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1875.

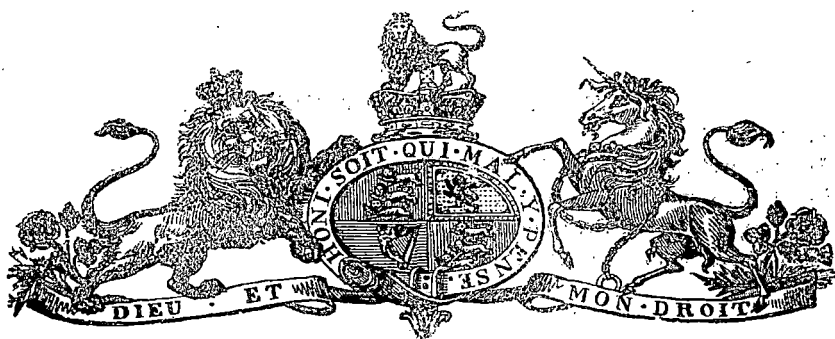
T A S M A N I A.

LEGISLATIVE COUNCIL.

GENERAL HOSPITAL, HOBART TOWN.

REPORT OF SELECT COMMITTEE.

Laid upon the Table by Mr. Crowther, and ordered by the Council to be printed,
September 28, 1875.



REPORT from the Select Committee on the General Hospital, Hobart Town; with Minutes of the Proceedings of Committee, and Evidence.

MEMBERS OF THE COMMITTEE.

MR. AIKENHEAD.
MR. CHAPMAN.
MR. CROWTHER.

MR. ROBERTSON.
MR. SCOTT.
MR. WHYTE.

DAYS OF MEETING.

14, 15, 16, 17, 18, 21, 23, 24, 25, 27 September, 1875.

R E P O R T.

YOUR Committee have had 10 Sitings, and have examined 25 Witnesses; viz.—

Medical Men.—G. W. Turnley, M.R.C.S.; E. S. Hall, M.R.C.S., L.S.A.; W. H. Macfarlane, M.B.; E. L. Crowther, M.D., M.B., C.M., L.R.C.P., M.R.C.S., L.M., L.S.A.; T. C. Smart, L.R.C.S.; R. S. Bright, M.R.C.S., L.M., L.S.A.; J. W. Agnew, M.D., M.R.C.S.; B. Crowther, M.R.C.S., L.R.C.P., L.S.A.; H. Butler, F.R.C.S.; and H. A. Perkins, M.D., M.B., C.M., M.R.C.S.

Officers of the Establishment.—J. Hardy, Paid Attendant; W. Foote, Helper; J. Seals, Dispenser; C. Seager, House Steward.

Patients.—J. M'Kendrick and B. Butler.

Visitors.—C. Dowdell, Merchant; Mrs. Chamberlain; Hon. C. Meredith; Rev. F. B. Sharland, St. David's Cathedral; Mr. R. A. Mather; Rev. C. P. Woods, St. Joseph's Church; Mrs. Jeffery, D. Champ, and Mrs. Bantick.

Your Committee submit the evidence taken to the consideration of the Council, but does not deem it necessary to make any special Report thereon.

WILLIAM LODK. CROWTHER, *Chairman.*

27th September, 1875.

MINUTES OF THE MEETINGS.

TUESDAY, 14 SEPTEMBER, 1875.

Committee met at 11.40 A.M.

Present—Messrs. Scott, Aikenhead, Crowther, Robertson, Chapman, and Whyte.

Mr. Crowther was elected Chairman.

Mr. Crowther proposed to call witnesses; viz.—Joseph Hardy, William Foote, and Mr. Seals.

Mr. Chapman proposed to call Dr. Turnley, Dr. Macfarlane, and Mr. Seager.

Adjourned at 12, until to-morrow at 11.30 A.M.

WEDNESDAY, 15 SEPTEMBER, 1875.

Committee met at 11.30.

Present—Messrs. Crowther, Scott, Aikenhead, Robertson, Whyte, and Chapman.

Examined—Joseph Hardy, William Foote, and Mr. Seals.

Mr. Chapman proposed to call Mr. Dowdell.

The Chairman proposed to call J. M'Kendrick.

Adjourned at 1.45 P.M. until 11.30 to-morrow.

THURSDAY, 16 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Scott, Aikenhead, Crowther, Whyte, Chapman, and Robertson.

Examined—John M'Kendrick, Mr. Seager, and Mr. Dowdell.

The Chairman proposed to call Dr. Hall and Samuel Bass.

Adjourned at 1.15 P.M. until 11.30 A.M. to-morrow.

FRIDAY, 17 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Scott, Aikenhead, Crowther, Whyte, Chapman, and Robertson.

Examined—Dr. Turnley, Dr. Hall, and Dr. Macfarlane.

The Chairman proposed to call Dr. E. L. Crowther and the Hon. C. Meredith.

Mr. Chapman proposed to call the Revs. F. B. Sharland, C. P. Woods, and Mr. R. A. Mather.

Adjourned at 2.50 P.M. until 11.30 A.M. to-morrow.

SATURDAY, 18 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Aikenhead, Crowther, Whyte, Chapman, and Robertson.

Examined—Mrs. Chamberlain, Dr. E. L. Crowther, and the Hon. C. Meredith.

Adjourned at 1.50 P.M. until 11.30 A.M. on Tuesday.

TUESDAY, 21 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Scott, Chapman, Crowther, Aikenhead, and Robertson.

Examined—Rev. F. B. Sharland, Mr. R. A. Mather, Rev. C. P. Woods.

The Chairman proposed to call Benjamin Butler, and to recall Dr. Hall.

Mr. Chapman proposed to call Drs. Bright, Smart, Butler, Agnew, and B. Crowther.

Adjourned at 1.10 P.M. until 11.30 A.M. on Thursday.

THURSDAY, 23 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Scott, Chapman, Crowther, Aikenhead, and Robertson.

Examined—Benjamin Butler, Drs. Smart, Bright, Agnew, and B. Crowther.

The Chairman proposed to recall John M'Kendrick, and to call David Champ and Sarah Jeffery.

Adjourned at 2.15 until 11.30 A.M. to-morrow.

FRIDAY, 24 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Scott, Chapman, Crowther, Aikenhead, Robertson, and Whyte.

Examined—John M'Kendrick, Mrs. Jeffery, David Champ.

Mr. Chapman proposed to call Drs. Butler, Hall, and Perkins.

Adjourned at 1.45 P.M. until 11.30 A.M. to-morrow.

SATURDAY, 25 SEPTEMBER, 1875.

Committee met at 11.30 A.M.

Present—Messrs. Crowther, Chapman, Whyte, and Aikenhead.

Examined—Dr. Perkins.

Resolved—That the Committee meet at 3 P.M. on Monday to consider the evidence and draw up a Report.

Adjourned at 12.15 P.M.

MONDAY, 27 SEPTEMBER, 1875.

Committee met at 3 P.M.

Present—Messrs. Whyte, Chapman, Robertson, Crowther, and Aikenhead.

Mr. Crowther submitted as evidence a statement of Mrs. Bantick, together with a medical certificate of her inability to attend before the Committee.

Mr. Crowther submitted Statutory Declarations made by the witnesses David Champ and Sarah Jeffery as to the truth of their evidence.

It was unanimously resolved to report the evidence.

Adjourned at 4.5 P.M.

EVIDENCE.

WEDNESDAY, SEPTEMBER 15, 1875.

JOSEPH HARDY, *examined.*

1. *By the Chairman.*—Your name is Joseph Hardy, and you are one of the helpers at H. M. General Hospital, and sleep in the old building, and are acquainted with every part of the establishment? Yes.

2. What are your ordinary duties? Assisting the Dispenser, keeping the place clean, and doing other offices for the Dispenser.

3. Do you remember a visit to the General Hospital by the Hon. C. Meredith and Dr. E. L. Crowther, on Sunday, the 22nd August? I heard of it; it was my day out.

4. And also a visit by the latter gentleman on Wednesday, 25th August, and the Governor subsequently? Yes.

5. Will you state for the information of the Committee the contents of the yard at the rear of the old building on the 22nd August, describing at the same time the shed used as a closet, its formation, the receptacles for excreta, and their condition, whether empty, full, or overflowing? There were tubs, and a sort of sham seat. The last time I was there, about a fortnight since, it was in a dirty state.

6. State, as nearly as you can, what was done in the way of cleaning in the old building, yard, and closet, between the visit of Dr. E. L. Crowther on the Sunday and that of the Governor subsequently? I can't say. The stones were properly cleaned. I noticed that it was clean from having just been done. The steps and passage in the Hospital are generally clean. As to the verandah, I cannot say, I did not see it. It is clean at the present time.

7. Was the yard at the rear of the cells in the same state at the time of the Governor's visit as it was when seen by the Hon. C. Meredith and Dr. E. L. Crowther? I think not in exactly the same state. They are always doing something there.

8. Was any general cleaning of the establishment carried out between Sunday, 22nd August, and the Governor's visit? No, I am not aware.

9. *By Mr. Chapman.*—Any whitewashing or scrubbing? No whitewashing that I saw. Scrubbing is always going on.

10. *By the Chairman.*—Did any females assist in cleaning out the old building? I saw one sweeping away cobwebs from under the roof of the verandah at the back of the old building.

11. Was that after the visit of the Governor or before? I don't know.

12. Was she a patient? I do not know.

13. What are the cleaning days at the Hospital? There are no particular days that I am aware of, but the old man Foote is always scrubbing and cleaning.

14. Are there two closets at the back of the cells? Yes.

15. What has been placed in one of the two? An iron bedstead, old jars, and rubbish.

16. Have they been placed there subsequent to the visit of Dr. E. L. Crowther? No.

17. How many persons use the single closets left behind the cells? All the servants of the establishment, and any strangers likewise.

18. *By Mr. Chapman.*—How many servants are there? Ten or a dozen.

19. How often is the closet cleaned out? Three or four times a week, and daily if necessary.

20. *By the Chairman.*—Were the hearthstones, wards, everything of the old building cleaner after the visit of the Hon. C. Meredith and Dr. E. L. Crowther? I did not see the hearthstones or the wards; only the steps and verandah were cleaner, as far as I know.

21. Do you know Wm. Foote as a helper about the establishment? Yes.

22. Did he carry all the manure from the yard and closet into Mr. Seager's garden? I don't know. He told me he had been doing so. His clothes were in a filthy state from the work he was engaged in. I mean the yard at the back of the old building where the closet is.

23. Did he say by whose order he did it? No, I did not ask him.

24. What closet have the helpers and convalescents for their accommodation at the present time? The one behind the cells.

25. Did you know whether the Governor or Colonial Secretary were expected to visit the Hospital? I did not know.

26. Were the Hospital yards, closets, and other surroundings in the same state at the time of the Governor's and Colonial Secretary's visit as they were on Sunday, 22nd August? I do not know.

27. Did Dr. Turnley, after the place had been cleaned up, and before the Governor's visit, go round and see that everything was in order? I don't know. I have seen him going round every day.

28. Does Dr. McFarlane also go round? Yes, constantly both by day and night.

29. Does he sleep there now? Yes.

30. Have there always been ducks and turkeys at the rear of the old building? Yes.

31. *By Mr. Chapman.*—How many? Eighteen or twenty ducks.

32. *By the Chairman.*—The ducks and turkeys go in the verandah where the patients walk? Yes.

33. If an inmate of the old building were taken ill in the night and required to go to a closet, was there one he could go to? I can't say, I have not been there.

34. Whose ducks are they? I think they belong to Mr. Seager; he claims them.

WILLIAM FOOTE *examined.*

35. *By the Chairman.*—Your name is William Foote, and you are a helper at the General Hospital, and work in the garden and do various offices for Mr. Seager? Yes. I do not work in the garden, but am a helper, and do various offices by order of Mr. Seager. I am an invalid. I am not Mr. Seager's private servant.

36. Do you recollect a visit to the Hospital on Sunday, the 22nd August, by the Hon. C. Meredith and Dr. E. L. Crowther? Yes.

37. Was the yard at the back of the old building clean at that time? Yes.

38. Was the closet overflowing at that time? Oh no; there was not much in it.

39. When did you begin to clean the closet? On the Monday morning. There was a heap of material in the yard, which I moved in tin cans into Mr. Seager's garden on the Monday. It consisted of two or three barrowfuls of fowls' and ducks' dirt. My clothes were not in a mess. They were old tins used for carrying ashes.

40. By whose order did you do this? By Mr. Seager's.

41. After clearing the place in that way did you cover it with ashes to make it look nice? No, Sir, I swept it up as I always do.

42. How long did it take you to remove the manure? About an hour. I went to breakfast at 8 o'clock, and did it after breakfast.

43. How long had that manure been there? It might have been a week. It had accumulated by the weather being wet. I used to sweep it up every day.

44. What cleaning did you do besides the closet and yard? I swept up the premises generally.

45. *By Mr. Chapman.*—Did you do any whitewashing, or see any whitewashing done? No.

46. Did you hear of any being done? No.

47. *By the Chairman.*—Did any other persons, males or females, in the old building besides yourself help to scrub floors and do other work? I am not aware. I don't recollect. I did not see anybody.

48. During the time you were cleaning the manure out, and carrying it into Mr. Seager's garden, was any person employed also in scrubbing and cleaning? None to my knowledge.

49. On the 22nd August were there ducks and turkeys in the yard? About 20 ducks and 2 turkeys. The turkeys have since been killed; the ducks are there still.

50. Is the closet at the back of the old building now closed? Yes, by one of the ventilators from the old female ward. No one uses it now. They gave up using it a week ago.

51. By whose order was the ventilator placed before it? By the order of the Superintendent.

52. How many days after you cleaned out the closet and yard was the screen placed before it? It might be three or four.

53. Was the screen before it when the Governor was there? I don't know.

54. Did a man named Bass help you to empty the tubs? Yes, he usually does.

55. Where were the contents of the tubs put? Into the creek. We occasionally dig a hole in the garden and put them there. I emptied them into the creek on this occasion because I was in a hurry. The proper place to put them was in the ash-hole. The ash-hole is cleaned out about once a month by the Orphan School cart. They do not come at night. They wait till a quantity is there before they come.

56. *By Mr. Robertson.*—Where is the ash-hole? Behind the store against the wall by the creek in the back yard.

57. *By the Chairman.*—How often have you dug a hole in the garden and put the contents in? About twice.

58. Did you empty the tubs into the creek by Mr. Seager's orders? No, I did it on my own hook.

59. How full were the tubs you emptied into the creek? About half full.

MR. SEALS *examined.*

60. *By the Chairman.*—Your name is John Seals, and you are the Dispenser at H.M. General Hospital, and reside in the old Female Hospital? Yes.

61. You are acquainted with the General Hospital and old building at the rear, and also who are the inmates of the various wards, having daily the ward registers before you? Yes.

62. Do you remember a visit to the General Hospital by the Hon. C. Meredith and Dr. E. L. Crowther, on Sunday, 22nd August; also a visit by the latter gentleman, and the Governor and Colonial Secretary, subsequently? Yes.

63. You are aware that the old building was condemned many years since as unfit for Hospital purposes? I believe so, the patients were all removed from it.

64. Will you state for the information of the Committee the contents of the yard at the rear of the old building on Sunday, 22nd August, describing at the same time the shed used as a closet, its formation, the receptacles for excreta and their condition, whether empty, full, or overflowing? I have not been in the yard for the last two years.

65. State, if within your knowledge, what was done in the way of cleaning in the old building, yard, and closets between the visits of Dr. E. L. Crowther on the Sunday, and that of the Governor and Colonial Secretary subsequently? Of my own knowledge I know of nothing.

66. What are the cleaning days at the Hospital? There are no special days, the place is always supposed to be kept clean.

67. Have you seen and read the Report upon the condition of H. M. General Hospital, dated September 16, 1874? I don't remember reading it.

68. You saw in the *Mercury* some notes of a visit to the Hospital: I will read them to you? Yes, I saw them.

69. Are any of these statements facts within your own knowledge? (The statements were read and answered by the witness separately.)

(1.) "A delirious patient was keeping a whole ward awake, and had done so through the night."—I don't know.

(2.) "In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months."—I can't tell, I know nothing of the wards either in the old or new building.

(3.) "The private patients' ward is nothing but a dirty empty room, and such as would not be tolerated in an English Union Workhouse, much less an Hospital, in the United Kingdom."—I can't tell, I know nothing of the wards either in the old or new building.

(4.) "Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being."—I don't know.

(5.) "Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life."—There is no hot water laid on, but there is some means of heating water.

(6.) "The nurses' quarters is one small room, which has to do for sitting and sleeping room."—It is correct.

(7.) "The walls are bare. There are no pictures nor texts, such as cover the walls of the smallest hospitals in England."—There are some texts in the male hospital, provided by Mr. Mather.

(8.) "The foul and clean patients are mixed together. This is peculiar to this Hospital."—There is no convenience for separating the males.

(9.) "There are no means of separating the dying from the living."—They use screens: there are no private apartments.

(10.) "The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are full of straw, filth, and sundries." And,

(11.) "The condition of the surroundings of the old building is in several instances disgusting."—It contains patients, not exceeding 6 I think, also 6 helpers. I know nothing of the unused rooms or surroundings.

70. Was John M'Kendrick a patient in No. 5 ward. Refer to his case in the Register? Yes. By the Register I find he was admitted the 2nd August, and discharged 11th September. I do not know his disease. There is no entry in the Ward Register, but Mr. Seager has it in his book. In the Imperial time, and during Dr. Crowther's nine years at the General Hospital, it was customary to enter the disease with detailed symptoms on one side of the Register and the treatment on the other.

THURSDAY, SEPTEMBER 16, 1875.

JOHN M'KENDRICK *examined.*

71. *By the Chairman.*—Your name is John M'Kendrick, aged 16 years, and you were an in-patient in No. 5 ward of H. M. General Hospital on Sunday, 22nd August? Yes.

72. By whom were you placed there, and how long were you an inmate? Dr. Turnley gave me an order. I was there from the 2nd August to 11th September.

73. Do you recollect a visit to that establishment by Hon. C. Meredith and Dr. E. L. Crowther? Yes.

74. After that visit did you see any cleaning of the ward take place? Yes, I saw the wardsman cleaning out the ward from end to end, and he asked me to clean the ventilators.

75. Was that ward, during the time you were in the Hospital, cleaned in a similar manner? No.

76. Did you assist in any way? I cleaned and black-leaded the four ventilators.

77. How long after the Doctor's visit was that? Either on the Monday or Tuesday.
78. Were the ventilators ever taken out before and cleaned? No.
79. At any other time have you performed any service in the Hospital? I have done other light work before.
80. Was there any cleaning in the other wards to your knowledge? Yes, in No. 6.
81. Have you ever done any night work? I sat up with Ernest Saville till midnight. His arm had been amputated.
82. By whose order? The wardsman's. Dr. McFarlane and Mr. Seager saw me sitting up. The gatekeeper told me to sit on the other side of the bed to see if any bleeding took place.
83. *By Mr. Robertson.*—During the time you were in the Hospital, were you medically treated? Yes, with liniment being rubbed in; but I was not placed in splints.

MR. SEAGER *examined.*

84. *By the Chairman.*—You are House Steward and Purveyor at H.M. General Hospital? I am House Steward.
85. How many persons, male and female, are employed as regular servants, and what number as helpers? About 20 in all.
86. Are Hardy, Foote, and Bass helpers? Hardy is a paid attendant, Foote and Bass are helpers.
87. It is a part of your duty as prescribed in Rule 44 of Hospital Regulations to see that the wards and all other parts of the Hospital and grounds are kept in a proper state of cleanliness and order, and that the servants generally do their duty; is it so at the present time? Yes.
88. Were you in the General Hospital on Sunday, 22nd August, when visited by the Hon. C. Meredith and Dr. E. L. Crowther? I was out at the time; I heard they had been there.
89. And also when again visited by the latter gentleman and the Governor subsequently? Yes.
90. You know the old building at the back of the Male Hospital, and are you aware that many years since it was condemned for Hospital purposes? I am aware it was not used. I was not aware it was condemned.
91. To what purpose is it now applied? We put patients in it now that are noisy or have infectious diseases.
92. State how many wards were occupied on the 22nd August in the old building, the number of inmates, distinguishing patients from helpers, males from females? One ward down stairs with 2 diphtheria cases, one up stairs with 4 diphtheria cases and 1 erysipelas case, one private patients' ward, and a lower ward for 6 helpers.
93. *By Mr. Chapman.*—Are those wards in as good a state as they have been during the last 15 years? The wards are generally clean, but the walls are dingy and want scraping; they are not in a worse state than they ever were.
94. Have you ever had any complaints from the patients occupying those wards as to their dirty state? No, never.
95. Or any complaints as regards the state of the private ward? None whatever.
96. *By the Chairman.*—Is not the staircase of the old building dilapidated? It is dilapidated, and would be unsafe for children.
97. *By Mr. Chapman.*—What is the condition of the 8 large wards in the General Hospital? Very good.
98. *By the Chairman.*—Do lads sleep in the old building with helpers from the establishment, or have they ever done so? No, they do not.
99. What did the unused rooms in the old building contain on Sunday, 22nd August? One contained bedding and furniture; another contained straw, furniture; and lumber; no old clothes or filth.
100. There is a yard at the rear of this building, and also a shed or outhouse used as a closet on the 22nd August? Yes.
101. At the time of Dr. E. L. Crowther's visit on Sunday, 22nd August, a large quantity of ducks and turkeys occupied that yard. To whom did they belong? They belonged to me.
102. Will you for the information of the Committee describe the closet to which reference has been made, the receptacles used for human excreta, and the state in which they were on the 22nd August? There were three tubs used as receptacles. They were about half full.
103. Were the yard and closet in the same condition at the time of the Governor's visit? Yes, in the same condition.
104. *By Mr. Whyte.*—How often are the tubs emptied? Frequently.
105. *By the Chairman.*—You are aware that from the yard has been removed a quantity of filth, and that the closet has been and still is closed up, and the yard straightened up; also that the floors of the occupied wards have been scrubbed? A little straw as manure was removed and placed in my garden. The removal made the yard look a shade tidier. The closet has been closed since the Governor was there. The floors of the occupied wards have been scrubbed in the ordinary manner.
106. *By Mr. Chapman.*—The wards are washed and cleaned whenever they are required? Sometimes once a week, sometimes once a fortnight.

107. The wards were not dirty at the time of Dr. E. L. Crowther's visit? No, in their ordinary clean state.

108. *By the Chairman.*—By whom and by whose order has this cleansing been carried out? Not by any person's order.

109. The closet referred to was open on the 22nd August, but had a screen before it on Wednesday, 8th September. By whose order was the screen placed there? By Dr. Turnley's. The closet has not been used since.

110. How long had that closet been used? Seventeen years, to my knowledge.

111. Between Sunday, 22nd August, and up to the period of the Governor's visit, what cleaning either of the old building yard, or Hospital proper, had been done? No more than the common everyday cleaning.

112. Have the ducks and turkeys been removed? The turkeys have.

113. Are there any texts or pictures upon the walls of the old building; or screens around the bed in the ward used as a private apartment? There are no texts. There is no screen, but an easy chair and another, table, chest of drawers, and nightstool.

114. Were you acquainted with the cells and their contents on Sunday, 22nd August? Yes.

115. Is this true:—"4. Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being?" The contents of the cells are correct. In one cell there is a metal chamber, but the patient can be trusted with it. The cells are better than formerly, but they have always been represented as being very bad. I consider leather buckets necessary when they are used.

116. In answer to paragraph 5:—"Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life?" Hot water is not laid on. There are no means of getting hot water for more than one bath at a time; it would take 20 minutes to get a second. By heating the whole apparatus we could get about half a dozen baths in an hour. The baths are heated by charcoal.

115A. *By Mr. Chapman.*—Do you ever remember an instance in which you required three or four baths in a forenoon? I never remember two being required. I know of no instance where a patient suffered by delay in procuring a bath.

116A. *By the Chairman.*—In answer to paragraph 6:—"The nurses' quarters is one small room, which has to do for sitting and sleeping room?" It is correct.

117. In answer to paragraph 7:—"The walls are bare. There are no pictures or texts, such as cover the walls of the smallest hospitals in England?" There are two pictures and a few texts in the female and No. 4 ward.

(8.) "The foul and clean patients are mixed together. This is peculiar to this Hospital." It is the case, and has always been so.

(9.) "There are no means of separating the dying from the living."—There are no separate rooms, but screens are used.

(11.) "The condition of the surroundings of the old buildings is in several instances disgusting."—To those used to Government establishments it is not disgusting.

In answer to Postscript:—"Since the above notes were taken a strong effort in the whitewash, soap and water, and other lines, has been made to render the place, at any rate, more decent for inspection, even to the extent of clearing out the cow-house, *alias* Christians' water-closet."—It was not indecent, but has been made cleaner by the emptying the manure and closing the closet. The manure was two or three barrowfuls.

118. You have said the old building contained numerous patients and helpers in the establishment, and the unused wards straw, rubbish, and old furniture. Do these still remain? Yes; 8 patients and 6 helpers.

119. Have you seen and read the Report of the Select Committee upon the General Hospital, dated September 16, 1874? I might have seen it. I am not acquainted with the Resolutions.

120. Is any means at the disposal of the Medical Officers for the separation of important cases; infectious or otherwise, other than the three cells previously named and the old condemned building? None.

121. By whose order did Foote and others remove all the manure from the yard and closet at the rear of the old building? I might have told them. There were two or three barrow loads.

122. By whose order is the cook-house whitewashed? The cook does it of his own accord. It might have been partially whitewashed within the last three weeks.

123. Is such an order necessary, your duties being defined by Rule 44, Rules and Regulations H.M. General Hospital, 1860? I act upon my own judgment.

124. Where do the closets from the Hospital wards empty themselves? I don't know. The drainage is not known, but there is no defect in it.

125. Are you aware that in the Imperial time each patient, when not prevented by acute illness, had a warm bath upon admission, hair combed, and every precaution taken as to cleanliness? Yes, there was a disgusting bath in one room, but the patients were made clean.

126. Is the same plan adopted now? It is partially, with the exception of the bath.

127. What closet convenience have the keepers and convalescents at the present time in the old building? None at the present time.

128. How many men go to one closet? Ten or a dozen. The tubs are removed when required.

129. Is not one of the two closets behind the cells filled with old iron and rubbish? There is now one closet behind the cells; the other is filled with old iron, &c.

MR. DOWDELL *examined.*

130. *By Mr. Chapman.*—Your name is Charles Dowdell, and you are a merchant? Yes.

131. Have you visited the General Hospital lately? Yes, every week for the last 12 months. I have been over the large wards half-a-dozen times during that period, and found their condition generally good.

132. Are you acquainted with the private ward in the old building? Yes.

133. You are in the habit of visiting the patient occupying it? Every week. He is always comfortably cared for. The room was approved by myself when he first went in. He is attended by a Hospital wardsman by day, and by a nurse provided by his friends by night. All parties are satisfied with the treatment he has received, and I believe all his friends are.

134. In visiting Mr. Ross you pass through the passage, &c. of the Hospital. Have you ever seen anything wrong in them? I have always found them clean.

135. *By the Chairman.*—What is your experience of Hospital wards, whether private or general? None beyond what I have seen in the General Hospital.

136. Were you in the old building on the 20th, 21st, or 22nd August? I was there on the 21st; I saw nothing disgusting in the yard.

FRIDAY, SEPTEMBER 17, 1875.

DR. TURNLEY *examined.*

137. *By the Chairman.*—Your name is G. W. Turnley, and you are Surgeon-Superintendent of H. M. General Hospital? Yes.

(The statements published in *The Mercury* were read and answered by the witness separately.)

138. (1.) "A delirious patient was keeping a whole ward awake, and had done so through the night."—There was a delirious patient, but I do not know that he kept the ward awake all night. I do not think it likely.

139. (2.) "In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months."—There was no erysipelas case either in No. 4 or 5 wards.

140. (3.) "The private patients' ward is nothing but a dirty empty room, and such as would not be tolerated in an English Union Workhouse, much less an Hospital, in the United Kingdom."—It is untrue.

141. (4.) "Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being."—The contents of the cell were as stated, but I deny the state of it was disgusting. The condition of the patient necessitated the use of a leather urinal. He had exhibited violence. It is not usual to give such patients bedsteads.

142. (5.) "Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life."—Hot water is not laid on. The latter paragraph is not correct as far as my opinion goes. In a case of convulsions from undeveloped exanthemata a delay of half an hour would not be important as to the result.

143. (6.) "The nurses' quarters is one small room, which has to do for sitting and sleeping room."—It is not the nurses' quarters. It is the private apartment of the head nurse. There are no regular nurses' quarters.

144. (7.) "The walls are bare. There are no pictures or texts, such as cover the walls of the smallest hospitals in England."—There were texts, and there are some pictures now.

145. (8.) "The foul and clean patients are mixed together. This is peculiar to this Hospital."—The venereal and other patients are and always have been mixed.

146. (9.) "There are no means of separating the dying from the living."—There are and always have been. The separation is effected by screens. Rooms are not necessary.

147. (10.) "The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are full of straw, filth, and sundries."—It has never been condemned for human habitation. Some of the helpers sleep in one room. The unused rooms contain clean straw, hospital furniture, and empty cases. The general condition of the old building is not disgraceful; it is out of order.

148. (11.) "The condition of the surroundings of the old buildings is in several instances disgusting."—There is nothing disgusting about the closet. The state of the yard was as clean as most yards are. There may have been fowl dirt in it.

149. The closet is now closed up? Yes.

150. *By Mr. Robertson.*—By whose orders? By mine.

151. Why was it done? I visited this closet in consequence of the charges made in the *Mercury*. I was not in the habit of going round there, because I did not know the closet was in use, but I found that it was used by five or six helpers about the establishment. I considered the closet was not necessary, and about a fortnight or three weeks after that time I told Mr. Seager he had better close that closet. It was not because the closet was in any disgusting state. It was as good a closet as a person could wish to have.

152. *By the Chairman.*—Is there any other closet attached to the old building? Yes, one at the end of the verandah; that is for females. The men in this division of the hospital have been patients in bed, and they use night-stools.

153. What closet do the helpers use? One at the rear of the cells, about 50 yards from the front door of the old building. The men are as likely to be as near the cells as the old building, but if taken ill in the night they could use a close stool; there are plenty of stools available.

154. Do you think if a helper were taken ill in the night, and wanted to go to a closet, he would disturb any person to find him a night-stool? Most decidedly, he would be a great fool if he did not.

155. (12.) "The recommendations of the Select Committee touch on, and would remove, these blemishes."—A great many of the recommendations would be desirable, and the Government contemplated carrying out the Resolutions.

156. In reply to Postscript:—"P.S.—Since the above notes were taken a strong effort in the white-wash, soap and water, and other lines, has been made to render the place, at any rate, more decent for inspection, even to the extent of clearing out the cow-house, *alias* Christians' water-closet."—No recent whitewashing whatever was done except in the kitchen, which was done about 10 days before Dr. E. L. Crowther visited the building. The cook usually does this whenever it is required.

As regards soap and water I see washing going on almost every day.

No unusual efforts that I am aware of were made to clean up either the front building or the wards at the back.

157. As you gave the order for the closing of the closet, were you aware that the yard and closet had both been cleaned before that time? No, I was not aware of it, I saw no difference in the yard. I go round all the wards every day, but not that portion of the back yard: it is the dirty corner of the establishment, it is a small yard completely out of sight. This part of the establishment is away from everything; the only patients who could see it are the girls in the lock ward.

158. Is not the yard and closet in close proximity to the old building? Yes, within 15 feet of the wall of the old building in which the unoccupied wards are situated.

159. Are any of the wards on the ground floor used? Yes, two are occupied at the other end of the building, so that there would be at least 40 feet from the closet in the yard.

160. Are you aware that the back door is very often open? I dare say it is.

161. Does not the diphtheric ward occupied by boys open into the passage, which in its turn opens into the back yard? Yes.

By Mr. Chapman.—I never detected any unpleasant smell from the closet in the back yard which has been closed up.

162. Do you consider the health of the persons in this Hospital has ever been injured by the state of the back yard? Most decidedly not. A large number of patients from the country, about 20, have occupied the old building within the last three or four months. We had one death, but all the rest have recovered but one.

I consider the statements of *The Mercury* are grossly exaggerated, and were calculated to mislead the public.

163. What is the condition of the eight wards, &c. in the main building which are occupied by 19 out of 20 of the patients? I don't believe there is a better, more efficient, or a cleaner Hospital in the Australian Colonies. In fact I don't think it would be possible to have better wards for the treatment of patients.

164. *By the Chairman.*—Would it not be better if the wards did not communicate with each other? It is a matter of opinion. The existing arrangements in the Hobart Town Hospital in this respect are similar to those in King's College Hospital, London. I am of opinion the Hospital would be improved by the addition of suitable quarters for nurses.

DR. HALL examined.

165. *By the Chairman.*—You are a legally qualified medical practitioner, and for many years have given your attention to questions of public health and the sanitary condition of the city? Yes, I have.

166. You are aware from the tables you compile that the death rate for the present year has, from typhoid and other kindred diseases, been much higher than in preceding years. Do you think this may fairly be attributed to the manner in which closet and other excreta are allowed to accumulate, as well as the little care taken in their removal? I do. At the same time it is to be remarked that there has been an epidemic of measles, and that typhoid and other fevers have been prevalent within the last six months.

167. The evidence of a witness before this Committee having disclosed the important fact that the excreta, in quantity three half tubs, from diphtheric and other patients, located in the old building at the General Hospital, had been thrown into the creek; and also, that on two previous occasions the contents of the same tubs had been buried in Mr. Seager's garden in close proximity to the Hospital, and that the

ordinary place for emptying human excreta from the other closets was the ash-pit in the back yard, removed by the Orphan School cart sometimes not oftener than once a month, what is your opinion as to the danger likely to result to the health of the inmates of the Hospital and surrounding neighbourhood from such a practice? I think it very objectionable indeed. If the excreta of diphtheric and typhoid patients is not disinfected it has the power of propagating disease when mixed with other material.

DR. MACFARLANE *examined.*

168. *By the Chairman.*—Your name is W. H. Macfarlane, and you are House Surgeon in H. M. General Hospital? Yes, House Surgeon for the last 18 months.

(The statements published in *The Mercury* were read and answered by the witness separately.)

169. (1.) “A delirious patient was keeping a whole ward awake, and had done so through the night.”—There was a delirious patient, but I am not aware that he kept the ward awake. I visited the ward at 12 at night and noticed no more patients awake than usual. They frequently sleep during the day and are awake during the night. He had been making a noise, but I don't remember any patient complaining of that noise.

170. (2.) “In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months.”—There was a case of idiopathic erysipelas in No. 7 ward, but this ward was not crowded. In my opinion there was no necessity for the removal of this patient from the ward. Dr. Turnley knew this.

171. Had there been a case of erysipelas in No. 7 ward a short time previously to the period of Dr. E. L. Crowther's visit? Not that I am aware of. I do not remember if there had been one.

172. *By Mr. Robertson.*—Would erysipelas endanger the lives of the patients and poison the wards for months? It is entirely a matter of opinion. I do not think it would poison the wards of the Hobart Town General Hospital because they are so well ventilated.

173. (3.) “The private patients' ward is nothing but a dirty empty room, and such as would not be tolerated in an English Union Workhouse, much less an Hospital, in the United Kingdom.”—The ward is perfectly clean. Mr. Ross has made no complaint whatever about it, and Mr. Dowdell is perfectly satisfied with it, and said it was just such a room as he required. I have never been in England and have never seen an English workhouse. There are no private wards in the Melbourne Hospital, so that in a case of this kind a patient fares better here than there. Mr. Ross's bed has no screen, but neither he nor Mr. Dowdell have asked for one. He could have one if he wished it.

174. (4.) “Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being.”—The contents were as stated, but the condition of the cells was decidedly not disgusting. The leather bucket was absolutely necessary, for the man was violent. I never saw a bedstead in any of the cells. It is not considered advisable to have them. A similar arrangement exists in the Kew Asylum, Melbourne, a new building erected within the last two or three years.

175. *By the Chairman.*—Do you remember James Chamberlain as a patient in the cells? Yes.

176. (5.) “Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life.”—Hot water is not laid on. I have never seen any case where a patient has suffered from the want of a prompt supply of hot water. In Nash's case, which recently occurred, I had hot water in a few minutes, and in the bath-room I could have a bath in ten minutes. I have never seen undeveloped cases of scarlatina or measles put into a hot bath. The copper baths in the bath-room have never been lit or required to be lit while I have been in the Hospital.

177. Has no case occurred during your connection with the Hospital requiring urgently a hot bath? No case has occurred requiring a hot bath so urgently as to imperil life if not promptly supplied. No patient has suffered from any delay in procuring hot water for a bath.

178. Are there not other circumstances in connection with the cleanliness of the patients when admitted to the Hospital that demand having a hot bath always ready? It would be decidedly an improvement—and cleanliness demands that hot water should always be at hand in a hospital. It is the practice now for every patient that appears dirty to be bathed and cleansed before he goes to bed, unless ordered otherwise by the Medical Officers.

179. (6.) “The nurses' quarters is one small room, which has to do for sitting and sleeping room.”—It is a fact.

180. (7.) “The walls are bare. There are no pictures nor texts, such as cover the walls of the smallest hospitals in England.”—I can't say, never having been in England.

181. (8.) “The foul and clean patients are mixed together. This is peculiar to this Hospital.”—There is no separation of the males. They are not separated in the Melbourne Hospital. It is not considered necessary, or in the Alfred Hospital.

182. (9.) “There are no means of separating the dying from the living.”—There are no stated rooms for the purpose. The same practice prevails here as in the Melbourne Hospital, by the use of screens.

183. Have you the means of separating typhoid patients from the others? Yes, when necessary—in the old building at the back. The ward used for erysipelas and dengue fevers in the Melbourne Hospital is decidedly inferior to those we should use here for scarlatina and diphtheria. They have a separate ward for surgical cases of erysipelas in the Melbourne Hospital.

184. (10.) “The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are

full of straw, filth, and sundries."—It is not disgraceful. I am not aware it has ever been condemned. It has had patients in it; three are there at the present time; I don't think there were a dozen at the time of Dr. E. L. Crowther and Hon. C. Meredith's visit. In the unused rooms there was straw and furniture, but no filth.

185. (11.) "The condition of the surroundings of the old building is in several instances disgusting."—The closet I never was in till yesterday. I was not in the yard or closet on the 22nd August, I was on the verandah that day and noticed nothing disgusting in the yard. The closet is shut up at the present time. I can't say that either closet or yard were cleaned between the time of Dr. Crowther's visit and my entering it yesterday.

186. (12.) "The recommendations of the Select Committee touch on, and would remove, these blemishes."—They would.

187. In reply to Postscript:—"Since the above notes were taken a strong effort in the whitewash, soap and water, and other lines, has been made to render the place, at any rate, more decent for inspection, even to the extent of clearing out the cow-house, *alias* Christians' water-closet."—There has been no whitewashing whatever, and no cleaning beyond the ordinary routine of ward-work: I gave no orders for such cleaning. There is not a shadow of truth in regard to the whitewashing or extra cleaning.

188. Did you know the closet in the back yard was there? Yes.

189. Do you not think it an unusual thing to close the only closet the males have attached to the old building? Yes, but if the males had been told not to use it, it would not be an unusual thing.

190. Is it right that the men should not have closet accommodation close at hand? It would be better if they had. None of them have, however, complained. They have ample accommodation within 50 yards, and could have night-stools if necessary.

191. *By Mr. Chapman.*—What is the general condition of the 8 wards in the General Hospital occupied by the great majority of the patients? The wards are perfectly clean, and I consider better ventilated than those in the Melbourne or Geelong Hospitals. For general accommodation of patients they are better than the Melbourne or Geelong Hospitals, and thoroughly well calculated for the treatment of patients. It would be an improvement if a nurses' apartment were attached to each ward.

192. Did you read the statement in the *Mercury*? Yes, I considered the statements of a sensational and exaggerated character, and calculated to mislead the public.

193. *By the Chairman.*—As a man of honor, are you prepared to give a flat denial to the statements? I am not prepared to deny them *in toto*.

The Hon. W. L. CROWTHER tendered as evidence the following Memorandum:—

On Friday, 20th August, accompanied by the dispenser, Mr. J. Seals, I visited the old building at the rear of the male hospital, for the purpose of ascertaining if any of the wards were used for hospital cases, the building having many years since been condemned from many circumstances as no longer suitable for the reception of the sick.

In one ward down stairs were some boys, my attendant informing me they were fever and diphtheria cases now convalescent.

Up stairs there were one or two females and some more diphtheria cases, likewise convalescent.

The helpers slept in a ward on the ground floor, near the back door.

In a large ward facing the sea was a private patient; the room contained a bed in the corner without a screen round it, a few articles of furniture, and two out of the three windows were without blinds. The walls were old and dingy-looking, and the floor not clean. The passages, floor, and stairs were not clean. I was also informed that the helpers about the establishment slept in this building.

In the Report for the General Hospital, 1860, I find the following paragraph in relation to this building:—"It was also determined to open up and reorganise the interior of the Old Female Hospital, which the Board had no hesitation in condemning as unsuited to the purposes for which it was used; being positively revolting to the stranger, crowded as it was with sick patients in small ill-ventilated rooms."

After the building had been opened up as decided upon by the Board, and used for a time as a receptacle for female invalids, it was pronounced unfit for Hospital purposes and closed, and I believe has remained so until a very recent period, or about twelve years.

SATURDAY, SEPTEMBER 18, 1875.

MRS. CHAMBERLAIN *examined.*

194. *By the Chairman.*—Your name is Alice Chamberlain, and you are the wife of Captain John Chamberlain, master of the *Louisa*, and live with Mrs. Wm. Chamberlain in Bathurst-street? Yes.

195. Do you recollect about the end of March or beginning of April last Mr. James Chamberlain arriving in town for medical treatment, and his having been placed in one of the cells at H. M. General Hospital? Yes.

196. State the condition he was in when he returned to his mother's residence? He was in the most filthy condition.

197. In what way? Because he had vermin upon him. They were neither fleas nor bugs. They were, I believe, lice. We took him clothes there, and the clothes he came home in were likewise filthy with lice.

198. How long was he in the cells? Seven days.

199. Do you remember if the cells were cleaned out or bedding changed while he was there? No, they were not. I visited him once, sometimes twice a day. I know they were never washed out while he was there.

200. *By Mr. Robertson.*—What condition was he in when he was put in the cells? In *delirium tremens*. He came straight from his ship to Oyster Cove, remained three days there, and was then taken to the Hospital in a chaise cart.

201. *By Mr. Chapman.*—Do you think the lice got into his clothes on board ship? I feel perfectly satisfied he got them in the Hospital, as when I visited him in the cells I got them myself.

DR. E. L. CROWTHER *examined.*

202. *By the Chairman.*—Your name is Edward L. Crowther, and you reside in Macquarie-street? Yes.

203. What are your qualifications? M.R.C.S., L.S.A., L.R.C.P., L.M., M.B., C.M., M.D.

204. What Hospitals have you been attached to in the United Kingdom? Guy's, as dresser; London, as dresser; Moorfields Eye Hospital; Earlswood Asylum for Idiots; Birmingham Lying-in Hospital. In addition, I spent a small portion of each year lately at the Manchester Infirmary; and I was originally for two years a student at H.M. General Hospital here.

205. What motive had you in visiting the General Hospital on Sunday, 22nd August? Having perused the excellent Report and recommendations of the Select Committee, and finding neither in the Governor's Speech nor in the Estimates any notice taken of the same, I concluded that Government had adopted the most important suggestions, and I visited it to see.

206. After visiting that Establishment, what was your opinion? That not only had no action been taken, but that bad as the condition was in many respects when I left for England, it was worse now; and seeing not the slightest prospect of amendment, I determined to see if public opinion would not make the Government do something in the matter. I instanced to prove that the closing of the Female Hospital, in which were private apartments, the using the old condemned building for Hospital purposes, and virtually spoiling the Hospital as a medical school.

207. Judging from the experience you have had in other Hospitals what conclusions do you arrive at? Taken as a whole, H. M. General Hospital is not to be compared with any that I have named. Taken as a part, the old building is not equal to the Union Workhouse at Darlington.

208. Do you consider by visiting the Hospital you committed a breach of etiquette? I do not. Having been a student there, custom accords the *entrée*, without reference to the House Surgeon or anyone else; and I now take this public opportunity of acknowledging that I derived the greatest benefit during the period of my sojourn at the General Hospital, Hobart Town. No one more regrets than myself the necessity of the visit. It is apparent that by public opinion alone being brought to bear will the needful reforms be carried out.

209. Published in *The Mercury* were several data having reference to the state of H. M. General Hospital, to which the Hon. the Colonial Secretary, in his place in Parliament, has given a blank denial, stating "they were untrue, and wilfully and intentionally written to mislead." A copy of those referred to I will read, and request you will give *seriatim* the data upon which you formed your opinion; the Committee now sitting having met for the purpose of inquiring into the correctness or otherwise of the said allegations? The cleanliness of the building and its surroundings on the Wednesday, the 25th, contrasted so strongly with the Sunday that it is just possible I was mistaken as to the whitewashing.

(The statements published in *The Mercury* were read and answered by the Witness separately.)

210. (1.) "A delirious patient was keeping a whole ward awake, and had done so through the night."—It is a fact.

211. *By Mr. Chapman.*—How long were you in the ward? Ten minutes. As the cells on the Sunday in question were nearly if not quite full, this may have been the reason why a delirious patient was allowed to keep the whole ward awake at night, or perhaps from the fear of bringing vermin into the ward on his return. The man with the erysipelas told me he had been kept awake by this patient the whole of the night.

212. What is the No. of that ward? It is the upper ward on the right-hand side at the top of the stairs.

213. (2.) "In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months."—This in my opinion is a fact, and the case is even more glaring than my memorandum states. This patient was placed at the further end of the ward close to the door of the next apartment; thus running the greatest risk of infecting another ward, or one-fourth part of the Hospital. The case was in its most active form, the face blistered. In addition there was a poor fellow very ill downstairs in the front ward. I had too much etiquette to pull down the clothes and examine, but I was informed by those in the ward that he had erysipelas in the lower extremity. I consider my No. 2 memorandum proves a most discreditable state of things. It would not be allowed for a moment in a first-class Hospital, as any patient with an open wound would run the greatest risk. In my father's time the Commission had not sat and reported what ought to be done. To supply the means for correcting such defects was the object of the Commission. In the same upper ward I was informed there was a convalescent case of erysipelas. I was informed by one of the bystanders.

214. *By Mr. Chapman.*—Then of your own knowledge you only know of one case of erysipelas? Of my own sight I only know of one; but I believe there were two other cases, from information given to me by people in the Hospital, the names of whom I am unable at this moment to give the Committee.

215. *By Mr. Robertson.*—You think the case you saw would endanger the lives of the patients in the ward? Since leaving the Colony I never saw such a case in the general ward of a Hospital.

216. *By the Chairman.*—What practice is pursued in England with regard to erysipelas patients? They are immediately isolated. There was a portion of the London Hospital where we were unable to put patients with open wounds, owing to this or kindred diseases breaking out.

217. (3.) "The private patients' ward is nothing but a dirty empty room, and such as would not be tolerated in an English Union Workhouse, much less an Hospital, in the United Kingdom."—Such was my opinion. The walls were dingy, the boards were old, and the floor not clean.

218. (4.) "Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being."—I was informed the cells were lousy. I saw patients lying on the floor; and the cells stank. There should be more means to alternate light and darkness; greater care to promote cleanliness in cells and surroundings. There should be more personal supervision over the poor inmates. I opened the doors and walked in and out of the cells without let or hindrance. There were two cells occupied at the time of my visit. I was there 3 or 4 minutes. I spoke to one of the inmates who was making his bed.

219. (5.) "Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life."—It is a fact in my opinion. Hot water is met with in every other Hospital with which I am acquainted. In cases of convulsions from undeveloped exanthemata, for retention of the urine, hernia when strangulated, the bath cannot be dispensed with, and ought to be ready at a moment's notice. In the middle of the night the turn of a tap alone ought to afford a warm bath. I entirely dissent from the opinion of Dr. Turnley, given in his letter, (*viz.*—"I cannot call to mind any disease in which human life would be risked by deferring the administration of a warm bath for 30 or 40 minutes") for the reasons given above.

220. (6.) "The nurses' quarters is one small room, which has to do for sitting and sleeping room."—It is a fact.

221. (7.) "The walls are bare. There are no pictures nor texts, such as cover the walls of the smallest hospitals in England."—It is a fact in my opinion. Some of the large wards in the Male Hospital, and all the condemned ones, are bare of texts; the whole wards are bare of the surroundings which tend so much to lessen hospital depression. I allude to pictures, flowers, ferns, or even globes of fish.

222. (8.) "The foul and clean patients are mixed together. This is peculiar to this Hospital." There is no male lock-ward.

223. (9.) "There are no means of separating the dying from the living."—I made this assertion in its broadest sense, in order to forcibly point out the necessity that exists for isolating those that are the subjects of infectious diseases,—the dying from the living. No screens can prevent the noise frequently incidental to the pangs of death being heard by those in the ward.

224. (10.) "The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are full of straw, filth, and sundries."—As I said before, it is now a little sweeter and cleaner. Even were it to continue for ever so short a time to be used for patients, the room below should be cleaned out and emptied, the walls cleansed, ducks and turkeys banished, and the closet re-opened. I used the word "filth," believing that any material has no right to find place in the empty rooms of a building devoted to treatment of sick.

225. (11.) "The condition of the surroundings of the old building is in several instances disgusting."—It was a fact at the time of my visit.

226. (12.) "The recommendations of the Select Committee touch on, and would remove, these blemishes."—It is a fact in my opinion.

227. (Postscript.)—Since the above notes were taken a strong effort in the whitewash, soap and water, and other lines, has been made to render the place, at any rate, more decent for inspection, even to the extent of clearing out the cow-house, *alias* Christians' water-closet."—The difference of the condition of the old buildings and surroundings was so marked at the time of my visit on the Wednesday, as contrasted with that of Sunday, that I may have been in error in supposing whitewash had been used. On Sunday I found things as tabulated. There were others I was much struck with, after my English experience. Male nurses, food waiting in ward to be cut up, wards side by side communicating freely by openings between; but I had seen enough to prove that in my opinion injustice had been done, and more would be by not acting upon the recommendation of the Select Committee, and I thought it only right to raise my voice on behalf of those who cannot help themselves.

On the Wednesday following I visited the Old Building, and again last Wednesday, and I assert that in my opinion a strong effort had been made to render the place at any rate more decent for inspection. On Sunday the floors of the Old Building were dirty; on the following Wednesday they had been washed and cleaned. The closet which I had seen filthy has since been closed.

On Sunday there was a heap of straw filth in the yard, about a cartload. The ducks had access to it. On Wednesday it was gone. On the Sunday the yard was filthy, and on Wednesday it and the place where the heap stood had been cleaned up. On Sunday the yard in the rear of cells was dirty and untidy. On Wednesday it was cleaned up and ready for inspection. The effluvia I noticed arose from closet-heap, &c. in the yard. Nothing in my opinion can be more improper than for any live stock to be detained in close proximity to a place where sick are treated. The place I speak of is about 70 yards from the General Hospital, but close to the old Hospital where some few patients were being treated and where the helpers live.

The closet behind the old building to which I have referred is a narrow brick passage with small stalls, without light, without a door, without a front, or anything to check the outflow of liquid excreta.

228. *By Mr. Robertson.*—How was the closet filthy? You had to pick your way through where the ducks and turkeys had messed to get to it; and the holes on the Wednesday were without buckets or anything to catch excrement. It had been cleaned out. Positively on the Wednesday, from the heap of manure outside, from the fowls' mess inside, from the absence of anything to catch the excrement, and from

the general look of the rail for the seat, I thought it was more like a cow-house—the whole looking like a manger.

229. *By the Chairman.*—You considered the cells disgusting from a fact that had been made known to you by Mrs. Chamberlain: being that Mr. James Chamberlain, after a sojourn of a few days in the Hospital cells, returned in a filthy condition? Yes, and from what I observed myself.

230. It having been admitted by one of the paid medical officers, when under examination, that the yard at the back of the old building was the dirty corner of the establishment, do you think that in a small yard, in close proximity to a building used for Hospital cases as well as invalid helpers, ducks, turkeys, or any live stock should be allowed to contaminate the atmosphere by their excreta? I think it is not only not right, but is against what we acknowledge in the 19th century.

231. You are aware that the door of the female venereal ward and the back door of the old building open directly into the yard. It would therefore follow that in summer the sea breeze would carry a tainted atmosphere through the place? That is a fact.

232. Do you consider it humane, to say nothing of the inconvenience, that invalid helpers and convalescents should be deprived of the use of the closet that for 17 years had been attached to the building, and compelled to use one at the rear of the cells, at a distance of 50 or 60 yards from their place of sleeping, as the witnesses examined informed the Committee they have done since you visited the establishment? I don't think it right they should be asked to do it.

233. *By Mr. Chapman.*—In your evidence you stated that “bad as the state of the General Hospital was when I left for England 11 years since, it is worse now.” It is my opinion, for the reasons I previously gave.

The Hon. C. MEREDITH examined.

234. *By the Chairman.*—On Sunday, 22nd August, in conjunction with Dr. E. L. Crowther, you visited the Establishment known as H.M. General Hospital? Yes.

235. Did you see in the *Mercury* some data having reference to that visit? I did.

236. Do you consider, as far as your unprofessional experience would enable you to judge, those data correct. (The statements published in the *Mercury* were read and answered by the Witness separately.)

237. (1.) “A delirious patient was keeping a whole ward awake, and had done so through the night.”—There was a delirious patient in one ward, and we were told he had kept the ward awake. He was not raving while we were there. I was in the ward 5 or 10 minutes; there was such a horrid smell I was glad to get out of it.

238. (2.) “In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months.”—There were no wards crowded with patients. There was an old servant of mine named Woodcock suffering from erysipelas in one of the wards. I was told there was another case of erysipelas in another ward. These were the only two cases pointed out to me.

239. (3.) “The private patients' ward is nothing but a dirty empty room, and such as would not be tolerated in an English Union Workhouse, much less an Hospital, in the United Kingdom.”—The walls are discolored, but I noticed no dirt. The floors are in a dilapidated state. If it had been my men's hut I should have had it whitewashed. There was a man in attendance on the patient. The bed-clothes appeared discolored from saliva.

240. (4.) “Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being.”—There were two cells. I looked into both of them. The man in one was down on his knees making the bed. I noticed an old tin dish in one cell. Neither of the patients was violent while I was there. My visit to the cells did not occupy more than a minute. They stank. The cells were very dark, like a place for solitary confinement.

241. (5.) “Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life.”—Hot water was not laid on.

242. (6.) “The nurses' quarters is one small room which has to do for sitting and sleeping room.”—It is true.

243. (7.) “The walls are bare. There are no pictures nor texts such as cover the walls of the smallest Hospital in England.”—There are some pictures and texts, but not many.

244. (10.) “The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are full of straw, filth, and sundries.”—The only disgraceful thing was the state of the verandah, which was covered with ducks' and fowls' dirt. The unused rooms are full of rubbish of all sorts. It appeared to me to be old clothes and straw and furniture, but no filth.

245. (11.) “The condition of the surroundings of the old buildings is in several instances disgusting.”—I noticed nothing disgusting except some fowls' dirt on the verandah, and I remarked that whoever owned the ducks should keep them off the verandah.

MR. CHAPMAN tendered the following as evidence:—

Measurement from centre of water-closet to wall of unoccupied ward in old building	37½ feet.
From water-closet to ward occupied by helpers	83 feet.
Ditto, ditto, diphtheric	113 feet.
From door of old hospital to water-closet at rear of cells	60 yards.

17th September, 1875.

GEORGE TURNLEY.

TUESDAY, SEPTEMBER 21, 1875.

REV. F. B. SHARLAND, Curate of St. David's Cathedral, *examined*.

246. *By Mr. Chapman.*—You are in the habit of visiting the General Hospital? Yes, about three times a week.

247. In your visits do you go through all the wards? My principal visits are to Nos. 3, 4, 5, and 6 wards.

248. Do you generally find these wards clean? Yes, generally clean.

249. Do you see any contrast in the state of the main building now and what it was a month since? None, except that matting has recently been laid down.

250. What is your opinion of the general character of the Hospital? It does not compare at all favorably with the Sydney Hospital. Everything seemed to be cleaner and more comfortable there.

251. Do you ever visit the private patients' ward in the old building? Yes, frequently.

252. Do you find it comfortable? I should say not. The floors are clean. As far as I remember there are no blinds.

253. In your general visits to the Hospital, have you found it clean? The ward occupied by the helpers in the old building is dirty, and the floor not fit to kneel down on. It contains six or eight beds. I hold a service in it on Sundays, and can scarcely find a clean place to put my hat down. It smells of tobacco.

254. *By the Chairman.*—What is your opinion of the old building generally? It certainly looks old.

255. Were you in that building on Sunday, 22nd August? I could not say.

256. *By Mr. Chapman.*—In your visits have you heard many complaints from the patients? Yes; during the last three or four years I have heard men complain that their cases had not been attended to, sometimes for a week. The more I think of it the more I am confirmed that such complaints of delay were made prior to Dr. Macfarlane's arrival. I have heard several complain about the same time. Speaking generally, the complaints have mostly been made in wards Nos. 5 and 6. I have heard no complaints against the wardsmen during the last six months. Previous to that I am aware of cases of cruelty on the part of the wardsmen, especially towards helpless patients, but those wardsmen are not now in the Institution. The complaints were chiefly made by men who were up and able to walk about, and not by patients in bed.

257. Can you recollect any cases of complaints of patients of neglect of medical treatment since Dr. Macfarlane has been there? One, of a man who said his case had not been attended to. I won't say the man made a complaint. He merely mentioned it to me.

MR. R. A. MATHER *examined*.

258. *By Mr. Chapman.*—You were for some time Chairman of the Board of Management of Her Majesty's General Hospital? Yes, for 2 years.

259. Do you visit the hospital? Yes, I have done so during the last 15 years. At present I visit it once a week.

260. What is your opinion of the Male Hospital during the last 3 or 4 years? I have always found it clean and comfortable. I think it better now than at any previous period. There is a better class of warders.

261. Have you heard any complaints of want of medical treatment since Dr. Macfarlane went there? No, never.

262. Then on the whole you have reason to be satisfied with the management of the Hospital at the present time? Yes, as far as I can judge.

263. You are aware the Government contemplated introducing female nurses? Yes, and I believe it will be a considerable improvement.

264. *By the Chairman.*—Have you seen any other Hospitals? No.

265. *By Mr. Chapman.*—Do you ever visit the private ward in the old building? No.

266. Do you usually find the General Hospital clean or dirty? Generally clean.

267. *By the Chairman.*—Have you at any time after visiting the Hospital found bugs or other vermin on your person? I have occasionally, not frequently. Not within the last 18 months.

268. What do you attribute the presence of vermin to? To the practice of putting patients to bed as they are brought in from the street, without being bathed. It is within my knowledge that in the Imperial time patients were bathed before being put to bed. I think the want of this bath a defect at the present moment. I visited the wards in the old building during the time it was temporarily occupied, towards the end of last year, and found them clean.

The Reverend C. P. WOODS *examined*.

269. *By Mr. Chapman.*—You are in the habit of visiting the Male Hospital? Yes, for the last 14 or 15 years.

270. Comparing the condition of the Hospital at the present time with what it was formerly do you find any change? I think the Female portion is now cleaner.

271. Since Dr. Macfarlane arrived have you had any complaints of want of attention? I don't recollect any such cases. I never, of my own knowledge, knew any person leave without being attended to.

272. What is the general condition of the old Building? During the time it was temporarily used at the end of last year it was clean, and I could see nothing objectionable in it, except it was too hot in summer. I was aware it had been closed for Hospital purposes. I was not there a month ago.

273. *By the Chairman.*—What was your opinion of the Female Hospital across the road? At the time it was in existence I approved of it, and was opposed to its being closed—being under the impression the main building was not sufficient for both sexes.

274. Do you not think a great deal of good arose from having private patients' apartments? It was a convenience no doubt.

THURSDAY, SEPTEMBER 23, 1875.

BENJAMIN BUTLER, *alias* JOHNSON, *examined.*

275. *By the Chairman.*—Your name is Benjamin Butler *alias* Johnson? Yes.

276. Do you recollect Sunday, 22nd August? Yes.

277. Did you sleep in H. M. General Hospital on the Saturday night? I did.

278. Were you there on Sunday morning? Yes.

279. What was your disease? Dr. Butler told me it was erysipelas: Dr. Macfarlane told me it was not.

DR. SMART *examined.*

280. *By the Chairman.*—Your name is Thomas Christie Smart, and you are a legally qualified medical practitioner? Yes.

281. Are you aware that the principal modern surgical authorities insist upon the exclusion of erysipelas cases from hospital wards; close and cleanse the wards for some time after such cases have occurred; and take every precaution that no surgical case, whether arising from accident or operation, be subjected to its influence? I am aware that when erysipelas of an infectious character occurs it is desirable and customary, where practicable, to separate them from other patients; but the necessity for this step would depend in a great degree on the nature and severity of the case.

281a. *By Mr. Chapman.*—As Honorary Medical Officer you had charge of wards in the General Hospital? Yes: for years.

282. What are the numbers of those wards? 7 and 8.

283. Had you a patient suffering from erysipelas under your charge in No. 7 ward? Yes: the case alluded to was not at all severe. The patient had been drinking and exposed to cold, and suffered from slight erysipelas of the face, which got well under a few days' simple treatment.

284. Did you consider this case dangerous to the other patients in the same ward? Not in the slightest. I have been in the habit of treating similar cases during the whole time I have been connected with the Hospital, and have no recollection of any instance in which bad results followed to the surrounding patients.

285. Was that ward crowded? No.

The statements published in the *Mercury* were handed to the witness, who answered them separately.

286. (2.) "In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months."—The wards were not crowded with patients under treatment, but I had a number of invalids awaiting removal. I have no knowledge of any other cases of erysipelas at that time. I don't believe the presence of such a trivial case would endanger the lives of the patients near, nor poison the ward for months.

287. Do you consider the statement published true or exaggerated? If it refers to the case in No. 7 ward, there are no grounds for such a statement.

288. *By the Chairman.*—Are you aware that in England all cases of erysipelas are immediately separated? I believe it is generally the practice: I do not know of my own knowledge.

289. Must it not be a matter of opinion as to the danger likely to arise from the presence of erysipelas in a hospital ward? It is a well-known fact that erysipelas of a phlegmonous, epidemic, or malignant type is by all authorities considered dangerous when kept in proximity to other cases of sickness; but there are mild cases, such as I have spoken of, where no such danger appears to arise.

290. *By Mr. Chapman.*—Do you know of any instance where erysipelas has spread in the General Hospital? I do not know of a single case.

291. Do you consider it in accordance with etiquette for a medical man to go round a Hospital without placing himself in communication with the Medical Officers in charge, to make notes of cases and publish them to the world? It is a very unusual proceeding, and certainly not in strict keeping with the etiquette usually observed in the profession.

292. *By the Chairman.*—If he were an old student, would it be considered so? Even in an old student it would have been more graceful to have placed himself in communication with the authorities of the Hospital, especially when the visit was for the purpose of inspecting and reporting on the condition of the Hospital, and cases under treatment.

293. (3.) "The private patients' ward is nothing but a dirty empty room, and such as would not be tolerated in an English Union Workhouse, much less in an Hospital, in the United Kingdom."—I have not been in that ward for two or three months. I never saw it otherwise than clean.

294. (4.) "Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being."—I don't know that the cells could be much improved. The walls are lined with wood, the floors are dry, they are clean and well ventilated. They are only used for cases of *delirium tremens*, or violent cases of insanity. I was not there on the 22nd August. Speaking from my own constant observation, I cannot endorse the statement as to the cells being in a disgusting state; and consider the statement of a sensational and exaggerated character. There are cases occasionally occurring where the habits of the patients are of so filthy a character that nothing can keep these cells constantly sweet and clean, but such cases are never neglected. Some cases come in so awfully lousy it is impossible to keep the place clean. Every effort is made by the Hospital authorities to keep these cells as clean as possible.

295. (5.) "Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life."—There are four bath-rooms. It is true hot water is not laid on, but cold water is laid on, and each bath is furnished with a heating apparatus which can be put in operation at a moment's notice, and a hot bath procured in from 20 to 40 minutes. I have never known an instance, day or night, when buckets-full of hot water could not be obtained from the kitchen boiler immediately. I can't say whether the baths have been lit for 18 months.

296. *By the Chairman.*—Did you ever complain of the inefficiency of these baths? I have no recollection of ever complaining of their inefficiency, but I thought a different system would have been more advantageous.

297. Can the immediate use of a warm bath in cases of convulsions, for undeveloped exanthemata, hernia when strangulated, and retention of urine, be dispensed with? No Hospital should be without the means of procuring hot water at any hour of the day or night. There are cases in which the use of the warm bath promptly might be very desirable. I have no knowledge of any case where a patient suffered from delay in getting a bath, as we can always get four or five buckets of hot water from the kitchen in a few minutes.

298. (8.) "The foul and clean patients are mixed together. This is peculiar to this Hospital."—The condition referred to can only exist in the male wards. I can't say what is the practice in this respect in Hospitals in the neighbouring colonies. The number of venereal cases is very limited.

299. (9.) "There are no means of separating the dying from the living."—Screens are always used when patients are in a dying condition, and have been for the last 14 years. We have no separate rooms. Noise very rarely occurs at the time of death, but in extreme cases patients have been removed.

300. What is your opinion with regard to diphtheric excreta, nasal and salivary, as well as urinary and faecal; ought not such to be immediately removed, and all vessels kept continually disinfected? Yes, decidedly.

301. Would it not be highly dangerous for one patient to use the spoon or drinking vessel of another? It would be most undesirable.

DR. BRIGHT examined.

302. *By the Chairman.*—Your name is Richard Stonehewer Bright, and you are a legally qualified medical practitioner? Yes.

303. Are you aware that the principal modern surgical authorities insist upon the exclusion of erysipelas cases from Hospital wards; close and cleanse the wards for some time after such cases have occurred; and take every possible precaution that no surgical case, whether arising from accident or operation, shall be subjected to its influence? I think it desirable as far as one can to keep erysipelas cases out of the wards. It has been my custom for the last 16 months to treat cases of erysipelas in separate wards.

304. Are you aware that in Hospitals in England all cases of erysipelas are immediately isolated? It depends upon the accommodation. It was not the practice at King's College Hospital when I was there. In all the wards under my care it has been the practice to remove every case of erysipelas to one of the wards in the old Hospital at the back, and to keep it there until well. I always consider such cases objectionable in general wards. I believe such precautions to be necessary.

305. You have had cases of diphtheria to treat, and are conversant with the disease? Yes.

306. What is your opinion with regard to diphtheric excreta, nasal and salivary, as well as urinary and faecal; ought not such to be immediately removed, and all vessels constantly disinfected? It would be better if they were, but I do not think it is the general practice to do it. I do not know that we adopt the principle at the Hospital, but it is carried out more or less by local disinfectants, and the patients are treated in seclusion. We have had a diphtheric ward in the old building at the back, in which there have been also one or two cases of erysipelas.

307. Would it not be highly dangerous for one patient to use the spoon or drinking vessel of another? I don't think it would be advisable.

308. *By Mr. Chapman.*—Do you consider it in accordance with professional etiquette for a medical practitioner to visit the Hospital, with a view to inspect the patients and report on the state of the Hospital, without placing himself in communication with the medical officer in charge? It is a thing unheard of, in my knowledge, until the recent instance of it by Dr. Edward Crowther.

309. *By the Chairman.*—Would not an old student have the entrée? Not of right, but of courtesy.

310. *By Mr. Chapman.*—Do you consider the statements which appeared in *The Mercury* sensational or exaggerated? I consider them grossly sensational and exaggerated. I considered at the time I read it that it was written intentionally to influence the opinion of Members of the Legislative Council in the debate on the Hospital which was then coming on.

311. *By the Chairman.*—Are you prepared to say it is untrue? There is some truth in it, but the whole statement is grossly exaggerated and unfair.

312. Are you aware of the details as applicable to the old building on the 22nd August? I know nothing of Mr. Ross's ward. The only room I know is that opposite Mr. Ross's ward. I have attended cases of diphtheria or erysipelas there. It was used as an emergency ward, and was brought into use without any time for preparation.

313. What was the condition of that ward on the 22nd August? I can't say as to that particular day, but it was reasonably clean when I was last there, and I have had no deaths among the patients under my charge treated in that ward.

314. (10.) "The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are full of straw, filth, and sundries."—It can scarcely be called disgraceful. It was only used on an emergency. I am aware that it was decided to disuse it, a better building being available. I am not aware of the contents of the unused rooms on the 22nd August. I have never seen any filth there during the 16 years I have been acquainted with it. I cannot give any evidence as to the state of the yard and closet on the 22nd August. It was no business of mine to inspect them.

315. *By Mr. Chapman.*—What is your opinion as regards the Hospital proper? It is clean and in good order, but the addition of some small wards for special cases and cases of infectious disease, and better accommodation for the nurses, are wants which have always existed, and do exist still, and have been constantly represented to every Government for many years past. I consider the introduction of female nurses a great improvement, and an absolute want.

316. *By the Chairman.*—Has the Hospital any convenience or accommodation for female nurses at the present moment? Only one room, occupied by the head nurse.

The Witness handed in the annexed statement as evidence.

CASES of Erysipelas treated in Wards 3 and 4 of General Hospital, Hobart Town, from 1860 to 1868:

<i>Date.</i>	<i>Ward.</i>	<i>Name.</i>	<i>Disease.</i>	<i>Medical Officer.</i>	<i>Result.</i>
1860					
April	3	Johnson, William	Traumatic erysipelas	Dr. Crowther	Cured
ditto	4	Sheath, Isaac	Erysipelas	ditto	Died
July	3	Goddell, John	Phlegmonous erysipelas	ditto	Discharged
1861					
February	4	Wall, David	Erysipelas of face	ditto	ditto
ditto	3	Britton, John	Phlegmonous erysipelas	ditto	ditto
March	4	Murphy, Owen	Erysipelas	ditto	ditto
July	3	Nichol, Duncan	Phlegmonous erysipelas	ditto	ditto
1862					
March	3	Westbrook, Samuel	Erysipelas	ditto	ditto
November	3	Wren, John	Cellular Inflammation	ditto	ditto
1863					
August	4	Wilson, David	Phlegmonous erysipelas	ditto	Died
September	3	Hines, Michael	Tonsillitis, erysipelas, and abscess	ditto	ditto
December	3	Holland, John	Phlegmonous erysipelas	ditto	Discharged
1864					
February	3	Johnson, John	Parotid abscess—erysipelas	ditto	ditto
August	4	Price, Edward	Diffused inflammation of cellular tissue	ditto	ditto
1865					
February	3	Taylor, John	Erysipelas	ditto	ditto
April	3	Meehan, Patrick	ditto	ditto	ditto
August	3	Fitzpatrick, James	ditto	ditto	ditto
1866					
June	3	Wright Francis	Phlegmonous erysipelas	ditto	ditto
August	4	Bennett, Edward	Erysipelas	ditto	ditto
1867					
February	4	Plummer, John	Phlegmonous erysipelas	ditto	ditto
May	3	Ghost, Thomas	ditto	ditto	ditto
ditto	4	M'Keig, Edward	Erysipelas	ditto	ditto
July	4	Lindsey, Edward	Phlegmonous inflammation	ditto	ditto
December	3	Hodson, George	Diffuse cellulitis after amputation at shoulder	ditto	Died
1868					
January	3	Ricketts, Edward	Diffused inflammation of cellular tissue	ditto	Not recorded.

DR. AGNEW examined.

317. *By the Chairman.*—You reside in Macquarie-street, and are a legally qualified medical practitioner? Yes.

318. Are you aware that the principal modern surgical authorities insist upon the exclusion of erysipelas cases from Hospital wards; close and cleanse the wards for some time after such cases have occurred; and take every possible precaution that no surgical cases, whether arising from accident or operation, shall be

subjected to its influence? I think it is only in severe cases of erysipelas, where there are surgical cases in the same ward, but in mild cases I think it unnecessary. I have never seen any bad result from the non-separation, either in hospital or private practice.

319. *By Mr. Chapman.*—Did you see the statements published in the *Mercury*? I did.

320. Did you think it calculated to mislead the public? I have only been in the Hospital about twice during the last 12 months. It was then very nice and clean. The statement appeared to me to have been written in a very unfriendly spirit, and to be calculated to give to the public a dreadful idea of the general management of the Hospital.

321. Do you consider it in accordance with etiquette for a medical man to go round and visit an Hospital without placing himself in communication with the Medical Officer in charge, to make notes of the cases and publish them to the world? I think it a distinct breach of etiquette.

322. *By the Chairman.*—Has not an old student always the *entrée*? I should think not.

323. What did you know of the condition of the old building and cells on the 22nd August? Nothing.

324. Can you say whether the statements are true or not? I do not know.

DR. BINGHAM CROWTHER *examined.*

325. *By the Chairman.*—Your name is Bingham Crowther, and you are a legally qualified medical practitioner? Yes.

326. What are your qualifications? M.R.C.S., L.R.C.P., L.S.A., (London).

327. Are you aware that the principal modern surgical authorities insist upon the exclusion of erysipelas cases from hospital wards; close and cleanse the wards for some time after such cases have occurred; and take every possible precaution that no surgical case, whether arising from accident or operation, shall be subjected to its influence? Yes: at Guy's Hospital, London, erysipelas cases are instantly removed to a special ward at the top of the building; no operations are done for some time on cases from the infected ward; and, if the form of erysipelas be severe, the wards are closed. Disinfectants are freely used in both cases. I believe such precautions to be necessary.

328. What is your opinion with regard to diphtheric excreta, nasal and salivary, as well as urinary and faecal: ought not such to be immediately removed, and all vessels kept continually disinfected? Yes: that is the common practice.

329. Would it not be highly dangerous for one patient to use the spoon or drinking vessel of another? It would, certainly.

330. Can you give any modern authorities who speak positively as to the necessity of separating erysipelas cases from general wards? Erichsen, and all Guy's Hospital Surgeons.

331. Within your knowledge has a student of any hospital the future *entrée* of it? Certainly.

332. Did you ever go over Guy's Hospital after having been educated there? Yes; and what I found gave no ground for complaint. If I had seen a case of erysipelas in a general ward, I should at once have asked how it was it remained there.

FRIDAY, SEPTEMBER 24, 1875.

JOHN M'KENDRICK *re-examined.*

333. *By the Chairman.*—When you were at H.M. General Hospital can you recollect a boy coming in a cart from the country with diphtheria? Yes.

334. Was a boy named Monks in the same ward with you, and did he help the patient out of the cart? Yes. He helped him from the cart to the old Hospital.

335. What had Monks the matter with him? He had an abscess under the arm.

336. What became of Monks afterwards? He attended to the patients who had the diphtheria in the old Hospital.

337. How long was he employed in that capacity? I am not certain, but I think three or four days.

338. *By Mr. Whyte.*—How do you know the patient arriving in the cart had the diphtheria? I was at the cart and heard his brother tell Dr. Macfarlane he had diphtheria, and he was put in the diphtheria ward.

339. *By Mr. Robertson.*—What became of Monks after the three or four days during which he attended on the diphtheria patients? He was discharged.

MRS. JEFFERY *examined.*

340. *By the Chairman.*—What is your name and address? Sarah Jeffery, Bathurst-street.

341. Do you recollect a visit to H.M. General Hospital by Dr. E. Crowther on Sunday, 22nd August? Yes.

342. Do you recollect the following Wednesday? Yes.

343. What was the condition of the windows, diphtheria ward, and passage of the old building on the Sunday? In a most filthy state.

344. What was the condition of the windows, diphtheria ward, and passage of the old building on the following Wednesday? They were clean.

345. Had you been in the diphtheria ward previously? I had, on two occasions.

346. *By Mr. Robertson.*—What took you there? I went to see a patient, George Bantick, my brother-in-law.

347. *By the Chairman.*—Who was the attendant on the patients, and what did you see him do? The attendant was a lad about 18 years of age. I saw him use the same spoon for George Bantick, and then for the boy Turner, without washing or wiping it.

348. Was the boy acting as attendant a strong boy? I should think the boy required more looking after himself than looking after others.

349. Did you give a gratuity to have spoons cleaned, saliva wiped from the floor, and chamber vessels emptied? Yes; when I stood there and saw he used a spoon for George Bantick, and then noticed he used the same for Turner, I gave him something to wash the spoons before using them again. On my second visit there was no person in the ward but three patients. George Bantick appeared to be in a very weak state, and the boy Turner in a dying state. There was a chamber standing by the side of Bantick's bed; and the saliva, &c. was on the floor, and on the pillow. Seeing everything so dirty, I asked where was the boy I had seen there before? Bantick said, "he supposed outside playing marbles." I then went up to the big building and asked one of the wardsmen, as the chambers were so dirty, if he would go there and clean them, and he went and made the boy do it.

350. At that time what was your opinion of the diphtheria ward? I don't think it was fit to put a pig or a dog in.

351. Did you ever see the place so clean as on the Wednesday following Dr. Crowther's visit? No, I never did, and it has been kept clean ever since.

352. Would you call it more than ordinarily clean on the Wednesday? Yes, I should.

353. What was your remark to old Ned on the Wednesday with regard to cleaning. Can you give his answer? I said, "Old man, how nice and clean you have got the place." He said he would rather have been threshing Tartarian oats than cleaning the windows, as it had not been done for many years.

354. Had the floors been scrubbed before Dr. Crowther's visit? The smear may have been wiped up, but they had not been scrubbed.

355. Do you consider a strong effort had been made to make the place cleaner after Dr. Crowther's visit? I think they tried to make it much cleaner. I am sure it was cleaner after his visit.

356. Did you notice any spittoon before Dr. Crowther's visit? No, but I noticed a nice bright one afterwards.

357. *By Mr. Whyte.*—Have you been employed in the Hospital? Never.

358. Were you ever in any other Hospital? No.

359. *By Mr. Chapman.*—Who was the medical man you saw during your visits? I did not see any. (On the 27th September the Chairman handed in a statutory declaration made by this Witness as to the truth of the above evidence.)

DAVID CHAMP *examined.*

360. *By the Chairman.*—What is your name and address? David Champ, Upper Burnett-street.

361. Were you in the old building of the General Hospital on Wednesday, the 25th August? I was.

362. Had you been there previously? Yes.

363. What was the condition as to cleanliness on Wednesday, the 25th August, compared with what you had seen previously? It was very clean; more than ordinarily so. I had been in the diphtheria ward previously, and found it filthy dirty.

364. Did you on the Wednesday referred to hear Old Ned make any remark about cleaning the windows? Yes, he said he would rather have been threshing Tartarian oats than cleaning the windows, which had not been cleaned for years.

365. Was there a spittoon in the diphtheria ward for the use of Bantick? I saw none.

366. Describe to the Committee how you had seen the ward as to floors, night-stool, chamber-vessels, and bedding? All were covered with the saliva and blood spit up by the patients.

367. *By Mr. Chapman.*—Were you there on Sunday the 22nd, Monday the 23rd, or Tuesday the 24th August? No. I was there on the Wednesday previous. I think during the week a strenuous effort had been made to clean the place up.

(On the 27th September the Chairman handed in a statutory declaration made by this Witness as to the truth of the above evidence.)

DR. BUTLER *examined.*

368. *By the Chairman.*—Your name is Henry Butler, and you are a Fellow of the Royal College of Surgeons? Yes.

369. Are you aware that the principal modern surgical authorities insist upon the exclusion of erysipelas cases from hospital wards; close and cleanse the wards for some time after such cases have

occurred; and take every possible precaution that no surgical case, whether arising from accident or operation, shall be subjected to its influence: do you believe such precautions to be necessary? No: I am not aware of it; and at the time I was connected with two large hospitals in England, St. George's and the Westminster Hospital, no such arrangement was ever made. That was about 32 and 28 years ago respectively. From my own experience I do not think such precautions necessary; but it is my practice to remove patients suffering from erysipelas to such a position in the ward as they are not in the vicinity of patients suffering from wounds. I consider it a precautionary measure, and amply sufficient to meet the case.

370. *By Mr. Chapman.*—Did you see the statements published in the *Mercury*? Yes.

(The statements were read and answered by the Witness separately.)

(2.) "In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months."—That is a matter of opinion; but I do not concur in it. I know, from my reading, that many authorities insist on their separation; but it is not done in French hospitals. I did not see the patient in No. 7 ward. I had a female patient suffering from a slight attack of erysipelas; but she was not separated from the other patients, and got well from erysipelas in 3 days. I don't think the other patients suffered by her presence in the ward. The wards are lofty and well ventilated; and I don't think the patients suffer. The publication of the paragraph would lead to enquiry. It might prevent the uneducated class from coming to the Hospital.

371. What is your opinion as to the main building? I think it clean and well ventilated, and as good a hospital as you would find in a provincial town of a similar size to Hobart Town in England.

372. (8.) "The foul and clean patients are mixed together. This is peculiar to this Hospital."—They are. It has been the practice in this Hospital; and in my experience has been, and is now, the practice in some of the English hospitals also. I think it undesirable,—because it would be well to separate these patients from the more respectable patients.

373. (9.) "There are no means of separating the dying from the living."—Screens are always used. I think this the only plan that can be adopted, as it would be cruel to remove patients into what would be looked upon as a morgue.

374. *By the Chairman.*—Would it not be wise to remove those dying, especially when the subjects of extreme pain, out of the hearing of the other patients? It would be a kindness to the other patients in the ward; but I still adhere to my opinion that it would be cruel to the patient dying; and my practice in such a case is to remove as far as possible all those from the ward who are able to leave it.

375. (10.) "The general condition of the old building is disgraceful. Condemned as unfit for human habitation, it contains numerous patients and helpers in the establishment. Some of the unused rooms are full of straw, filth, and sundries."—The condition of the part of the old building occupied I do not consider disgraceful. The female diphtheria ward is cheerful, clean, and in a much better condition than the habitations which nine people out of ten are placed in. The male ward is clean, but not so cheerful: rather inferior, but adequate for the purpose. The private ward is always clean; and both the patient occupying it and his friends express themselves perfectly satisfied.

376. *By Mr. Chapman.*—Then that paragraph is of a sensational and exaggerated character, calculated to mislead the public? As it is so general in its application to the old building, I am of opinion that it is very much exaggerated. The friends of the patients who have visited them in these rooms during the last six months have expressed themselves well contented with their condition. The officer of the *Barracouta*, who visited a man there, was satisfied with the room in which he was placed. I have seen no filth in the unused rooms, but straw for bedding and unused stores.

377. (11.) "The condition of the surroundings of the old buildings is in several instances disgusting."—I have never seen anything disgusting, or I should have felt it my duty to have reported it. The rooms in the old building are not so good as the front building, but the wards are kept clean.

378. (Postscript.) "P.S.—Since the above notes were taken a strong effort in the whitewash, soap and water, and other lines, has been made to render the place, at any rate, more decent for inspection, even to the extent of clearing out the cow-house, *alias* Christians' water-closet."—I am not aware of it. I have noticed nothing unusual.

379. Do you consider it in accordance with etiquette for a medical man to visit the Hospital, and make notes with a view to publication, without first placing himself in communication with the Medical Officer in charge? I think as a rule that any medical man who is not an officer of the Hospital should in courtesy send for the house surgeon, unless he is on such terms of personal intimacy with the gentleman whose ward he inspects that he is justified in taking the liberty with him; but if he goes in order to take notes he ought to give special intimation of such intention.

380. *By the Chairman.*—Are you not aware that an old student has always the *entrée*? I am aware of it, but he usually makes himself known to the House Surgeon or the Secretary. If I went to England, as an old student of St. George's or Westminster Hospitals, I should make a point of visiting those hospitals, but should make myself known to the House Surgeon or Secretary first.

381. Were you in the old Building on Sunday, 22nd August? I can't recollect.

382. Were you there three days afterwards? I don't know, but I must have been there in the interval.

383. Are you prepared to say the published statements are untrue? I am not prepared to use the word "untrue," against the opinion of another; but I think No. 3 incorrect, No. 2 exaggerated.

384. (4.) "Nothing can be more disgusting than the condition of the cells. A statement of their contents will show this: a mattress on the floor; a leather bucket for a urinal; a human being."—The cells are quite unfit for the purpose for which they are used, but in my visits I have seen nothing disgusting

in them. It is quite true the patient has only a mattress on the floor, for the purpose of his own safety. It is quite true a leather bucket is used as a urinal, as any other utensil would be dangerous to the life of the inmates or the visitor. There is no part of the Hospital requiring reform more than this.

385. (5.) "Hot water is not laid on to the bath-room, thus nullifying important treatment, and in urgent cases risking human life."—It is correct; but at a large expenditure Mr. Falconer, the late Director of Public Works, put up new heating apparatus, which was said to have been very successful in England, and with which I was so satisfied that I put up a similar one in my own house.

386. Were you ever in the back-yard of the old Building? Never, until after the notes appeared; it was then clean.

387. (6.) "The nurses' quarters is one small room, which has to do for sitting and sleeping room."—It is the private room of the head nurse, and is very comfortable.

388. Do you think it right to have straw, clothes, bedding, &c. in an unused room of a building where the sick are treated? I don't think it would have any bad effect. The diphtheria patients all recovered, with one exception, and the disease did not spread in the hospital.

389. *By Mr. Chapman.*—Such a statement as that published in the *Mercury* having been circulated among the Members of the Legislative Council previous to a debate on the hospital, do you think it calculated to mislead? Decidedly.

390. *By the Chairman.*—Are the statements untrue, and wilfully and intentionally written to mislead? I believe they are not true in some particulars, exaggerated in many particulars and calculated to mislead, and such a document as I should not put forth, having a knowledge of the hospital.

391. What is your opinion with regard to diphtheric excreta, nasal and salivary, as well as urinary and faecal. Ought not such to be immediately removed, and all vessels to be kept continually disinfected? Yes, decidedly.

392. Would you sanction the use of a spoon or drinking vessel from one patient to another? No, I would not sanction the use of a spoon or drinking vessel from one patient to another patient unless they were cleansed.

393. Is that the practice in the ward under your charge? It is, and I believe it is strictly carried out. Even the medical men wash their hands between their visits to each patient. I had an opportunity of seeing that the cleansing of the instruments and utensils in the female ward was carefully carried out by Dr. Macfarlane.

394. Had you a patient of the name of Bantick? Yes, three of that name.

395. If a witness before the Committee had stated that the male diphtheria ward was not fit to put a pig or a dog in, what would be your opinion of this statement? I never saw the ward in such a condition.

DR. HALL *re-examined.*

396. *By the Chairman.*—Are you aware that the principal modern surgical authorities insist upon the exclusion of erysipelas cases from hospital wards, close and cleanse the wards for some time after such cases have occurred, and take every possible precaution that no surgical case whether arising from accident or operation shall be subjected to its influence? Do you believe such precautions to be necessary? I am; also that no midwifery cases shall be liable, by any means, to be subjected to its emanations.

I do. In the classification of diseases adopted by the Registrar-General of England, the Royal College of Physicians of London, and in regard to Erysipelas, by the International Sanitary Congress held at Vienna in 1854, this disease is placed in the Zymotic class of diseases defined:—"Diseases that are either epidemic, endemic, communicable, inoculable, capable of propagation from existing foci, or of generation; induced by a specific material, which may be named a *poison*, or by the want of food, or by its bad quality."—*Vide* page 183 of Vol. I. of the Science and Practice of Medicine, by Dr. Aitken, 4th edition, 1866, the standard work of the present time. In the Zymotic class of diseases there are four orders. Order 1, (Miasmatic Diseases) in which Erysipelas is placed, and defined:—"A febrile disease associated with a peculiar eruption of the skin. The inflammation which attends this eruption is apt to spread, and may involve the areolar tissue beneath. As in other diseases of the miasmatic order, it is believed that in erysipelas a specific poison is absorbed and infects the blood, and that after a given period of latency it produces fever."—*Vide* page 353 of Dr. Aitken's Work, Vol. 1.

"*Propagation of the Disease.*—The spread of erysipelas has been so frequently observed, both in the sick-room and in the wards of Hospitals, that no doubt can exist of this disease being communicable by impalpable emanations. In the year 1760 erysipelas spread so extensively through the wards of St. Thomas's Hospital, in London, that it was believed the plague was in the Hospital. Dr. Baillie described it as spreading also in St. George's Hospital, London; and Dr. Cullen in the Hospital at Edinburgh. It has been found to spread extensively on board ship; and Drs. Wells, Watson, and others have given several remarkable instances of its spreading in families. . . . That it is communicable by some palpable virus, was shown by Dr. Willan, &c. Erysipelas also spreads by *fomites*. In Hospitals, wards are occasionally obliged to be cleared out to stop the continued spread of the disease. . . . It has spread extensively, and for long periods, in the Birmingham, Edinburgh, Glasgow, and London Hospitals, and is only got rid of by emptying and whitewashing the wards. . . . The old *Dreadnought* Hospital ship in the Thames was so impregnated with the *fomites* of erysipelas that she had ultimately to be broken up, and a new vessel substituted."—*Vide* pp. 361-2, of vol. 1, of Dr. Aitken's work.

397. What is your opinion with regard to diphtheric excreta, nasal and salivary, as well as urinary and faecal. Ought not such to be immediately removed and all vessels kept continually disinfected? I consider that in diphtheria, the excreta, both nasal and oral, as well as faecal, ought to be immediately

disinfected, removed, and where possible, burnt. I am not so sure of the necessity for the disinfecting of the urine, though it is a wise precaution. All vessels used by diphtheric patients ought to be kept continually disinfected. Handkerchiefs, &c. used for the nose and mouth ought to be burnt, bedding and clothing should never be used again until thoroughly disinfected, and exposed to the air for some time.

398. Would it not be highly dangerous for one patient to use the spoon or drinking vessels of another? Certainly. As far as possible persons labouring under diphtheria should be isolated, and nothing used by them be used by other persons until thoroughly disinfected and cleansed.

The Witness tendered the following extract from *Aithen's Science and Practice of Medicine*, vol. 1, p. 229:—

“With regard to material substances discharged or separated from the bodies of the sick, special precautions of cleanliness and disinfection are necessary. Among discharges or substances separated from the body which it is proper to treat as capable of communicating disease, are those which come, in cases of small-pox from the affected skin; in cases of cholera and typhoid fever from the intestinal canal; in cases of diphtheria and scarlatina maligna from the nose and throat; and the exhalations from the skin and the lungs saturating clothes; likewise in cases of eruptive fevers, measles, scarlatina, r  theln, typhus, and the like, the general exhalations of the sick, and especially so of the convalescing, probably in connection with the desquamation of the skin. The caution which is necessary with regard to such matters must of course extend to whatever may be imbued with them; so that bedding, clothing, towels, and other articles which have been in use by the sick, do not become sources of mischief, either in the house to which they belong, or in houses to which they are conveyed. Moreover, in typhoid fever and cholera, the evacuations should be regarded as capable of communicating a similar specific and infectious property to any night-soil with which they may be mingled in privies, drains, or cesspools (*Thiersch*.) This danger of multiplying the sources of communicating disease must be guarded against by the chemical destruction, decomposition, or disinfection of all the intestinal evacuations as soon as they are passed from the bowels, and certainly before they are thrown away, and so ‘let loose upon the world.’ Above all they must never be cast where they can run or soak into sources of drinking water.”

SATURDAY, SEPTEMBER 25, 1875.

DR. PERKINS *examined*.

399. *By the Chairman*.—Your name is Henry Alleyne Perkins, and you are a legally qualified medical practitioner? Yes.

400. *By Mr. Chapman*.—Have you visited the General Hospital in Liverpool-street? Yes.

401. What is your opinion of the General Hospital, compared with Hospitals in provincial towns in Great Britain? I think it is clean and well ventilated, and compares favourably.

402. (2.) “In wards crowded with patients there were some bad cases of erysipelas, thus not only endangering the lives of those near them, but poisoning the wards for months.”—In England, if erysipelas breaks out in a surgical ward, it is removed to a medical ward or a side room. A case of erysipelas in a medical ward would not endanger the lives of patients near or poison the wards for months, provided there were no wounds in the ward. But if surgical and medical cases occupied the wards together it would be dangerous. I would remove the patient in serious cases, but in a slight case I should only probably remove the patient to the end of the ward. I should take care to have a sufficient space of air between the patient and the nearest surgical case. By adopting that plan I don't think there would be any danger. If the disease takes its own course it is bound to become vesicular.

MONDAY, SEPTEMBER 27, 1875.

The Chairman tendered as evidence the following medical certificate and statement of Mrs. George Bantick:—

THIS is to certify that Mrs. George Bantick is under my treatment, and quite unfit to personally be present and give evidence before the Committee. She only came under my observation late on Saturday last, Sept. 25.

EDWARD L. CROWTHER, M.D.

Hanley Villa, Hobart Town, September 27th, 1875.

I, Mrs. George Bantick, being under medical treatment, and not well enough to attend the Committee, do state:—That I was in the Diphtheria Ward of the Old Building on the Sunday of Dr. Crowther's visit, and that the only regular Attendant my husband had was the boy; and the place was dirty; and it was 8 o'clock that night before George had his tea, owing to this boy. I was also in again next day on the day after Dr. Crowther's visit; and the man “Old Ned the Invalid” had been put on, and he had begun to clean the place up. It was already cleaner than it was the day before.

MRS. GEORGE BANTICK.

Upper Burnett-street, Hobart Town, September 27th, 1875.

ADDENDUM.

Answer to Question 5.—Add at the end of the answer the words: “I had to get a light before I could go there.”