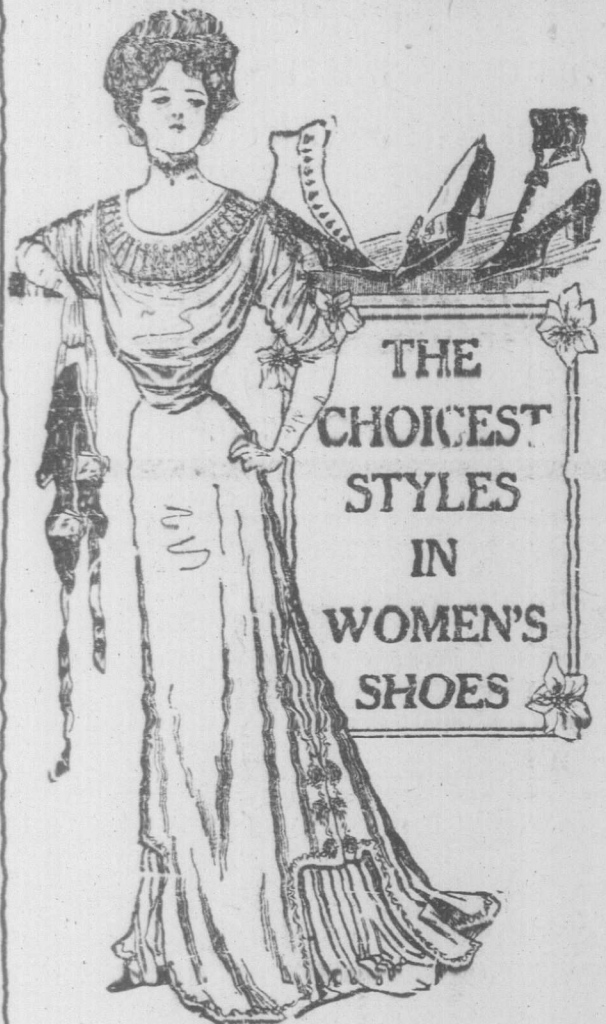


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Anderson's, Water Street, St. John's

The General Hospital: Report of Commissioners, 1915.

To His Excellency Sir Walter Edward Davidson, Knight Commander of the Most Distinguished Order of St. Michael and St. George, Governor and Commander-in-Chief in and over the Island of Newfoundland and its Dependencies:

May It Please Your Excellency,—

On the Seventh day of May last we had the honour to receive from Your Excellency a Commission issued under Chapter 30 of the Consolidated Statutes, Second Series entitled "Enquiries Concerning Public Matters," directing us to inquire into and report to you concerning all matters and things of whatsoever nature relating to the General Hospital and each and all departments of the same.

In pursuance of the authority and instructions thus conveyed to us the Enquiry was commenced on the eleventh day of May last, and has been continued with as much regularity and expedition as the time at the disposal of the Commission would admit of.

The following persons were examined by us:—

Dr. L. E. Keegan, Miss M. Southcott, Miss M. Cullin, Miss E. Redmond, Miss Teresa Carroll, Miss M. Parsons, Miss M. Archibald, Miss A. Payne, Miss R. Cluett, Miss B. Forsey, Miss C. White, Mr. J. Harris, Mr. A. Mews, Miss E. Reid, Miss E. Fenney, Miss M. Lloyd, Miss F. M. Bowden, Miss Annie Cashin, Miss Maud Ryan, Miss N. Powell, Miss E. Hartory, Dr. N. S. Fraser, Dr. T. Anderson, Dr. J. St. P. Knight, Dr. C. Macpherson, Dr. H. Cowperthwaite, Dr. M. C. Roberts, Dr. William Roberts, Miss S. Mallard, Mrs. C. Maher, Mr. H. Tucker, Mr. M. Barron.

We have dealt with the matters set forth in the Commission received by us, and beg to make the following report:

The condition of affairs in connection with the management and conduct of the General Hospital has been the subject of our careful enquiry.

Whilst it is not apparent that there has been any marked diminution in efficiency, or that the patients have materially suffered thereby, it must be admitted that throughout the staff, there has been manifest an absence of both discipline and esprit de corps. A spirit of unrest, mutual distrust and conflicting interests have been everywhere apparent. Factions have been formed and sides taken. Indeed, it is remarkable that the internal disorganization has not wrecked, rather than handicapped, the usefulness of the Institution. That it has not done so is due solely to the professional pride of the various heads of departments, who, however much they have disagreed, have realized a sense of individual responsibility for the care and well-being of the patients. It is manifest, however, that this state of affairs cannot longer continue without undermining those foundations upon which the Institution rests.

The enquiry into the causes that have resulted in the present state of confusion has been prolonged and searching, but it has not elicited much of a helpful or encouraging character. The story throughout has been one of private animosities and personal prejudices. Trifles have been magnified into matters of first importance, and there has been a woeful lack of the spirit of give and take without which it is unreasonable to hope for satisfactory results.

The contributing causes are many, amongst them in the absence of a central authority, the undefined nature of the duties and responsibilities of the various officials, an exaggerated sense of personal powers, and an unfortunate absence of tact on the part of those departmental heads who should be most endowed with that most invaluable gift.

No apparent good could result by apportioning the blame for this unfortunate condition of affairs. That it cannot continue, is obvious. That it may be prevented, is possible. To do this effectively, the duties of the various officials should be strictly defined; and the resignation asked of any official who heretofore fails to cooperate in the common interests with other officials in the establishment. The health, comfort, well-being of the patients are too important matters to be endangered by personal grievances and animosities of individual officers. Your Commissioners are persuaded that all that is necessary on a satisfactory basis is a policy of mutual concession, a discipline that is neither harsh nor erratic, and a cultivation of that esprit de corps which is inseparable from the successful conduct of any Institution.

Most of the disputes at the Institution arise from differences between

Dr. Keegan and Miss Southcott. There is a radical conflict in the views entertained by these two officials in regard to their respective spheres of authority and duty. The position of Dr. Keegan in the Hospital was not defined in his appointment, nor has it been defined since; the position of Miss Southcott was defined in her appointment by the Governor-in-Council but it was apparently never brought to the attention of Dr. Keegan. The definition of Miss Southcott's position in her letter of appointment was not in our opinion free from ambiguity, and the lack of definition in regard to Dr. Keegan's position has led the latter to depend largely on what he considered the powers and duties of Medical Superintendent should be, and what he believed were those of his predecessors. The outcome created a difficult and embarrassing situation can only be changed by a reorganization of the governing powers of the Hospital by laying down its relations to the Government of the Colony, the creating of an independent governing body, and the defining of the powers and duties of the chief officials.

Hospital Legislation

We recommend the preparation of a bill for the consideration of the Legislature, which should have for its main object the defining of the relations of the Board of Works to the Hospital as to grants made by the Legislature for the support of the Hospital and the upkeep of the building and the incorporation of a Board of Governors for the purpose of managing the Institution. This measure should lay down clearly the relations of the General Superintendent to the Board of Governors and should define clearly the powers and duties of this important office, as on these powers and duties and the judicious exercise of them depend largely the success and the smooth working of the Institution.

Board of Works

While we recommend the incorporation of a Board of Governors for the management of the Hospital and its staff, we are of the opinion that the grant made by the Legislature for extensions and alterations of the Hospital building, for the equipment and upkeep of the institution, for supplies for the staff and patients and for salaries of officials and the wages of servants should be made to the Board of Works, which continue to control the expenditure of money votes for purposes of the Hospital, and should continue in charge of the buildings of the Hospital, as is customary in regard to other public buildings. Supplies for the Hospital should be obtained on requisition to the Board of Works by officials assigned. Certificates of supplies received in the Institution should be given to the Board of Works by these officials. Salaries should be paid through the Board of Works on a salary sheet verified by the General Superintendent.

Board of Governors

For the purpose of managing the institution as a Hospital and for the control of the staff in the care of patients we recommend the incorporation of a Board of Governors, constituted of six members, who should be appointed by the Governor-in-Council. The term of office should in general be three years, with one third of the members retiring annually, but eligible for reappointment. This would insure a Board after the first year with a membership of at least two-thirds of members experienced in the working of the Board. For the first two years special arrangements would have to be made for a term of one year for one third of the members, a term of two years for another third and a term of three years for the remainder. In two years the normal working of the members under a term of three years would be insured. We think it highly desirable that care should be exercised to make the membership as free from political influence as possible. We think that it would not be necessary to appoint a paid Board and that desirable citizens could be secured who would be willing to give time and attention to this benevolent object gratuitously. The Board should be given full control of the management of the Hospital and should be empowered to regulate the relations of the General Superintendent with the departmental heads and the relations of the departmental heads with the subordinates of their departments respectively. They should also be empowered to make such other regulations for the government of the Hospital as they may deem desirable. Included in these powers should be the power to suspend and dismiss any member of the staff, and to appoint all members

of the staff and employees, except such appointments as they may delegate to the chief officials. The power to settle all matters of difference which may arise between members of the Hospital Staff, including General Superintendent, Medical Staff Superintendent of Nurses, Assistant Superintendent of Nurses, Night Superintendent of Nurses, Sisters, Graduate Nurses, Matron and Superintendent of Kitchen, Dispenser, X-Ray Operator and Anaesthetist, should be given to the Board of Governors.

Appointments

We recommend also that the Board of Governors shall have the right to suspend or dismiss for cause and to appoint in case of vacancies the following officials:

1. The General Superintendent of the Hospital.
2. Visiting Medical Practitioners and Surgeons, House Surgeons, X-Ray Operator, Anaesthetist, Dispenser.
3. The Superintendent of Nurses, the Assistant Superintendent of Nurses, the Sisters of the Operating Room, and of the Ward.
4. The Matron, the Kitchen Superintendent, the House-keeper of the Nurses' Home.
5. The Store-keeper and Engineer, and any other official or servant, the appointment of whom is not delegated by them to officials of the Institution.

The General Superintendent of the Institution shall attend such meetings of the Board as the latter may require and furnish such information and advice as to the working of the Hospital as may be required of him.

In making appointments on the Medical Staff, or of Anaesthetist, X-Ray Operator, Dispenser, Sisters in Operating Room, the Board shall consider the advice of the General Superintendent.

In making the appointment of Assistant Superintendent of Nurses, the Night Superintendent of Nurses, the Sisters of operating room, and the Sisters of the Wards, the Board shall consider the advice of the Superintendent of Nurses, rendered through the General Superintendent, who shall make such report thereon as he may deem desirable.

General Superintendent

We recommend that the official hitherto appointed as Resident Physician shall be called the General Superintendent of the Hospital. He shall be the chief officers and have charge of the Hospital and all its premises. He shall be responsible to the Board of Governors for the exercise of those duties. His duties shall include responsibility for all the Medical and Surgical work done in the Hospital. He shall exercise control over all departments through the departmental heads, who shall be responsible to him for all the work of the department and all subordinates of the department. These departmental heads shall include the Superintendent and the Engineer. He shall also have directly under him his Secretary, Store-keeper and Male Nurses, and shall have the power of appointing and dismissing such of these officials and servants as are not appointed by the Board of Governors. The powers of the General Superintendent shall not be held to include any right to interfere directly between a departmental head and a subordinate of that head except in his capacity of physician or surgeon in the matter of Medical or Surgical directions in relation to the care and treatment of the patients which may be given by him to the Ward Sister or Nurse in charge. He shall have the right to draw the attention of the departmental head to any conduct or act of a subordinate and make representation thereon, and such departmental head shall be responsible to him for the conduct of the department and the work of any subordinate. He shall also be empowered to give directions to the departmental head as to the work and needs of any department. The division of the wards into septic and non-septic wards shall be at his direction and he shall be authorized to lay down, inter alia, such directions as he may deem right as to nurses in their relations to septic wards. He shall also have full and complete control of the Medical and Surgical services in the wards and operating room. He may also make such representations to the Board of Governors as to the suspension and dismissal of departmental heads, and other officials and servants directly under his control as he may deem fit.

(To be continued)

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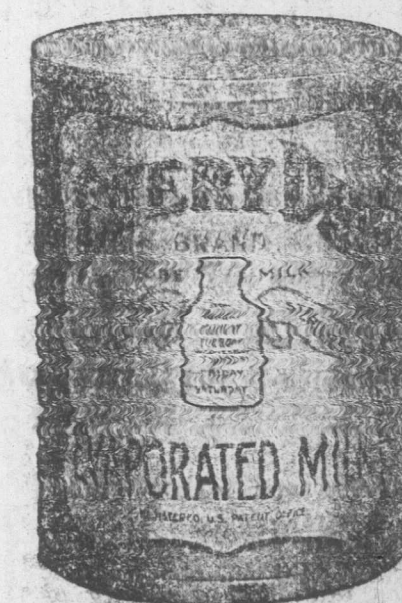
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