

#### SOCIAL SERVICE AND HOSPITAL EFFICIENCY.

the practical things to do would be to see that the rules and general routine of out-patient clinics are adapted to patients as well as to administrative convenience. The particular blindness of a medical institution is to see diseases instead of persons—a series of more or less abnormal, and therefore interesting limbs, eyes, livers, and hearts incidentally connected with human beings. We need to have the eye that sees people as well as disease. The patient must be looked upon as a human being, a member of society, and results are to be judged by the improvement produced in his health, his working and living efficiency as a member of a family." In a study of clinical efficiency last year in the children's clinic of the Massachusetts General, Dr. Cabot found "that out of 779 patients 57% of miscellaneous cases had only one visit, 50% of children with bronchitis never came back, 45% with chorea made only one visit, and so on through a list of 7 other diseases. Many of these children were doubtless cured, but only a second visit can enable us to be sure of this. They may have died, they or their parents may be too indifferent too busy, or too ignorant to carry out the treatment, or they may have gone to other hospitals or private doctors. Without a home visit or a second visit to the clinic it is impossible to be sure that the bronchitis has not turned out to be tuberculosis, that the choreic child has been kept sufficiently quiet without making it neurasthenic."

Besides curing acute illness, training nurses, advancing scientific research and teaching medical students, hospital efficiency must now include the meeting of the problems of after care, remedying home conditions which cause disease, instructing patients in hygiene and educating the public to co-operation with physicians. This huge wheel of hospital efficiency is kept moving onward by the stream of public benevolence which supports the hospitals, and if any of the spokes or paddles are missing, the energy of the stream is wasted.

The social worker's task in ward and clinic is to fill up the holes in medical work and to make that work tell permanently. She has to meet the problems of patients' lives which, running