indigent and criminal children were admitted and at the discretion of the managers those considered fit were boarded out. The boarded-out system can be traced as far back as 1881.

1888.

For the purpose of assessment of contributions from local authorities for charitable aid (other than hospitals) with the Ashburton and North Canterbury District during the year ending 31st March, 1888, the following figures were shown as the rateable value of the several contributing districts within the Board's jurisdiction:-

Total Counties	£44,965,010
" Boroughs	5,695,644
" Road and Town Districts	6,677,956

The Charitable Aid Board's offices were situated in Montgomery's Buildings at the corner of Tuam and Colombo Streets; later in Worcester Street almost opposite the Clarendon Hotel ("Sun" Newspaper office); and lastly in Armagh Street now used as the Tuberculosis Dispensary. The offices were on the same section as the original Police Barracks; these were replaced by the Armagh Street Depot.

Charitable Aid, contd.GIRLS' HOME, BURWOOD.1900.

Te Oranga Reformatory, Burwood, came into being in 1900 as a result of the drastic reorganisation of Industrial Schools and when the system of "boarded-out" was extended. It was impossible to allow some young women to be at large and the reformatory still maintains its moral qualities. The extensions made also altered the Burnham Industrial School and brought into being the Christchurch Receiving Home in 1900. (The Child Welfare Branch commenced in 1907.) Te Oranga was closed from 1918 to 1928 when it was reopened under the title of "Girls' Home, Burwood". The North Canterbury Hospital Board assisted to a limited degree in supporting children whose parents or relatives were unable to do so.

BURNHAM INDUSTRIAL SCHOOL.

The Executive of the Canterbury Provincial Council sanctioned the use of the Charitable Aid funds in June, 1871, for well-digging, and fencing twenty acres of land at the Burnham Industrial School. Dr. Prins was medical officer from 1872 till 1896. The earliest returns of this institution were not published and for some years after the opening the school was taken over by the Justice Department of the Central Government. By 1879 the number in residence had reached 144. Both sexes were admitted until 1900 when the better type of girl was sent to Caversham Industrial School, Dunedin, the Receiving Home, Christchurch, and some to Te Oranga Girls Home, Burwood; others were boarded-out. The control of Burnham was transferred to the Education Department in 1880.

In 1886 it was the Charitable Aid Board's liability to support children in the Nelson and Burnham Industrial Schools.

Eighty-seven boys enlisted in the forces in 1917 when the numbers dropped from 142 in 1916 to 49 in 1917.

The Industrial school was closed in June, 1918, and the Defence Department took over the buildings as a training centre for the South Island.

The cost to the Board for maintaining children in the Industrial Schools at five yearly periods shows as follows:-

	£		£		
1887	-	1594	1912	-	2364
1892	-	1026	1917	-	1711
1897	-	720	1922	-	835
1902	-	483	1927	-	166
1907	-	1500	1932	-	243

For a number of years infirm and invalid persons were boarded out by the Board. The usual allowance was from 10/- to 12/- per week according to the amount of nursing each case required. The cost in 1899 was £90 and in 1901 £57. Most of the aged and needy people were provided with the pension. The original Old Age Pension Act came into force in 1898. Many preferred to enter public homes where they were cared for and at less cost. In such cases the pension was received by the officers of the Board as payment for maintenance but a proportion was handed over to be expended as the pensioner chose. The pensions were increased in 1905.

Charitable Aid, contd.1894.

Contributions for relief works were subsidised by the Government and the Board received monies from the Winter Work Fund Committee. Voluntary contributions were received from Ashburton, Kaiapoi and Sumner in addition to the several local bodies for the purpose of giving relief for the unemployed in town and suburbs.

The Department of Labour, Wellington, made every effort to relieve the unemployed by preparing work for able-bodied men and so relieve the Charitable Aid Board, and that a portion of the earnings be retained for the benefit of wives and families.

1895.

The practice of issuing rations from the Board's store to local recipients was adopted. The goods, which were limited to a certain range of necessary articles, were received in bulk from the wholesale contractor and made up into retail quantities on the premises thus enabling the quality to be inspected; besides which, the recipients obtained exactly what it was intended they should receive and they derived an advantage in the price of goods as compared with shop values.

There were 491 cases of relief - 1514 persons in 1894
 " " 500 " " " - 1729 " " 1895.

Although men were on relief works their families were maintained by the Board.

Mrs. Julia Carpenter was the first woman inspector appointed at a salary of £50 per annum.

1896.

There was a large increase in the number of recipients of charitable aid. The statistics show that taking the population at 100,000 that one in every 50 persons was receiving relief. Farmers in Canterbury had never had such difficulty in procuring labour.

The Avon Refuge (Pastor W. Birch) used as a night shelter for men, and Herrick's Home on the corner of Victoria and Montreal Streets, had to close down for lack of funds. Both institutions had given great assistance to homeless and starving men. The Board agreed to maintain the homes temporarily.

1897.

Delegates from almost every part of the Colony met in 1897 when numerous and various phases regarding charitable aid were discussed. Observations were compared and ideas exchanged that the administration might unite on some future action.

1904.

A large sum was spent on charitable aid especially with regard to out-door relief. Some Boards had on their books recipients of charitable aid to the third generation showing that hereditary in these matters came largely into play.

The Labour Test Farm at Invercargill was visited by members to observe the methods adopted in dealing with certain classes of applicants. It was found that the test as applied to able-bodied men was effective and they soon found work for themselves.

The Board devoted considerable time and attention to the boarding-out system; many children were removed from undesirable surroundings and transferred to happy homes where they would be well cared for and in the course of time would become useful members of the community. Good work had been done with satisfactory results.

Charitable Aid, contd.1910.

When the 1909 Act came into force the main provision was that the distinction between Hospital Boards and Charitable Aid Boards be abolished and every Board have the double function of maintaining hospitals and administering charitable relief. The problem of outdoor relief was the most difficult of satisfactory solution because it was almost impossible to discover to what extent assistance given out of public funds was supplemented from other sources. The sum dispensed on charitable aid amounted to £4354 for the year ending 1910. It was deplorable the increase in the number of deserted wives and neglected children that the Board had to provide for. If the expense of maintaining these cases was taken off the Board the cost of charitable aid would be insignificant.

1912.

The Widows Pension Act came into operation and the grants were periodically increased. 791 pensions were in force at the 31st March, 1912.

It will be observed from the comparative statement (1938) that from 1907 to 1922 there was little variation in the number of cases dealt with by the Charitable Aid Committee.

1922.

It was moved that the Minister in charge of Prisons be urged to amend existing legislation so far as to provide that persistent defaulters in the matter of maintenance orders should be employed on some form of remunerative work and their earnings applied to the maintenance of their families, and that other Boards be asked to co-operate in endeavouring to provide immediate reform.

1925.

The British Medical Association suggested that the hospital and charitable aid work should be separated, but the Board saw no reason why a reversal should be made to a system that had been tried already, and was abandoned after mature consideration after the Act of 1909 was brought into force. Hospital and charitable aid work were interdependent; the charitable institutions controlled by the Board were frequently the means of clearing the hospital to a very great extent. The tendency was to discountenance a multiplicity of local bodies and to favour the amalgamation of allied activities when possible under one controlling authority.

1927.

A conference was held on 1st June between representatives of the Board and representatives of the various contributing local bodies to discuss the question of unemployment and the possibility of co-ordination of effort. The County Councils adjacent to Christchurch had proposals in hand for absorbing a certain amount of labour. It was decided that the Board in giving relief gave orders for work on the local body in the district in which the recipient lived.

1928.

In view of the abnormal conditions which prevailed during the previous year, resulting in an unusual amount of unemployment, and a consequent increase in the cost of Social Welfare Relief, a conference was called of representatives of the four principal Boards in the Dominion in 1928 for the purpose of discussing ways and means of more effectively and economically dealing with the questions of unemployment and relief as they affect Hospital Boards.

An appeal was made through the newspapers to raise one thousand shillings within a week to provide meals for men and women - more than six hundred men were out of work. The expenditure for relief was £9978 in 1927-28; £14202 in 1928-29; and £24875 in 1929-30. The Board had overspent the money allotted for relief in doing all it could for

* See page 3 "Tuarangī Home" - last paragraph.

Charitable Aid, contd.

the unemployed which was unusually bad in the month of January. For three winters the Citizens' Committee had collected money and goods, and distribution depots were established in the city. The Board had made grants in aid of these depots, but in 1930 the distribution was made from the Board's office so as to prevent any overlapping which might occur. In 1931 the North Canterbury Hospital Board decided to make no provision for relief of unemployed men and their families as Parliament passed an Act making a levy on all adult males and set up a Board for the purpose of allocating funds to provide assistance or employment for the unemployed men in the Dominion.

1930.

1931.

Hundreds of women and children in Christchurch were without necessary footwear. The Mayor handed over approximately four hundred pairs of boots and shoes for the Board to distribute to the children in 1933. The material was either donated or collected and the employees of one of the local factories made the footwear in their own time. The Rotary Club also contributed generously for this purpose.

An understanding was arrived at between the Unemployment Board and those comprising the Hospital Boards' Association that whilst Hospital Boards should be responsible for giving relief to all unemployed men who were unfit to work, the Unemployment Board was responsible for finding employment and the means of livelihood for all those capable of working. The Mayor of Christchurch (D. G. Sullivan) placed large sums of money at the Board's disposal to supplement the earnings of relief workers. The number of applicants increased weekly; one week the cases totalled 614 representing 2719 persons. Subsidy was obtainable if donations were made to the Board and the Board controlled the expenditure of such donations and subsidy. It was arranged between the Hospital Boards and the Minister of Employment that the Unemployment Board would undertake to provide for the men of classes A and B. A Businessmen's Committee came into operation and the Mayor appealed to the Board to continue the distributions to relief workers. All assistance was given through the Metropolitan Relief Committee.

1934.

Up till 1898-99 the Charitable Aid Board provided fuel etc. for the necessitous poor. At that time the Mayor's Coal and Blanket Fund came into existence through the Hyman Marks Estate. The fund was supported by voluntary contributions from year to year till 1934. The demands upon the Christchurch public were so great for a few years that contributions to this particular fund fell considerably. The Board made a grant of £500 to the Mayor's Committee in July, 1934. It had always recognised a responsibility for the people who, owing to infirmity, were not able to accept relief work, for those relief workers who were temporarily laid aside through sickness, and in many cases those who met with misfortune by way of accident. All cases were dealt with on their merits and each inspected. Frequently independent information was given by members of the Committee who happened to know the circumstances.

1936.

With the new Pensions Legislation (Invalidity) in 1936, the number of persons receiving benevolent relief on account of sickness was 1162; this number was reduced the following year to 910 cases. Important changes in the law relating to pensions in general were introduced in 1938. The Social Security Act came into force, replacing all pensions with the exception of War Pensions.

1938.

Charitable Aid, contd.COMPARATIVE STATEMENT

1887 - 1937

	No. Cases.	No. Persons.	£
1887	795		6025
1892	613	2110	6805
1897	756	2468	7426
1902	522	1462	5437
1907	363	933	4069
1912	329	935	4144
1917	336	-	3808
1922	339	1127	6121
1927	555	1575	7714
1932	614	2719	21572 Benevolent
			11968 Unemployed
1937	1895	3667	26942

THE ASHBURTON & NORTH CANTONMENT UNITED CHARITABLE AID BOARD.

<u>Names</u>	<u>Chairmen.</u>	<u>Members.</u>
Vincent, W.		1885 to 1886
Deetham, R.	1885 to 1886	1885 to 1886
Branley		1885 to 1886
Forrester, J.		1885 to 1886
		1882 only
Harrison, A.		1885 to 1886
Ivery, A.		1885 to 1886
Jones, F.	1886 to 1887	1885
Jance, H.		1885 to 1886 (died)
Louisson, G.		1885 to 1886
Moore, R.		1885 to 1886
Tomer, H.W.		1885 to 1886
Wood, W.D.		1885 t
Westera, R.	1887 to 1888	1885 to 1891
White, W.		1885 to 1886
Walker, W.C.		1885 to 1886
Halder, H.N.		1885 to 1886
Friendlander, H.	1894 to 1895	1885 to 1892
" "		1892 to 1893
Bird, R.		1885 to 1886.
" "		1891 to 1892
Roberts,		1885 to 1886
Sealy,		1885 to 1887
Williamson		1885 to 1886
McLean		1885 to 1886
Chalmers, A.		1885 to 1886
" "		1888
Harper, G.J.		1885 to 1889
Martindale, R.		1886 to 1892 (Died)
Dunlop, W.		1886 to 1886
McMillan, D. (M.H.B.)		1886 to 1887
Boys, J.G.		1886 to 1889
Parish, R.H.		1886 to 1884
Hosking, W.H.		1886 to 1887
Prudhoe, H.		1887 to 1891
Moore, W.		1886 to 1889
Walker, W.C.		1886 to 1893
Tait, Jas.		1887 to 1888
Wright, K.C.		1887 to 1888
Thomas, David		1888 to 1890
Crooks, H.		1888 to 1889
Blackett,		1888 to 1891
Langdon, W.		1888 to 1889
" "		1888
Allwright, H.		1889 to 1891
Thomson, W.		1890 to 1892
White, W. Jr.		1890 to 1891
York, W.		1890 to 1893
Taylor		1891 to 1892
Hamilton, J.		1891 to 1897
Peryman, H.W.		1892 to 1895
Malcock, R.		1892 to 1894
Cooper, W.H.		1892 to 1895
Acton-Adams, W.		1891 to 1899
Bennie, J.		1891 to 1897
Smith, J.T.	1898 and 1899	1891 to 1898
Cooper, W.H.		1892 to 1895 (resigned)
" " "		1895-1898
" " "		1898 to 1899
Orr,		1898 to 1898

<u>Name.</u>	<u>Chairman.</u>	<u>Members.</u>
Hadfield, J		1894 to 1895
Smith, E.		1894 to 1895
Grigg, John		1894 to 1895
Sealey, J.		1894 to 1895
"		1895
Board, F.J.	1897 to 1901	1895 to 1903
"		1897
Outler, T.		1895 to 1896
Fruthee, A.		1895 to 1899
Wallace, G.		1895 to 1902
Wood, R.H.		1895 to 1896
Bong, W.		1895 to 1898
Dobson, J.		1895 to 1905
Mushire, B.P.		1895 to 1899
Reid,		1897 to 1898
Hurray, J.		1898 to 1899
Black, Mrs. E.		1898 to 1899
White, H.		1898 to 1899
Wells, Ada Mrs.		1899
"		1901 to 1905
Mr. Haffie, G.H.		1899 to 1900
Radcliffe, W.		1899 to 1900
"		1900
Sorenson, H.B.		1899 to 1903
"		1903
Wolfe, J.		1899 to 1903
Witty, G.		1899 to 1901
Rutherford, A.W.		1900 to 1901
Feldwick, B.		1900-1902
Black, Mrs.		1900 to 1905
Mushire, B.P.	1903 and 1906 to 1907	1900 to 1903
"		1903 to 1903
Harris, S.		1900 to 1907 (died)
Pearce, H.		1903 only
Gough, J.		1903 to 1903
Harrell, F.	1903 and 1909	1903 to 1909
Parsons, G.J.W.		1903 to 1909
Henderson, Mrs.		1904 to 1906 (died)
Scott, S.		1904 only
Sammel, E.		1904 only
Mr. Millan, W.		1904 to 1907
Davison, J.H.		1905 to 1909
Chick, G.S.		1905 only
Dunlop, W.		1905 to 1909
Bedford, G.		1905 to 1908
Harrell, H.J.		1906 to 1907 (died)
Orchard, Rev. J.		1906 (only)
Forrester, J.		1907
Dahley, Mrs.		1907 to 1909
Paul, Major		1907 to 1908 (resigned)
Burgess, Major		1908
Ingram, J.		1908 to 1909
Henderson, J.		1909 to 1909
Mr. Millan, David		1908 to 1910
Hurray, J.		1908 to 1909
XXXXXXXXXX		XXXX-XXXX
Hyle, G.		1909 "
Thacher, Dr. H.T.J.		1909 "